Guildford Nursing Home

Performance Report

Cnr Bursill Street & Railway Terrace
GUILDFORD NSW 2161
Phone number: 02 9632 2496

**Commission ID:** 2564

**Provider name:** Guildford Management Pty Ltd

**Site Audit date:** 5 April 2022 to 7 April 2022

**Date of Performance Report:** 12 May 2022

# Performance report prepared by

Katrina Platt, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | Compliant |

# Detailed assessment

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Site Audit; the Site Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

# STANDARD 1 COMPLIANT Consumer dignity and choice

### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

## Assessment of Standard 1

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers, asking them about the requirements, reviewing their care planning documentation (for alignment with the feedback from consumers) and testing staff understanding and application of the requirements under this Standard. The team also examined relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards.

The Assessment Team interviewed consumers who confirmed they are treated with dignity and respect by staff and stated their personal privacy is always respected. Consumers reported staff know what is important to them and felt their identity, culture and diversity were valued and celebrated. Consumers and representatives reported being supported to make connections with others and maintain relationships of choice.

Consumers confirmed they are encouraged to maintain their independence and live the life they choose and expressed they have been supported to make decisions about their care and who is involved. Consumers interviewed confirmed they felt supported to live the best life they can and did not feel restricted in their movements or choice of activity.

The Assessment Team observed consumers to be treated with kindness, respect and dignity by staff and found this was reflected in care documentation. Staff interviewed spoke about consumers respectfully and showed compassion and an understanding of the personal circumstances of the consumers, identifying specific strategies they utilise to maintain identity, culture and diversity. Staff were able to demonstrate an understanding of cultural safety and could describe how this influences the delivery of care. Staff also demonstrated knowledge of the policy and procedures in relation to dignity of risk.

Documentation viewed by the Assessment Team, including consumer files, the lifestyle calendar and organisational policies and procedures, demonstrated care and services provided are culturally safe. The Assessment Team observed information displayed in various languages on notice boards, and noted information provided to consumers was current, accurate and timely. The Assessment Team observed staff to promote and respect consumer’s privacy and keep personal information confidential, in accordance with the organisations privacy and confidentiality policy.

The Quality Standard is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

## Assessment of Standard 1 Requirements

### Requirement 1(3)(a) Compliant

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

### Requirement 1(3)(b) Compliant

*Care and services are culturally safe.*

### Requirement 1(3)(c) Compliant

*Each consumer is supported to exercise choice and independence, including to:*

1. *make decisions about their own care and the way care and services are delivered; and*
2. *make decisions about when family, friends, carers or others should be involved in their care; and*
3. *communicate their decisions; and*
4. *make connections with others and maintain relationships of choice, including intimate relationships.*

### Requirement 1(3)(d) Compliant

*Each consumer is supported to take risks to enable them to live the best life they can.*

### Requirement 1(3)(e) Compliant

*Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.*

### Requirement 1(3)(f) Compliant

*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 COMPLIANT Ongoing assessment and planning with consumers

### Consumer outcome:

### I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

### Organisation statement:

1. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

## Assessment of Standard 2

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – reviewing their care planning documents in detail, asking consumers about how they are involved in care planning, and interviewing staff about how they use care planning documents and review them on an ongoing basis.

The Assessment Team found that overall, sampled consumers considered they feel like partners in the ongoing assessment and planning of their care and services.

The Assessment Team interviewed consumers and representatives who confirmed they are involved in care planning through face-to-face consultation meetings and telephone communication on entry, at regular intervals during their stay and following changes to care. Consumers and representatives described discussing their preferences with staff and understand these are considered when planning and delivering care services, with consumers and representatives confirming they have viewed their care plans.

Staff interviewed described their responsibilities in relation to assessment and care planning of the consumer’s care and service needs in consultation with them and their representatives. Clinical staff demonstrated a coordinated approach to family case conferences, with consumer representatives contacted and invited to attend.

The Organisation was able to demonstrate assessment and planning is completed by staff in partnership with consumers and representatives and identifies consumer’s wishes and goals in relation to advance care planning and end of life planning. Policies and procedures guide practice, with care plan reviews conducted regularly and in consultation with consumers and representatives and other health professionals as required.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 2 Requirements

### Requirement 2(3)(a) Compliant

*Assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.*

### Requirement 2(3)(b) Compliant

*Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.*

### Requirement 2(3)(c) Compliant

*The organisation demonstrates that assessment and planning:*

1. *is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and*
2. *includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.*

### Requirement 2(3)(d) Compliant

*The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.*

### Requirement 2(3)(e) Compliant

*Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.*

# STANDARD 3 COMPLIANT Personal care and clinical care

### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – their care plans and assessments were reviewed, and staff were asked about how they ensure the delivery of safe and effective care for consumers. The team also examined relevant documents.

The Assessment team found that overall, sampled consumers considered they receive personal care and clinical care that is safe and right for them.

The Assessment Team interviewed consumers and representatives who confirmed they get the care they need and were satisfied with the personal and clinical care provided. Consumers and representatives interviewed were satisfied the service effectively manages their high impact risks, like diabetes, pain, falls, weight loss and behaviour, and considered they receive personal care and clinical care that is right for them.

Consumers advised the Assessment Team they have access to Medical Officer’s and other relevant health professionals when they need it, with the Assessment Team observing assessments and care plans were completed and reviewed regularly to manage high-prevalence clinical risks like wound management and pressure care.

The Assessment Team found that consumers and representatives interviewed were happy with the care and services relevant to end of life. Consumers confirmed they have discussed their end of life wishes with staff, on entry or during care consultation processes, and were confident staff would act in accordance with the wishes in their care plan.

The Assessment Team interviewed staff who were able to provide examples of how they provide care and ensure services are delivered in a safe and effective manner and could demonstrate how care and services for each consumer are tailored to their needs. Clinical staff demonstrated frequent ongoing review and updating of strategies to minimise incidents of clinical risk reoccurring, providing examples of high impact or high prevalence risks for individual consumers who smoke and leave the service, consumers receiving oxygen therapy and consumers requiring diabetes management. Staff discussed processes to identify and escalate clinical and care risks and were aware of strategies to manage consumers in line with documented care plans and service policies and procedures.

The Organisation has a range of assessments, policies and procedures to assist and guide staff to ensure best practice is achieved, and care and services provided optimises consumer’s health and well-being. Written procedures relating to infection control and practices for antimicrobial stewardship and antibiotic resistance were observed, with a COVID-19 infection management plan now included in infection control strategies. Infection control training is provided to staff annually.

The Organisation was able to demonstrate staff are aware of how to monitor and respond to consumer’s decline and change in mental health, cognitive or physical function in an effective and timely manner. A range of risk-based assessments in the areas of mobility, nutrition and hydration and skin integrity, falls, behaviour and continence identify at-risk and vulnerable consumers. Policies and procedures relating to end-of-life care with a focus on maximising comfort and preserving dignity were also noted.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

*Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:*

1. *is best practice; and*
2. *is tailored to their needs; and*
3. *optimises their health and well-being.*

### Requirement 3(3)(b) Compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

### Requirement 3(3)(c) Compliant

*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.*

### Requirement 3(3)(d) Compliant

*Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.*

### Requirement 3(3)(e) Compliant

*Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 3(3)(f) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 3(3)(g) Compliant

*Minimisation of infection related risks through implementing:*

1. *standard and transmission based precautions to prevent and control infection; and*
2. *practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.*

# STANDARD 4 COMPLIANT Services and supports for daily living

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – observations were made, consumers were asked about the things they like to do and how these things are enabled or supported by the service and staff were asked about their understanding and application of the requirements. The team also examined relevant documents.

The Assessment Team found that overall, sampled consumers considered they get the services and supports for daily living that are important for their health and well-being, and that enable them to do the things they want to do.

The Assessment Team interviewed consumers and representatives who stated they felt supported to do the things they wanted to do, with independence and quality of life encouraged. Consumers confirmed they are supported to keep in touch with those important to them and are offered a variety of means to connect with family and friends.

Consumers sampled confirmed their condition, needs and preferences had been identified by the service and were known to staff, and included dietary and/or cultural food requirements, emotional needs, and activities they choose to participate in. Most consumers said they enjoyed the food offered and it is of a suitable variety, quality and quantity.

Staff interviewed demonstrated knowledge and understanding of individual consumer’s needs, preferences, life experiences and interests and in line with consumer care plans. Clinical staff reported they consult regularly with the consumer and their families around care and services and liaise with their Medical Officer about clinical and emotional needs and refer to other specialists and services as required.

The Assessment Team found consumer care plan documentation identified consumer goals, dietary needs, activity preferences, and social and personal relationships from information gathered at entry and from ongoing assessment. Further person-centred goal setting is being implemented by the organisation, to assist consumers identify specific goals or life goals. Monitoring processes are in place to ensure equipment is safe, suitable and well maintained, including reactive and preventative maintenance and replacement processes.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(a) Compliant

*Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life.*

### Requirement 4(3)(b) Compliant

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

### Requirement 4(3)(c) Compliant

*Services and supports for daily living assist each consumer to:*

1. *participate in their community within and outside the organisation’s service environment; and*
2. *have social and personal relationships; and*
3. *do the things of interest to them.*

### Requirement 4(3)(d) Compliant

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 4(3)(e) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 4(3)(f) Compliant

*Where meals are provided, they are varied and of suitable quality and quantity.*

### Requirement 4(3)(g) Compliant

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 COMPLIANT Organisation’s service environment

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team observed the service environment, spoke with consumers about their experience of the service environment and interviewed care staff about the suitability and safety of equipment. The team also examined relevant documents.

The Assessment Team found that overall, sampled consumers considered they feel they belong in the service and feel safe and comfortable in the service environment.

The Assessment Team interviewed consumers and representatives who said the service was welcoming, clean, and well-maintained. Consumers confirmed the furniture, fittings and equipment were maintained and suitable to their needs. Consumers interviewed felt safe, were able to personalise their rooms and could freely access both indoor and outdoor areas either independently or with assistance from staff.

Clinical and care staff interviewed described how they ensure the service environment, equipment and consumers rooms are safe and well maintained. Staff indicated they worked as a team and provide consumers with suitable and safe equipment and were knowledgeable about how to raise issues regarding maintenance issues or requests. Care and cleaning staff described how they ensure the service and consumers rooms and equipment are cleaned, including for additional COVID-19 requirements.

The Assessment Team observed the service environment to be clean and well maintained, including consumers rooms and communal bathrooms. Furniture and equipment appeared safe and suitable for consumer use. The Assessment Team viewed documentation which showed the service was effectively responding to, managing, and preventing maintenance issues. Regular servicing and repair of furniture, fittings and equipment are in place through an electronic monitoring system and a thorough cleaning system of all furniture is scheduled and conducted on a quarterly basis.

The Quality Standard is assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) Compliant

*The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.*

### Requirement 5(3)(b) Compliant

*The service environment:*

1. *is safe, clean, well maintained and comfortable; and*
2. *enables consumers to move freely, both indoors and outdoors.*

### Requirement 5(3)(c) Compliant

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 COMPLIANT Feedback and complaints

### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

### Organisation statement:

1. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

## Assessment of Standard 6

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – asking them about how they raise complaints and the organisation’s response. The team also examined the complaints register, complaints trend analysis and tested staff understanding and application of the requirements under this Standard.

The Assessment Team found overall sampled consumers considered they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken.

The Assessment Team interviewed consumers and representatives who said they are encouraged and supported to raise concerns and issues with staff and management and described ways in which they can raise complaints. Consumers and representatives interviewed reported being aware of how to access information in relation to advocacy services. Most consumers and representatives reported that feedback and complaints were actioned in a timely manner, and they are informed of outcomes.

Staff described to the Assessment Team how they supported consumers to raise issues and complaints, and how to escalate matters to senior staff or management if they could not resolve matters themselves. Staff described the principles of open disclosure.

The Assessment Team observed information and pamphlets available for consumers, their representatives and families, on entry and throughout the service including brochures in multiple languages. The Assessment Team observed that issues and complaints were recorded in the complaints/feedback log, where follow up, actions and outcomes were documented. Feedback and complaints are reviewed at both a service and organisational level to improve the quality of care and services and used to inform continuous improvement to the care and service provided to customers.

The Quality Standard is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

### Requirement 6(3)(b) Compliant

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

### Requirement 6(3)(c) Compliant

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

### Requirement 6(3)(d) Compliant

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 COMPLIANT Human resources

### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

### Organisation statement:

1. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

## Assessment of Standard 7

To understand the consumer’s experience and how the organisation understands and applies the individual requirements within this Standard, the Assessment Team spoke with consumers about their experience of the staff, interviewed staff, and reviewed a range of records including staff rosters, training records and performance reviews.

The Assessment Team found overall sampled consumers considered they get quality care and services when they need them and from people who are knowledgeable, capable, and caring.

The Assessment team interviewed consumers and representatives who confirmed staff are kind, caring and respectful and provided examples of how staff respect consumers identity, culture and diversity. Most consumers and representatives said staff are competent in providing the clinical and personal care they need, saying they receive safe and effective care and services from staff who know what they are doing and at a level they are satisfied with.

Staff interviewed reported to the Assessment Team they have sufficient time to complete their duties, can spend quality time with consumers and can also meet their clinical and personal care needs. Staff were knowledgeable of consumer’s likes and dislikes and were observed by the Assessment Team to interact with consumers in a caring and respectful manner.

The Organisation has a workforce framework which guides onboarding, recruitment, performance appraisal and performance management, with associated policies and procedures viewed by the Assessment Team. Mandatory training and competency assessments are undertaken by staff annually which is monitored by management.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Compliant

*The workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.*

### Requirement 7(3)(b) Compliant

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

### Requirement 7(3)(c) Compliant

*The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

### Requirement 7(3)(d) Compliant

*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

### Requirement 7(3)(e) Compliant

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 COMPLIANT Organisational governance

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

To understand how the organisation understands and applies the requirements within this Standard, the Assessment Team spoke with management and staff and reviewed relevant systems and processes relating to the organisational governance underpinning the delivery of care and services (as assessed through other Standards).

The Assessment Team found that overall sampled consumers considered the organisation is well run and they can partner in improving the delivery of care and services.

The Assessment Team interviewed consumers and representatives who reported they are involved in development of their care plans, providing information on their preferences in relation to activities, meal selection, activities of daily living and clinical care. Consumers described attending Resident meetings, providing feedback through surveys and were kept informed about care delivery and services. Consumers and representatives felt safe to provide feedback and had no issues talking with management and staff.

Staff described to the Assessment Team how they support consumers to take risks to ensure they live the best life they can and demonstrated awareness of organisational policies and procedures in relation to antimicrobial stewardship, minimising the use of restraint and open disclosure. Staff reported having access to up-to-date information about consumers and their needs, and that individual care needs are discussed at handover to ensure staff are aware of consumer specific information.

The Organisation was able to demonstrate effective systems and processes in place for information management, continuous improvement, financial governance, workforce governance, regulatory compliance and feedback and compliance. The Assessment Team viewed documentation supporting the organisation has a clinical governance framework, including policies relating to antimicrobial stewardship, minimising the use of restraint and open disclosure. Effective risk management systems and practices to manage high-impact or high-prevalence risks associated with the care of consumers was also demonstrated.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

### Requirement 8(3)(b) Compliant

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

### Requirement 8(3)(c) Compliant

*Effective organisation wide governance systems relating to the following:*

1. *information management;*
2. *continuous improvement;*
3. *financial governance;*
4. *workforce governance, including the assignment of clear responsibilities and accountabilities;*
5. *regulatory compliance;*
6. *feedback and complaints.*

### Requirement 8(3)(d) Compliant

*Effective risk management systems and practices, including but not limited to the following:*

1. *managing high impact or high prevalence risks associated with the care of consumers;*
2. *identifying and responding to abuse and neglect of consumers;*
3. *supporting consumers to live the best life they can*
4. *managing and preventing incidents, including the use of an incident management system.*

### Requirement 8(3)(e) Compliant

*Where clinical care is provided—a clinical governance framework, including but not limited to the following:*

1. *antimicrobial stewardship;*
2. *minimising the use of restraint;*
3. *open disclosure.*

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.