Mt St Vincent Nursing Home & Therapy Centre Inc

Performance Report

75 South Road
ULVERSTONE TAS 7315
Phone number: 03 6425 2166

**Commission ID:** 8801

**Provider name:** Respect Group Limited

**Site Audit date:** 12 July 2022 to 15 July 2022

**Date of Performance Report:** 25 August 2022

# Performance report prepared by

David Lee, 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.

# A picture containing text, invertebrate, hydrozoan  Description automatically generatedSTANDARD 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.

Overall sampled consumers considered that they are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose. Most consumers were satisfied they get the information they need to make choices about their daily activities, care and services.

Consumers and representatives described how they are treated with dignity and respect and the various ways staff make consumers feel valued and accepted.

Consumers confirmed they feel safe at the service, their culture is valued and described how culturally significant events are celebrated at the service.

Consumers and representatives described how consumers are supported to exercise choice, remain independent and are supported to take risks. Consumers confirmed staff respect their privacy and provided examples of staff closing their blinds before attending to their care.

Staff described an understanding of consumers’ individual lived experiences, and how that influences the way they deliver care and services to consumers.

The Assessment Team observed staff supporting consumers with information and offering choices such as asking consumers if they wish to attend activities, go for walks and explaining choices in menu items.

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.*

# A picture containing text, invertebrate, hydrozoan  Description automatically generatedSTANDARD 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.

Overall consumers and representatives described how they are involved in initial and ongoing assessment and planning of consumer care and services. Consumers confirmed they are consulted about their care needs, preferences and end-of-life wishes.

Consumers and representatives expressed satisfaction that consumer care is in partnership with the service and involves a range of health care professionals and referrals to physiotherapists, dietitians and speech pathologists.

Consumers and representatives described the communication they receive from staff, when care and services are reviewed, or when circumstances change. Assessment and care planning documentation are reviewed on a monthly basis and when the consumers’ needs change. The service’s monthly analysis of incidents initiates a review of care needs and interventions. Staff demonstrated knowledge of consumers’ review and monitoring needs following an incident such as falls, skin tears, infections and weight loss.

Staff confirmed they have ready access to information to support consumers through assessment, care planning and associated documentation.

The electronic care management system generates a care plan from a suite of assessments, which are completed in consultation with the consumer and their representatives.

The Assessment Team observed the service’s suite of policies, procedures and risk tools to assist in identifying each consumer’s individual risks that may affect their health and wellbeing. In addition, the service utilises a suite of assessment tools, charts and reviews to identify any potential deficits in consumer health and wellbeing, which are completed on entry and on an on-going basis.

Most consumers and representatives expressed satisfaction regarding communication related to assessment and care planning, however not all consumers and representatives could confirm they had received a care plan or how they would access care plans if required.

The service has staff guidelines to ensure effective communication for consumer assessment and planning. Staff described how the outcomes of care planning are communicated to consumers and representatives.

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.*

# A picture containing text, invertebrate, hydrozoan  Description automatically generatedSTANDARD 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.

Consumers and representatives expressed satisfaction with the personal and clinical care provided. The service initiates appropriate clinical assessments and monitoring for consumers’ care needs. This includes, for example, regular reviews by clinical staff for pain, behavioural strategies, skin integrity, falls prevention and personal care. Consumers subjected to restrictive practices are identified, assessed and monitored regularly in line with best practice and legislative guidelines.

Consumers and representatives expressed satisfaction with the management of consumers’ high-impact risks such as weight loss, falls and swallowing difficulties. Consumers subject to falls have clinical assessments conducted, are commenced on neurological observations and reviewed post falls by an allied professional such as a physiotherapist.

Overall, consumers and representatives confirmed that staff communicate with them regarding their goals and preferences related to end of life wishes with ongoing communication between the family and medical officers.

Consumers and representatives provided positive feedback on the service’s communication in the identification of, and response to, the deterioration or changes in consumers’ health.

Clinical, care staff and other health services have access to up to date information about consumers’ needs and preferences. The service has referral systems in place for other health services such as allied health professionals, medical officers or specialist consultants.

Staff confirmed they are aware of the service’s referral process and referrals inform the care and service provided to each consumer. The service refers to a variety of allied health professionals and external health care experts when consumer care needs require more specialised care. This includes, for example, physiotherapy services, speech pathologists and dietitians. The outcomes of referrals inform the care and service provided to each consumer.

The service has effective strategies and infection control practices to reduce the risk of transmission of infections such as staff education and policies on infection control, outbreak management and antimicrobial stewardship.

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.*

# A picture containing text, invertebrate, hydrozoan  Description automatically generatedSTANDARD 4 COMPLIANTServices 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.

Consumers and representatives interviewed said they are supported to achieve their individual goals. Consumers’ confirmed their needs and preferences are met, allowing them to be independent and have a meaningful quality of life. This includes, for example, outings with a consumer’s social worker.

Consumers and representatives described ways staff support their emotional spiritual and psychological well-being. Consumers confirmed staff support them to attend bible studies and church.

Consumers and representatives described in various ways how consumers are supported to participate within and outside their community and maintain social relationships. Staff confirmed they support the consumers with social outings with meals in the local area or at a relative’s home.

Most consumers and representatives expressed satisfaction that staff share information about their conditions, needs and preferences. Staff confirmed the service has tools to ensure they know the consumers’ daily schedule and when consumers’ have external appointments such as resident of the day assessments, hairdressing appointments, scheduled events, visits or social outings.

The lifestyle coordinator described a range of emotional, social, spiritual and diversional therapy service providers that are engaged in consumer care.

Overall, consumers expressed satisfaction with the quality and quantity of meals provided at the service. The chef was able to explain how consumers’ dietary needs and preferences influence the service menu and through consumer feedback, they know consumers enjoy the food that is served.

The Assessment Team observed a range of equipment to support consumers’ participation and independence. Equipment such as shower chairs, mobility equipment, communal seating and adjustable tray tables was stored neatly in designated areas.

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.*

# A picture containing text, invertebrate, hydrozoan  Description automatically generatedSTANDARD 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.

Consumers and representatives sampled stated they are made to feel welcome and comfortable at the service. Consumers described how their rooms are decorated with personalised items such as photographs, furniture, and special blankets.

Consumers and representatives expressed satisfaction in relation to the cleanliness and maintenance of furniture, fittings and equipment.

The Assessment Team observed the service environment to be clean and well-maintained. Consumers and representatives expressed satisfaction with the cleanliness of their rooms and confirmed that maintenance at the service is attended to promptly.

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.*

# A picture containing text, invertebrate, hydrozoan  Description automatically generatedSTANDARD 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 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.

Consumers and representatives were able to describe a variety of ways to provide feedback such as feedback forms and at resident and relative meetings. Consumers confirmed they felt safe and confident to provide feedback and complaints.

Consumers and representatives were aware of advocacy and other external services available to support them in providing feedback and resolving complaints such as the various advocacy services in Tasmania.

Most consumers were satisfied with the way the service responds to feedback and stated action is taken by the service. Consumers’ felt their feedback is listened to and acted on, and that they receive feedback from management on actions taken.

Most consumers and representatives sampled were satisfied that their feedback is listened to. One consumer provided an example of a recent improvement made in response to their feedback.

The service has written information such as posters and brochures to inform consumers about how to make complaints and their rights in resolving issues. The information is accessible and located in the reception area.

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.*

# A picture containing text, invertebrate, hydrozoan  Description automatically generatedSTANDARD 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.

Overall, consumers and representatives were satisfied with the number of staff available to provide consumer care. Staff from different roles across the service confirmed they are mostly satisfied with the number of staff to enable them to perform their duties.

All consumers and representatives expressed satisfaction that staff interact in a kind and caring manner. Consumers confirmed staff make them feel welcome and are always kind and caring towards consumers.

Consumers and representatives expressed satisfaction with the personal and clinical knowledge that they receive from staff during consumer care. Documentation from the service demonstrates staff have current qualifications relevant to their role. Staff competency is monitored regularly such as the management of consumer blood glucose levels, wounds and medication.

Consumers and representatives expressed confidence that staff are appropriately trained. For example, consumers said that they often observe staff using hand sanitisers and felt safe during the recent COVID-19 outbreak at the service.

All staff confirmed the service could do with additional employees. However, most clinical and care staff said there is sufficient personnel to provide care and services to consumers in a timely manner.

The Assessment Team observed the service’s policies and procedures in relation to staff performance and disciplinary matters. All new staff are placed on a 6 month probationary period, with reviews undertaken during the probation period and then annually.

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.*

# A picture containing text, invertebrate, hydrozoan  Description automatically generatedSTANDARD 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).

Consumers and representatives described how they are engaged in care planning and service provision. All consumers and representatives confirmed they are encouraged to be involved in decision-making and provide feedback informally. For example, management stated they have had recent discussions with consumers about the use of the chapel to support other activities.

The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. Management described how the service develops monthly reports that are incorporated into and reviewed at the monthly board meeting. Management stated this includes clinical data as well as other key performance indicators such as insurable events and workers’ compensation.

The service has effective organisation wide governance systems relating to information management, continuous improvement, regulatory compliance and feedback and complaints. For example, management described how cleaning staff research new cleaning products and organise trials to determine if they are appropriate for the service.

The service has effective risk management systems and practices such as implementing the Serious Incident Response Scheme (SIRS). The organisation has a risk management framework, including policies that support risk management at the service. Management described how high impact and high prevalence risk are informed by policies and procedures, with the overarching clinical governance framework. Management said best practice guidelines, sourced from external bodies, are embedded within policies and are available to staff. Clinical staff explained how they screen consumers to ensure the least restrictive practice is put in place.

The service has effective clinical governance frameworks that provide an overarching monitoring system for clinical care. The service’s framework addresses key clinical governance areas such as antimicrobial stewardship and open disclosure. Clinical staff confirmed they receive training and education in relation to antibiotic use and antimicrobial stewardship. Clinical staff confirmed medical officers do not automatically prescribe antibiotics as first-line therapy when an infection is suspected.

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.