

## Part 1 – The outcomes Board must meet

**Consumer outcome:** (1) Meaningful and active partnerships with the individual inform organisational priorities and improvements to quality care and services.

- 1 Consumer Governance Committees – Consumer & Clinical.
- 2 Feedback and Surveys – Monthly reporting on feedback and actions taken.
- 3 Resident and family/representatives' meetings

**Consumer outcome:** (2) The governing body leads a culture of safety, inclusion and quality, with a focus on continuous improvement, which embraces diversity and prioritises the rights, safety, health and quality of life of the individual and the workforce.

- 1 Sets the philosophy (mission & vision).
- 2 Has sub-committees for Human Resources, Clinical Governance & Quality
- 3 These committees then report to the board on culture
- 4 Has a model of care that drives actual services in partnership with the individuals with monthly reports to the board on adherence to this model which meets the philosophy in action.
- 5 Continuous Improvements are reported to the board monthly

**Consumer outcome:** (3) The governing body is accountable for the delivery of quality care and services and maintains oversight of all aspects of the organisation's operations. The provider's quality system enables the organisation's performance and continuous improvement.

- 1 Understands the model of care used to deliver services
- 2 Receives monthly reports from management on the quality of care including quality indicators
- 3 Performance is measured through the Clinical Quality and the Consumer Clinical governance sub-committees.

*Consumer outcome:* (4) Risks to the individual, workers and the organisation are identified, managed and continuously reviewed.

- 1 Risks for the individual are identified and reported monthly
- 2 The organization has an overall business risk and continuity plan which is updated at least yearly.
- 3 Risks in the workplace are also identified and reported monthly.

*Consumer outcome:* (5) The provider uses an incident management system to safeguard the individual and acknowledge, respond to, effectively manage and learn from incidents.

- 1 An incident management system is in place for the organization and the board are aware of this process.
- 2 Monthly board reports include reporting of these and the outcomes of the incidents.

*Consumer outcome:* (6) The individual and others are encouraged and supported to provide feedback and make complaints about care and services. Feedback and complaints are acknowledged, managed transparently and contribute to the continuous improvement of care and services. The individual and others can complain without reprisal.

- 1 All feedback, including complaints and compliments are reported monthly to the board with outcomes and the continuous improvements that have resulted from these.

*Consumer outcome:* (7) Information is identifiable, accurately recorded, current and able to be accessed and understood by those who need it. The information of the individual is confidential and managed appropriately, in line with their informed consent. Current policies and procedures guide the way workers undertake their roles.

- 1 Information is kept in our current systems and kept safe and confidential.
- 2 All systems are available to those required to access information.
- 3 The current model of care provides the guide for the way workers are to undertake their roles.
- 4 Compliance with training of workers is reported monthly to the board.

*Consumer outcome:* (8) The provider understands and manages its workforce needs and plans for the future.

- 1 The board sub committee for Human Resources oversees the operation of HR and provides input into managing the workforce.
- 2 Human Resources information is reported regularly to the board.

*Consumer outcome:* (9) The care and services needs of the individual are met by workers who are skilled and competent in their role, hold relevant qualifications and who have relevant expertise and experience to provide quality care and services.

- 1 The board sub committee for Human Resources oversees the operation of HR and provides input into managing the workforce.
- 2 Human Resources information is reported monthly to the board.

*Consumer outcome:* (10) Emergency and disaster management considers and manages the risks to the health, safety and well-being of the individual and workers.

- 1 The board receives a regular update on the emergency and disaster plans and manages risk from reports provided by management.

## Standard 5—Clinical Care

*Consumer outcome:* (1) The governing body meets its duty of care to the individual and continuously improves the safety and quality of the provider's clinical care. The provider integrates clinical governance into corporate governance to actively manage and improve the safety and quality of clinical care for the individual.

- 1 Consumer Governance Committees – Consumer & Clinical.

## Part 2 – The suggested reporting to Board to inform them these are being met

<i>Consumer outcome: (1)</i>	
Meaningful and active partnerships with the individual inform organisational priorities and improvements to quality care and services.	
Requirement	Evidence/Reports
Consumer Governance Committees – Consumer & Clinical.	Minutes of meetings, outcomes, recommendations, items for the CI planner. Completed actions from these committees.
Feedback and Surveys – Regularly reporting on feedback and actions taken.	Outcomes of surveys taken (internal & external) and feedback received with actions included in the CI planner. Completed actions from the surveys and feedback.
Resident and family/representatives' meetings	Minutes of these meetings with any actions to be taken included in the CI planner. Completed actions from these.

<i>Consumer outcome: (2)</i>	
The governing body leads a culture of safety, inclusion and quality, with a focus on continuous improvement, which embraces diversity and prioritises the rights, safety, health and quality of life of the individual and the workforce.	
Requirement	Evidence/Reports
Sub-committees for Human Resources, Clinical Governance & Quality - These committees then report to the board on culture	Minutes of meetings, outcomes, recommendations, items for the CI planner. Completed actions from these committees.
Model of care that drives actual services in partnership with the individuals with regularly reports	Audit outcomes from reviewing the actions included in the model of care. Improvements are listed in the CI planner and actions against these are reported.
Continuous Improvements are reported to the board regularly	An update overall is provided at each meeting showing those outstanding and completed and improvements from those completed.

*Consumer outcome: (3)*

The governing body is accountable for the delivery of quality care and services and maintains oversight of all aspects of the organisation’s operations. The provider’s quality system enables the organisation’s performance and continuous improvement.

Requirement	Evidence/Reports
Receives regularly reports from management on the quality of care including quality indicators	Reports detail performance (past and present) against the Quality Indicators. Reports include benchmarking information and areas where improvements have been or could be made. These improvements will be contained in the CI planner.
Model of care that drives actual services in partnership with the individuals with regularly reports	Audit outcomes from reviewing the actions included in the model of care. Improvements are listed in the CI planner and actions against these are reported.
Performance is measured through the Clinical Quality and the Consumer Clinical governance sub-committees.	Minutes ad reports from these meetings to be provided as reports.

*Consumer outcome: (4)*

Risks to the individual, workers and the organisation are identified, managed and continuously reviewed.

Requirement	Evidence/Reports
Risks for the individual are identified and reported regularly.	Reports on the risks register across all residents/clients outlining any immediate risks and actions taken to minimize these risks.
The organization has an overall business risk and continuity plan which is updated at least yearly.	This plan is reviewed yearly and an update provided to the board as well as any issues that may arise on a regular basis.
Risks in the workplace are also identified and reported regularly.	Report on any identified risks during the period and actions taken to address these.

*Consumer outcome: (5)*

The provider uses an incident management system to safeguard the individual and acknowledge, respond to, effectively manage and learn from incidents.

Requirement	Evidence/Reports
An incident management system is in place for the organization and the board are aware of this process.	Report on any incidents occurring during the period and actions taken to address these.
Regular board reports include reporting of these and the outcomes of the incidents.	The outcome and actions required to close out the incident, including items that constitutes an improvement in the CI planner and report on actions.

*Consumer outcome: (6)*

The individual and others are encouraged and supported to provide feedback and make complaints about care and services. Feedback and complaints are acknowledged, managed transparently and contribute to the continuous improvement of care and services. The individual and others can complain without reprisal.

Requirement	Evidence/Reports
All feedback, including complaints and compliments, are reported regularly to the board with outcomes and the continuous improvements that have resulted from these.	Report detailing each feedback, complaints or compliments during the period and actions taken to address these with improvements in the CI planner. Included in this are survey results seeking feedback on the complaints process and people feeling safe.

*Consumer outcome: (7)*

Information is identifiable, accurately recorded, current and able to be accessed and understood by those who need it. The information of the individual is confidential and managed appropriately, in line with their informed consent. Current policies and procedures guide the way workers undertake their roles.

Requirement	Evidence/Reports
Information is kept in our current systems and kept safe and confidential.	Report detailing any incidents relating to data or privacy breaches.
All systems are available to those required to access information.	Report on the update of systems used, and their performance.
The current model of care provides a guide for the way workers are to undertake their roles.	Report on any updates made to the model of care that has come from the CI planner.
Compliance with training of workers is reported regularly to the board.	Report on the level of compliance by workers as well as traineeships, qualifications being undertaken, etc.

*Consumer outcome: (8)*

The provider understands and manages its workforce needs and plans for the future.

*Consumer outcome: (9)*

The care and services needs of the individual are met by workers who are skilled and competent in their role, hold relevant qualifications and who have relevant expertise and experience to provide quality care and services.

Requirement	Evidence/Reports
The board sub committee for Human Resources oversees the operation of HR and provides input into managing the workforce.	Board sub-committee report for Human Resources.
Human Resources information is reported regularly to the board.	Report on the update of Human Resources including staff turnover, survey results, compliance with EBA's and/or Awards.

*Consumer outcome: (10)*

Emergency and disaster management considers and manages the risks to the health, safety and well-being of the individual and workers.

Requirement	Evidence/Reports
The board receives a regular update on the emergency and disaster plans and manages risk from reports provided by management.	Report on any actions or changes to plans on a regular basis.

*Consumer outcome: (1)*

The governing body meets its duty of care to the individual and continuously improves the safety and quality of the provider's clinical care. The provider integrates clinical governance into corporate governance to actively manage and improve the safety and quality of clinical care for the individual. – Clinical Governance

Requirement	Evidence/Reports
Consumer Governance Committees – Consumer & Clinical.	Minutes of meetings, outcomes, recommendations, items for the CI planner. Completed actions from these committees.