South Western Sydney Community Nursing

Performance Report

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CAMPBELLTOWN NSW 2560  
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**Commission ID:** 201201

**Provider name:** South Western Sydney Local Health District

**Quality Audit date:** 27 April 2022 to 29 April 2022

**Date of Performance Report:** 1 June 2022

# Performance report prepared by

J Taylor, 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.

# Services included in this assessment

**CHSP:**

* Nursing, 4-7XAXPUS, Suite 1, 1 Bolger St, CAMPBELLTOWN NSW 2560

# Overall assessment of Service/s

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Standard 1 Consumer dignity and choice | | | CHSP | Compliant | | |
| Requirement 1(3)(a) | | CHSP | | | Compliant |
| Requirement 1(3)(b) | | CHSP | | | Compliant |
| Requirement 1(3)(c) | | CHSP | | | Compliant |
| Requirement 1(3)(d) | | CHSP | | | Compliant |
| Requirement 1(3)(e) | | CHSP | | | Compliant |
| Requirement 1(3)(f) | | CHSP | | | Compliant |
|  | |  | | |  |
| Standard 2 Ongoing assessment and planning with consumers | | | | | | |
|  | | | CHSP | Compliant | | |
| Requirement 2(3)(a) | CHSP | | Compliant | |
| Requirement 2(3)(b) | CHSP | | Compliant | |
| Requirement 2(3)(c) | CHSP | | Compliant | |
| Requirement 2(3)(d) | CHSP | | Compliant | |
| Requirement 2(3)(e) | CHSP | | Compliant | |
|  |  | |  | |
| Standard 3 Personal care and clinical care | | | CHSP | Compliant | | |
| Requirement 3(3)(a) | | CHSP | | | Compliant |
| Requirement 3(3)(b) | | CHSP | | | Compliant |
| Requirement 3(3)(c) | | CHSP | | | Compliant |
| Requirement 3(3)(d) | | CHSP | | | Compliant |
| Requirement 3(3)(e) | | CHSP | | | Compliant |
| Requirement 3(3)(f) | | CHSP | | | Compliant |
| Requirement 3(3)(g) | | CHSP | | | Compliant |
|  | |  | | |  |
| Standard 4 Services and supports for daily living | | | | | | |
|  | | | CHSP | Not Applicable | | |
| Standard 5 Organisation’s service environment | | | | | | |
|  | | | CHSP | Compliant | | |
| Requirement 5(3)(a) | CHSP | | Compliant | |
| Requirement 5(3)(b) | CHSP | | Compliant | |
| Requirement 5(3)(c) | CHSP | | Compliant | |
|  |  | |  | |
| Standard 6 Feedback and complaints | | |  |  | | |
|  | | | CHSP | Compliant | | |
| Requirement 6(3)(a) | CHSP | | Compliant | |
| Requirement 6(3)(b) | CHSP | | Compliant | |
| Requirement 6(3)(c) | CHSP | | Compliant | |
| Requirement 6(3)(d) | CHSP | | Compliant | |
|  |  |  | | |
| Standard 7 Human resources | | | CHSP | Compliant | | |
| Requirement 7(3)(a) | CHSP | | Compliant | |
| Requirement 7(3)(b) | CHSP | | Compliant | |
| Requirement 7(3)(c) | CHSP | | Compliant | |
| Requirement 7(3)(d) | CHSP | | Compliant | |
| Requirement 7(3)(e) | CHSP | | Compliant | |
|  |  | |  | |
| Standard 8 Organisational governance | | | CHSP | Compliant | | |
| Requirement 8(3)(a) | CHSP | | Compliant | |
| Requirement 8(3)(b) | CHSP | | Compliant | |
| Requirement 8(3)(c) | CHSP | | Compliant | |
| Requirement 8(3)(d) | CHSP | | Compliant | |
| Requirement 8(3)(e) | CHSP | | Compliant | |
|  |  | |  | |

# Detailed assessment

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the services, 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 Quality Assessment report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

# STANDARD 1 Consumer dignity and choice

# CHSP Compliant

### 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

Consumers and representatives interviewed described how the service treats them respectfully and supports them to make informed choices with examples provided of how they are assisted to understand and choose the best clinical interventions to live the life they choose. Consumers and representatives described, in various ways, how interactions with registered nurses were respectful and they felt their needs, identity and preferences were understood.

Organisational documents reviewed, and staff interviewed demonstrated that the consumer is respected, their privacy maintained, they are informed of their rights and supported to exercise choice and independence.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

**Assessment of Standard 1 Requirements**

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| --- | --- | --- |
| Requirement 1(3)(a) | CHSP | Compliant |
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*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

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| --- | --- | --- |
| Requirement 1(3)(b) | CHSP | Compliant |

### *Care and services are culturally safe.*

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(c) | CHSP | 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.*

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| --- | --- | --- |
| Requirement 1(3)(d) | CHSP | Compliant |
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### *Each consumer is supported to take risks to enable them to live the best life they can.*

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| --- | --- | --- |
| Requirement 1(3)(e) | CHSP | Compliant |
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*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.*

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| --- | --- | --- |
| Requirement 1(3)(f) | CHSP | Compliant |
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*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 Ongoing assessment and planning with consumers

# CHSP Compliant

### 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

Consumers and representatives interviewed confirmed in various ways their satisfaction with the care and services received. They described how they are involved in the development of their plan of care in relation to clinical interventions and discussed the invaluable support provided by the nursing staff and the positive impact the service has had on their health and wellbeing.

The service demonstrated systems in place to assess and plan interventions in partnership with consumers and their representatives. Assessment and care planning templates reviewed guide staff to identify consumers care needs goals and preferences. Staff interviewed described how services are regularly evaluated to ensure the delivery of effective care and services.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

**Assessment of Standard 2 Requirements**

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| Requirement 2(3)(a) | CHSP | Compliant |
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*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.*

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| Requirement 2(3)(b) | CHSP | Compliant |
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*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.*

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| --- | --- | --- |
| Requirement 2(3)(c) | CHSP | Compliant |
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*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.*

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| Requirement 2(3)(d) | CHSP | Compliant |
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*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.*

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| Requirement 2(3)(e) | CHSP | Compliant |
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*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 Personal care and clinical care

# CHSP Compliant

### 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

Consumers and their representatives interviewed provided examples of clinical care assistance provided them. They were satisfied with the clinical care services they are receiving, and all confirmed that the nurses providing them services provide them with high level, effective and safe services in accordance with their goals and designed to improve their health.

Review of organisational records found that the service has extensive systems in place to deliver safe and effective clinical care, that they are able to manage high impact and high prevalence risks and respond to deterioration and/or change in the consumer’s health and wellbeing.

Assessments are conducted internally by nurses and risks are identified and consistently documented in consumer documentation and contain evidence of strategies to mitigate the risk. Deterioration in a consumer’s condition is monitored by the clinical care staff. Reviews are conducted at each episode of care and referrals are made to other health professionals and medical specialist teams, as appropriate. The service has specialist knowledge in the management of high impact and high prevalence risks and were able to demonstrate how they manage this per consumer.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

**Assessment of Standard 3 Requirements**

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| Requirement 3(3)(a) | CHSP | Compliant |
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*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) | CHSP | Compliant |
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*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

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| --- | --- | --- |
| Requirement 3(3)(c) | CHSP | Compliant |
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*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.*

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| Requirement 3(3)(d) | CHSP | Compliant |
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*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.*

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| --- | --- | --- |
| Requirement 3(3)(e) | CHSP | Compliant |
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*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.*

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| Requirement 3(3)(f) | CHSP | Compliant |
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*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

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| --- | --- | --- |
| Requirement 3(3)(g) | CHSP | Compliant |
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*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 Services and supports for daily living

# CHSP Not Applicable

### 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

This Standard is deemed not applicable as the service does not provide services and supports for daily living.

**Assessment of Standard 4 Requirements**

|  |  |  |
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| Requirement 4(3)(a) | CHSP | Not Applicable |
|  |  |  |

*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) | CHSP | Not Applicable |
|  |  |  |

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

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| --- | --- | --- |
| Requirement 4(3)(c) | CHSP | Not Applicable |
|  |  |  |

*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) | CHSP | Not Applicable |
|  |  |  |

*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) | CHSP | Not Applicable |
|  |  |  |

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

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| --- | --- | --- |
| Requirement 4(3)(f) | CHSP | Not Applicable |
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*Where meals are provided, they are varied and of suitable quality and quantity.*

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| --- | --- | --- |
| Requirement 4(3)(g) | CHSP | Not Applicable |
|  |  |  |

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

# STANDARD 5 Organisation’s service environment

# CHSP Compliant

### 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

Consumers and representatives interviewed provided positive feedback about the centre environment and that they felt safe and could access the facilities independently. Feedback received indicated that consumers felt a sense of belonging at the centre and the centre staff made them feel welcome.

The Assessment Team observed the service environment, spoke with consumers about their experiences of the service environment and interviewed care staff and management about the suitability and safety of equipment. Evidence was sighted confirming environmental safety checks are carried out on a regular basis and any hazards identified are followed up through the hazard/incident reporting system. The service confirmed maintenance is carried out by the maintenance person employed by the service provider or arranged through a third-party maintenance service provider.

Rosemeadow Community Health Nursing clinic and Bankstown Community Health Nursing clinic was observed during the site visit. Observations by the Assessment Team indicated both clinics to be safe, clean, and well maintained with safe access for consumers. It was observed that both clinics were adhering to COVID-19 best practices for staff, consumers, and visitors.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

## Assessment of Standard 5 Requirements

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| --- | --- | --- |
| Requirement 5(3)(a) | CHSP | 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) | CHSP | 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) | CHSP | Compliant |
|  |  |  |

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

# STANDARD 6 Feedback and complaints

# CHSP Compliant

### 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

During interview, numerous consumers explained they were aware that they can provide feedback to the service and felt comfortable should they make a formal complaint and confirmed they were provided with information regarding advocacy services. Evidence was provided by consumers demonstrating how the service had responded to feedback.

Staff interviewed stated they encourage consumers to provide feedback. Where a consumer wishes to make a complaint about their care and services this is reported via Incident Management System (IMS) to staff and management for their action. Staff demonstrated an awareness of open disclosure and advised they would always apologise to consumers that were not happy with anything regarding their services. They ensure any issues are addressed promptly and make sure to keep consumers informed regarding any actions or outcomes of their feedback.

The service demonstrated feedback and complaints processes in place that ensure consumer complaints are addressed in an open and transparent manner. Complaints were noted to be recorded in a register and policies and procedures guide staff in relation to recording and acting on feedback and complaints. Projects such as “Transform Your Experience” ensures all complaints and compliments made to staff are recorded in the register and known to management and provides opportunity to clients and consumers to provide feedback directly to the organisation.

The Quality Standard for the Commonwealth home support programme service 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) | CHSP | Compliant |
|  |  |  |

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

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(b) | CHSP | Compliant |
|  |  |  |

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

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| --- | --- | --- |
| Requirement 6(3)(c) | CHSP | Compliant |
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*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

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| --- | --- | --- |
| Requirement 6(3)(d) | CHSP | Compliant |
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*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 Human resources

# CHSP Compliant

### 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

Consumers and representatives interviewed stated clinical interventions are provided on agreed days/times. Feedback provided by consumers receiving in-home services indicated most consumers have regular staff attending, who are familiar with their needs and preferences. Consumers interviewed confirmed staff are not rushed when delivering services and consumers advised there are times they may receive a phone call saying a staff member is running late.

The service demonstrated new staff are supported with an onboarding program, with roles and responsibilities of each role clearly defined. The service evidenced staff performance is reviewed regularly, and as required, action is taken promptly if consumers raise any issues regarding staff or clinicians.

Staff interviewed reported feeling supported in their role via frequent team huddles, individual communication and supported to access additional training if needed or requested. The service demonstrated risk huddles occur in all clinical areas and are valued by clinicians as they enhance the delivery and continuity of care.

The service demonstrated a register of qualifications and training completed by all staff which is also monitored through the NSW Department of Health Online Credentialing System. The service also maintains and keeps records of professional registration of clinicians through Staff link, the Recruitment and On Boarding process. The registration is also monitored at the district level by NSW Department of Health.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

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| --- | --- | --- |
| Requirement 7(3)(a) | CHSP | 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.*

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| --- | --- | --- |
| Requirement 7(3)(b) | CHSP | Compliant |
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*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

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| --- | --- | --- |
| Requirement 7(3)(c) | CHSP | Compliant |
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*The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

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| --- | --- | --- |
| Requirement 7(3)(d) | CHSP | Compliant |
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*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

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| --- | --- | --- |
| Requirement 7(3)(e) | CHSP | Compliant |
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*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 Organisational governance

# CHSP Compliant

### 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 Requirements

The organisation has appropriate governance structures, organisational and committee structures, with sound leadership, that ensures good governance in providing services that are delivered in a safe manner and are of a high standard.

The organisation demonstrated a clear strategic direction is provided via the operational plan, quality plan, clinical governance framework and risk management framework of the service. Clinicians demonstrated they have a good understanding of quality and safety. The leadership team demonstrated that they are engaged with consumers and committed to safety and quality and ongoing quality improvement.

Staff and management interviewed advised they can readily access information when they need it. The Policy, Procedures and Guidelines (PPGs) have been developed in alignment with the NSW Department of Health Directives, District PPGs and Primary and Community Health Services PPGs at the service level. Staff and management advised that PPGs are easily accessible for them via the Internet and are continuously reviewed and kept up to date.

Management interviewed provided examples of consumers engagement and how they seek ongoing feedback. Management confirmed representation of five consumers on the formal Primary and Community Health Services Committees and representation of two consumers on the two District Committees. Both committees have Terms of Reference in place to support the participation of consumers. Consumers can also share their experiences on a case-by-case basis through the “Your Experience Matters” surveys (at point of care), or through the Community of Voices consultations.

Management interviewed advised that service risks are monitored and reviewed regularly at the district level and then per stream such as nursing. Improvements are then implemented to mitigate risks.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 8

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| Requirement 8(3)(a) | CHSP | Compliant |
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*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

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| --- | --- | --- |
| Requirement 8(3)(b) | CHSP | Compliant |
|  |  |  |

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

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| --- | --- | --- |
| Requirement 8(3)(c) | CHSP | Compliant |
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*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.*

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| Requirement 8(3)(d) | CHSP | Compliant |
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*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.*

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| Requirement 8(3)(e) | CHSP | Compliant |
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*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.