



**National Premier**  
Disability Services Pty Ltd.

# **National Premier**

# **Disability**

# **Services**

## **Policies and Procedures - Manual**

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## CONTEXT OF NATIONAL PREMIER DISABILITY SERVICES PTY LTD.

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### Understanding National Premier Disability Services and our context

National Premier Disability Services is NDIS registered Service Provider based in Blacktown, New South Wales. We service the Greater Western Sydney Region and beyond.

## OUR SERVICE DELIVERY APPROACH

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National Premier Disability Services provide services within a holistic person centred approach. We operate within a philosophy of individual risk management based on supporting dignity of risk for each person accessing our services. We provide therapeutic services based on the best interest of each individual, their family and support network to build capacity and independence for people accessing our services.

We are committed to providing early intervention services and implement active engagement strategies to support access to our services. We strive to provide a safe environment for all our stakeholders including staff, volunteers and people using our services. We ensure premises are accessible and provide a flexible and responsive service which is able to respond to each individual's needs.

We identify barriers to service through our consultations with stakeholders, feedback processes and strategic planning and put systems in place to ensure these barriers are addressed.

We respect that we have a diverse community and strive to support people to access our services using a range of resources which are appropriate to each person's needs. This includes but is not exclusive to: culture, religion, Aboriginal and Torres Strait Islander background, disability, age or developmental stage.

## OUR PHILOSOPHY

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National Premier Disability Services is dedicated to giving people with disabilities greater choice, control and freedom – empowering them to live life on their own terms across New South Wales. National Premier Disability Services supports people with disabilities by enabling them to realise their personal aspirations and goals. For us, having a disability should never limit the degree of choice and control people have over their own lives, and we work hard to make sure the people we support get a fair go.

There's a world of opportunities and experiences out there, and we are here to help people with disabilities make the most of it. At National Premier Disability Services, we believe in challenging the status quo to create a society that is fairer and more inclusive of people with disabilities. For us, there's nothing more satisfying than discovering where someone wants to go and supporting them in getting there - bringing family members, friends, and carers along on the journey.

Relentless in our pursuit of inclusion and equality, we are committed to ensuring people with a disability are given the respect and opportunities they deserve. Sometimes this means speaking out against injustice, sometimes it's a matter of changing people's perceptions and behaviour through education. We're not afraid to ask the tough questions and have thought provoking conversations - whatever it takes to inspire positive change.

## NATIONAL PREMIER DISABILITY SERVICES AND NDIS

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At National Premier Disability Services, we are excited about the improved outcomes the NDIS will bring to people with a disability across Australia, and we are here to help make these positive changes happen.

We are committed to innovation as well as best practice, evidence-based service delivery, to ensure we are constantly striving for better and smarter ways to meet the needs, desires and goals of our clients. Our service delivery is centered on our clients and involves them and their supporters in every aspect of their care. We pride ourselves on our quality service delivery and supporting clients to participate in and belong to the community, while becoming independent, autonomous directors of their own care.

National Premier Disability Services is a Registered NDIS Provider and complies with all New South Wales and Commonwealth Government requirements for the delivery of quality and safe disability support services.

## VISION

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National Premier Disability Services vision is a society that is fairer and more inclusive of people with a disability

## MISSION STATEMENT

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National Premier Disability Services mission statement is to fulfil the physical, emotional, social, intellectual and spiritual needs of people with disabilities and their families and carers, to help them develop their full human potential

## VALUE STATEMENT

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All of National Premier Disability Services operations and activities are built upon our **Values** of:

- Inclusion and Equality
- Respect
- Choice, Control and Freedom
- Innovation Holistic, person-centered care

<b>Policy Code</b>	<b>G001.01</b>
<b>Person Responsible</b>	<b>Director</b>
<b>Status (Draft/Released)</b>	<b>Released</b>
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## GOVERNANCE AND MANAGEMENT

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### Purpose and Scope

The purpose of this policy is to demonstrate National Premier Disability Services' commitment to sound governance, and to document how governance is carried out and reviewed within National Premier Disability Services.

Documents relevant to this policy include:

- New South Wales Disability Services Act 1993
- NSW Disability Services Standards
- *National Disability Insurance Scheme (NDIS) Act 2013 (Cwth)*

This policy applies to all National Premier Disability Services staff.

### Policy Statement

National Premier Disability Services has accountable and transparent governance arrangements in place that ensure it:

- complies with relevant legislation, regulations and contractual arrangements;
- supports and develops its staff; and
- Delivers quality and safe services to its clients.

National Premier Disability Services' governance processes promote the principles outlined in New South Wales Disability Services Act 1993, the values of the National Disability Insurance Scheme (NDIS) and the NSW Disability Services Standards and corresponding Standards.

### Procedures

- National Premier Disability Services is a Private Limited Liability Company
- National Premier Disability Services is governed by a Board of Management Committee, comprised of its Director and Manager and Executive employees.
- National Premier Disability Services' organisational structure is set out in its organisational Chart, replicated below. The chart and this policy and procedure will be updated to include Support Worker, Team Leaders as National Premier Disability Services grows.
- Management Committee staff will report monthly to the Committee on their areas of responsibility and will seek weekly reporting from their staff on program, financial, data, IT and service quality performance (including client feedback and complaints).

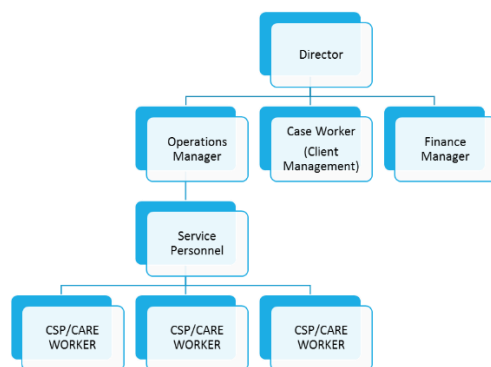
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## ORGANISATION CHART

### Legal Structure

National Premier Disability Services Pty Ltd is a private company with the ABN: **68 623 372 458**

### Organisation chart



## STRATEGIC INTENT

National Premier Disability Services conducts 2 yearly strategic planning

## SERVICES AND PROGRAMS

National Premier Disability Services offers a range of services including:

- Plan Management
- Assistance with transport
- Community participation
- Household tasks
- Assist in prod Household Task

## ROLES, RESPONSIBILITIES AND AUTHORITIES

Staff are given the authority to perform their allocated responsibilities and these authorities are detailed in staff position descriptions.

The roles and responsibilities of the Board, Director, Managers, and staff are outlined in their respective Duty Statements.

### **Board of Management (BOM)**

The Board of Management consists of up to 5 members; Directors, Secretary, Treasurer, Managers. Two are elected by National Premier Disability Services shareholders and other two can be appointed by the Directors. A variety of skill sets, and experience are represented by the Board members, and relevant orientation and training is provided.

The roles and responsibilities of the Board include:

- To develop and monitor the Company's mission, long term plans and strategic goals;
- To represent the interests of all stakeholders in the Company;
- To determine the employment conditions of the Company's Directors, and monitor the performance;
- To monitor and accept legal responsibility for the statutory, financial and asset management of the Company;
- To oversee the development of policy and implementation of the Quality Assurance Strategy;

To publicly promote the work of the Company and contribute to its profile in the community. Stakeholders of National Premier Disability Services include the client, staff, parents, families, customers, advocates, government, other agencies, and the community.

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### **The Directors**

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- Responsible for the daily operation of National Premier Disability Services;
- Undertake the policy and direction of the Board of Management using the resources available;
- Provide effective leadership and authority;
- Report regularly to the Board and recommend Board training;
- Oversee hiring, evaluation and any necessary termination of staff;
- Communicate with families, funding agency and the community;
- Provide leadership in service delivery;
- Set specific salaries based on Board guidelines/instructions;
- Decide the Company's matters relating to responsibilities of staff.
- Assist and monitor the OH&S BOM;
- Provide leadership, support and supervision to Managers;
- Implement change relating to strategic goals in consultation with the BOM;
- Liaise and negotiate with relevant external bodies, community agencies, and government funding representatives and business representatives;
- Support Managers in matters of quality assurance and person centred focus, financial, marketing/public relations, and Management reporting.

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### **Service Manager**

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- Individual managers are responsible for their particular work area and report to the director on their work operations;
- Coordinate all staff and people with a disability within their respective service;
- Develop and follow through strategic planning initiatives;



- Produce and monitor financial budgets;
- Ensure that adequate safety measures are taken within their services;
- Ensure training to all staff to ensure they have the necessary skills to undertake their duties effectively and efficiently;
- Ensure people with a disability are provided with the support that is appropriate for their individual needs;
- Be aware of and conversant with the Disability Services Act 1991, as it relates to services for people with disabilities and with the NSW Disability Services Standards;
- Ensure all staffs are aware of the needs of the client, program requirements, schedules, developments etc. through staff meetings.

### **Finance Manager**

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The Finance Manager has oversight of and responsibility for all financial matters pertaining to National Premier Disability Services, including day-to-day operations and finance and resource management. Responsibilities include:

- support the Director and Manager and Operations Manager in providing leadership to National Premier Disability Services and all staff, and creating an organisational environment that supports positive working relationships, innovation and the delivery of quality services; work with Aussie Premier Healthcare Services independent accountant on National Premier Disability Services finances and be fully informed about the financial position of National Premier Disability Services at all times;
- work with National Premier Disability Services Directors and Manager and independent accountant to prepare the Annual Budget and forecasts for the consideration of the Management BOM;
- work with National Premier Disability Services' Operations Manager and Client Manager to ensure all operational needs are being met;
- work with the Management BOM and Client Manager in particular to ensure all service delivery is financially sustainable;
- prepare day to day cash flow forecasts and reconcile all bank statements;
- conduct a financial reconciliation each month and prepare a monthly Financial Report to be submitted to the Management BOM;
- report to the Management BOM on a monthly basis regarding financial risks;
- monitor performance; accounting records and internal controls;
- support the achievement of the objectives established in the Strategic and Operational Plans to ensure they are implemented across National Premier Disability Services;
- advise staff generally about their entitlements and complying with GST and FBT requirements;
- manage and pay accounts, insurances and employee entitlements such as wages, superannuation, leave, bonuses and exit payments, in accordance with legislation and relevant awards;
- manage the allocation of National Premier Disability Services resources to staff, including

- vehicles, office furniture, stationery, keys, mobile phones and other IT equipment;
- manage government funding acquittal processes;
  - undertake the NDIS claims process using the NDIA Portal;
  - undertake all required End of Financial Year processes;
  - submit quarterly PAYG and GST payments to the Australian Tax Office;
  - maintain up-to-date Employee Declaration Forms and Superannuation Guarantee Charge Forms and processes; and
  - identify and enact cost efficiencies and process improvement opportunities throughout National Premier Disability Services.

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### Client Manager

The Client Manager has oversight of and responsibility for the planning and delivery of National Premier Disability Services' services and ensuring positive outcomes for clients and their families and carers. Responsibilities include:

- support the Directors and Manager and Operations Manager in providing leadership to Aussie Premier Healthcare Services and all staff, and creating an organisational environment that supports positive working relationships, innovation and the delivery of quality services;
- support the achievement of the objectives established in the Strategic and Operational Plans;
- ensure staff and service compliance with all aspects of the New South Wales *Human Services Quality Standards* and all other legal and contractual compliance requirements;
- demonstrate understanding of and commitment to National Premier Disability Services *Risk Management* and *Workplace Health and Safety Policies and Procedures* and ensure all risks and hazards are identified and addressed;
- report to the Operations Manager on a monthly basis regarding:
  - Service delivery risks;
  - Service delivery performance; and
  - Workplace health and safety including incidents.
- provide direct supervision to all support worker staff, including day-to-day support, direction, mentoring and professional development
- provide support and advice on complex case management, service delivery issues and critical

incident response;

- keep up to date with and support staff to use strengths-based approaches to identifying client needs and life goals;
- promote community activities and events to clients which may assist them to meet their needs, goals and aspirations;
- provide regular briefings for staff through a program of monthly team meetings, encourage feedback and ensure that this is dealt with in an appropriate manner;
- promote a client focused culture across all service delivery areas;
- take an interest in all people supported by National Premier Disability Services and respect each client and family;
- develop high quality and responsive services that promote the principles outlined in Part 2 of the *Disability Services Act 2006* (NSW), the values of the National Disability Insurance Scheme (NDIS) and the NSW Disability Service Standards and corresponding Standards, as per National Premier Disability Services, Service Access and Delivery Policy and Procedure;
- advocate on issues affecting service users and actively participate in relevant networks and forums to maximise outcomes for National Premier Disability Services, its clients and their families and carers;
- build and maintain strong partnerships with key agencies to improve services;
- ensure long term sustainability of services through innovation and outstanding service delivery;
- seek regular feedback from clients and their families and carers and staff on service delivery, using a range of methodologies that are appropriate to the groups involved;
- conduct regular program reviews to ensure services are appropriate to client needs;
- undertake all duties with an awareness of and sensitivity to diversity and equity in accordance with National Premier Disability Services' mission, vision and policies and applicable legislation;
- ensure risk, workplace health and safety, continuous improvement, service delivery issues and performance and development and training requirements are discussed at all team meetings;
- adopt a continuous improvement approach to own working practices and ensure this is reflected in all areas of service delivery;
- be professionally accountable for autonomous decisions that impact on clients and staff, made within the bounds of National Premier Disability Services' Policies and Procedures and with management support;
- support the work of National Premier Disability Services' disability support workers, as set out in the Service Access and Delivery Policy and Procedure;
- ensure an appropriate standard of care, supervision, safety and support is provided to all clients;
- provide advice and opinion to professionals in other disciplines and agencies as required;
- lead or participate in client conferences, including family decision making, with other professionals.

## Staff

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- Fulfil the requirements of their position description, the Privacy Code of Conduct, agency objectives and strategies, and be supported in their position by Management;

- Under the direction of Management, carry out the delivery of service;
- Are aware of the policies, procedures and Privacy code of conduct and accept appropriate training and support to carry them out.

## **BOARD OF MANAGEMENT TERMS OF REFERENCE**

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**TITLE:** National Premier Disability Services Board of Management Terms of Reference

### **RESPONSIBILITIES**

#### **The BOM:**

- is responsible for the governance of National Premier Disability Services;
- sets National Premier Disability Services strategic direction and monitors progress towards the achievement of outcomes; and
- is accountable for National Premier Disability Services and its staff, clients and service delivery in accordance with all relevant legislative and compliance requirements

### **MEMBERSHIP**

The BOM is comprised of National Premier Disability Services Directors and Manager, Operations Manager, Client Manager and Finance Manager.

The Director and Manager of the business is the BOM's Chair. If at any meeting the Chair is not present, the other members present shall choose one of their number to act as Chair of that meeting.

### **SECRETARY**

The Secretary of the BOM is National Premier Disability Services Operations Manager.

### **QUORUM**

The quorum necessary for the transaction of the business of the BOM is two members, one of whom must be the Directors and Manager or his nominee.

### **FREQUENCY OF MEETINGS**

Meetings are held monthly and arranged by the Secretary of the BOM.

In addition to the routine meetings of the BOM, any member of the BOM may at any time request the Secretary of the BOM to arrange a meeting if they consider one is necessary.

### **CONDUCT OF BUSINESS**

Decisions of the BOM are made by majority decision. In the case of an equality of votes, the Chairman of the BOM has a second or casting vote.

## ATTENDANCE AT MEETINGS

All BOM members are expected to attend every BOM meeting, unless expressly authorised not to by the Chair.

Any staff member, client or other stakeholder, if requested by the Chairman of the BOM, may attend BOM meetings. At least one client, family member, carer, advocate, staff member, representative of other service providers or government representatives will be invited to attend BOM meetings on at least a quarterly basis.

## DUTIES

The duties the committee must undertake include but are not limited to:

- manage and direct National Premier Disability Services and ensure it is run within the governance framework agreed by the BOM and with a focus on the interests of clients, their families and carers;
- promote best practice, continuous improvement and an open, supportive, respectful culture that encourages and supports staff to make complaints and report concerns without fear of retribution;
- monitor and plan for the changing needs of the service and clients, their families and carers as well as other stakeholders;
- take responsibility for all of National Premier Disability Services legal, financial and industrial obligations;
- endorse and monitor the effective implementation of Policies and Procedures that support good governance, quality service delivery and continuous organisational improvement and which comply with:
  - *Disability Services Act 2006 (NSW)*;
  - *National Disability Insurance Scheme Act 2013 (Cwth) and NDIS Rules*;
  - *Disability Discrimination Act 1992 (NSW)*;
  - *Discrimination Act 1991 (NSW)*;
  - *Sex Discrimination Act 1991 (NSW)*;
  - *Workplace Health and Safety Act 2011 (NSW)*;
  - *Fair Work Act 2009 (Cwth)*;
  - *Aged Care Act 1997 (Cwth)*;
  - *Industrial Relations Act 1999 (NSW)*;
  - *Workers Compensation and Rehabilitation Act 2003 (Cwth)*;
  - *National Standards for Disability Services*; and
  - any other legislation or compliance requirements applicable to National Premier Disability Services' service delivery.
- review and understand National Premier Disability Services' initial Business Plan;
- develop, work to and annually review a three-year Strategic Plan, which identifies the key outcomes that National Premier Disability Services wants to achieve;
- develop and implement annual Operational Plans to support implementation of the Strategic Plan, and monitor progress towards achievement;
- endorse and monitor performance against National Premier Disability Services' Risk Management Plans, Continuous Improvement Plans and Annual Budgets;

- monitor National Premier Disability Services' performance in terms of governance, compliance, risk, continuous improvement, service delivery, financial sustainability, human resources and health and safety;
- take responsibility for the overall management of paid staff and volunteers including initial employment and dismissal (where necessary), setting areas of staff responsibility, determining terms and conditions of employment and monitoring compliance with statutory and industrial obligations;
- approve and oversee the implementation of a process of quality assurance and continuous improvement of services;
- develop, implement and review, in consultation with stakeholders, National Premier Disability Services WHS programs, on an annual basis;
- oversee an effective and efficient complaints handling and grievance resolution system;
- promote cooperation, coordination and joint effort with other service agencies, both locally and state-wide;
- work to ensure a positive public perception of National Premier Disability Services;
- provide strategic advice to the Directors and Manager and Financial Manager on the expectations of the community, clients and potential clients in relation to the delivery of services and on other aspects of the service when required;
- actively participate in the hands-on work of National Premier Disability Services including administration and service delivery when required;
- receive and approve all monthly financial statements;
- deal with service issues and problems as they arise and provide the necessary support and assistance;
- review the adequacy and effectiveness of National Premier Disability Services internal controls and risk management systems; and
- manage senior leadership succession planning; and
- act honestly and ensure compliance with all legal and contractual obligations and reporting requirements.

## **AGENDA AND MINUTES**

- BOM meeting Agendas are prepared by the Chair and circulated to all BOM members no later than two business days prior to the BOM meeting. Standing Items on the Agenda are:
  - Declarations of Conflicts of Interest;
  - Endorsement of the minutes of the previous meeting;
  - Addressing of matters arising from the previous meeting;
  - Reports to the BOM on:
    - Risk (including as it relates to client safety and wellbeing);
    - Financial performance;
    - Continuous improvement (including staff and client feedback and complaints);
    - Service delivery performance (including in accordance with the Strategic Plan and any other special issues requiring BOM consideration);

- Compliance (including criminal history screening status);
  - Human resources (including training and development);
  - Workplace Health and Safety (including incident reports);
  - Review and evaluation of performance in relation to the BOM's governance responsibilities; and
  - Review of progress against National Premier Disability Services Strategic and Operational Plans.
- General business.

Minutes of BOM meetings are taken by the Secretary or their nominee and include the names of all present and absent members and invitees, summaries of items discussed, and all decisions made.

The BOM Secretary circulates the Minutes to all members of the BOM and, where relevant, on the instruction of the Chair of the BOM, to other stakeholders, within 2 business days of each meeting.

## **Planning**

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Actions to address risk and opportunities

National Premier Disability Services conducts yearly planning and the plan is approved by the Chair of BOM. Monitoring of the plan occurs BOM meeting on an annual basis.

National Premier Disability Services has processes in place to plan for and address risks which includes integrating and implementing actions into our QMS and evaluating the effectiveness of our actions. Actions taken to address risks are proportionate to the potential effects of service and customer satisfaction.

Planning includes identifying what actions will be done, what resources will be required, who will be responsible, timeframes for review and completion and how results will be evaluated.

### ***Refer Risk Management Procedure***

### ***Refer Continuous improvement procedure***

Managing resources

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National Premier Disability Services has determined the resources (including people) needed to establish, implement, maintain and improve our business. In determining the need for resources management will consider what existing resources are available and which goods or services will be sourced externally.

Communication

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Internal and external communication processes are in place. These include a range of meetings which are convened regularly including:

- **Management review – bi annually**
- **OHS Committee – bi annually**
- **Staff meetings – as required**
- **Alliance meetings**
- **Network meetings**
- **Funder meetings**
- **External contractor meetings**
- **Consumer forums**

As appropriate terms of reference and fixed agendas are documented.

#### Documented Information

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A document control process is in place – refer to **Document and Records Control Policy/Procedure**.

#### Service delivery

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Service delivery planning occurs and includes understanding the requirements of our customers, external regulatory requirements, funding obligations and requirements of other interested parties.

Regular review of these requirements occurs including individual review of client plans, review of external providers as part of management review, review of funding agreements and contracts, regular review of external requirements including legislative requirements.

Documented evidence is generated as part of each of these review processes. People are involved in the development of their plans and changes are planned in line with peoples changing needs. Documents including plans are updated as changes are made.

#### Customer communication

National Premier Disability Services has a range of ways to gain feedback from clients, including comments, and complaints and feedback. Improvement opportunities are transferred to a Continuous Improvement Form.

Intake and assessment processes are in place to ensure enquiries are handled effectively and to understand the needs of our customers.

- > Refer Feedback framework

#### Control of externally provided services

Where any services are outsourced National Premier Disability Services will implement effective controls. This may include contracts and service agreements, evaluation of services and products.

The type and extent of the control in place for each outsourced service will depend upon:

- Any risks identified and the potential impact
- The degree to which the control of the externally provided process is sheared between National Premier Disability Services and the provider



- The capability of potential controls

Processes are in place for establishing criteria for the evaluation, selection and reevaluation of external providers based on their ability to provide services in accordance with our customers' requirements.

### **Service delivery control**

We strive to ensure positive outcomes for people accessing our services. To this end we control and monitor service delivery through adherence to policy and procedure, work instructions and regular reporting through to management.

We ensure client information is secure and that where we have control over our customer's property we exercise care.

It is important to us that we understand our customer's needs, enter into an agreement with them about the services they require and have systems in place to ensure services are delivered only when satisfactory planning has occurred.

### **Non-conforming goods and services**

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Processes are in place to ensure that where services do not conform to requirements of our customers they are identified and controlled minimize any negative impact on our customer.

Corrective actions appropriate to the nature of the non-conformity will be implemented. This applies to non-conformity detected after delivery of the provision of the service. Records of nonconformity will be maintained on the Continuous improvement register.

### ***Refer Continuous improvement procedure***

### ***Refer Incident reporting procedure***

### **Performance evaluation**

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Monitoring, measurement, analysis and evaluation

Management has determined what needs to be monitored and measured based on risk to National Premier Disability Services, our interested parties and customers.

### **Customer satisfaction**

National Premier Disability Services has processes to monitor our customers perception of our services. We actively seek to determine whether their requirement shave been met. Data is evaluated to determine opportunities to enhance our customer's satisfaction.

### **Internal review**

Internal review of our management system is undertaken as required and may include internal audit. At minimum procedures are reviewed every three years and as there are changes to legislation and funding requirements.

## Improvement

*Refer Continuous improvement procedure*

*{Refer Incident reporting procedure}*

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## COMPLAINT MANAGEMENT

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### POLICY

National Premier Disability Services actively supports a client's rights to complain about any aspect of the care and services provided. We recognise that feedback, both positive and negative, is essential in providing a quality service that best suits the needs of the client.

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All complaints will be dealt with promptly, fairly, confidentially and without fear of retribution. The complaints procedure allows a fair and equitable process for dealing with complaints or disputes.

National Premier Disability Services considers a complaint to have occurred when a client or their representative expresses dissatisfaction or concern with the service provided, the environment or way in which a service has been provided and/or the staff who have provided a service.

People will be supported to access an independent advocate of their choice when making a complaint.

### COMPLAINTS PROCESS

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The complaints procedure will be explained to clients and/or their advocate on initial assessment and reinforced during formal service reviews.

Clients or their representatives will be given a copy of the Client information pack which includes complaints and feedback processes and external complaints contact details.

Complaints can be made verbally, and/or in writing via the feedback form, or other written correspondence.

Clients are encouraged to discuss concerns with the staff member involved for a prompt resolution.

If a staff member receives a complaint they should communicate this to the Director, even in the event they may have resolved it.

The Directors can be freely contacted to discuss issues or concerns where the client is not comfortable talking to the staff member or is not satisfied with the outcome, they will do their utmost to resolve the complaint.

On receipt of a complaint the Director will gather factual information regarding the complaint and options for complaint resolution will be discussed. The complainant will be reassured that there will be no retribution for making the complaint and affirm that complaints and their resolution are taken seriously and dealt with objectively, fairly, promptly and without bias.

Complaints are documented on a Compliment, Complaint and Feedback Form if not received in writing; logged in the Continuous improvement register and verbally acknowledged within 2 working days.

***For all Complaints regarding services purchased through brokerage, the client's Case Manager will be notified within 2 working days of any complaints received. When the complaint concerns the safety or wellbeing of clients and/or their representatives, the case manager will be notified immediately.***

National Premier Disability Services will endeavour to investigate and resolve complaints within 28 days of acknowledgement. Written feedback will be given to the complainant about the action taken and outcome.

In the event the Directors cannot reach a resolution with the client, the client will be reminded they are able to contact an external complaints resolution body and/or Dispute Resolution within National Premier Disability Services can be implemented.

## **COMPLAINTS REVIEW**

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The Directors will review all complaints on an annual basis to ensure that they have been dealt with promptly, fairly and appropriately; and any changes in practice have been implemented. A report will be tabled at the Management Review.

## **DISPUTE RESOLUTION**

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A number of options are available should a dispute arise between a client, his/her representative and Aussie Premier Healthcare Services. All parties will be consulted, informed and negotiations made until a mutually accepted resolution is reached.

The Directors will commence an immediate investigation of the complaint and maintain communication with the complainant if details are available.

The Directors will also ensure that staff involved in the complaint are kept informed of progress being made.

Throughout the resolution process the Directors will keep confidential records of all formal discussions and outcomes.

## **APPEALS**

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An appeal can be defined as:

A request by a client for reconsideration of any adverse decision made by National Premier Disability Services. This can include but is not limited to:

- Refusal to accept a request for service
- Decisions to deny, suspend or withdraw services
- Any other action that impedes the persons rights.

All appeals must be made in writing to the Directors.

The Directors will acknowledge receipt of any appeal and contact the client to ensure the nature of the appeal is fully understood. The appellant will be provided with ongoing progress reports at a minimum weekly. This initial contact may lead to a satisfactory resolution. Where resolution is achieved, the conversation is documented, and the appeal is considered closed.

If unresolved and following investigation by the Directors or a management representative, a meeting will be held where all evidence from all parties will be heard in confidence. External parties may be involved should resolution not be satisfactory.

National Premier Disability Services will maintain a Continuous improvement register, in order to document any appeals received, as well as National Premier Disability Services response in relation to each appeal.

Complaints and Appeals will be kept confidential.

## EXTERNAL COMPLAINT BODIES

1. Health Services Commissioner

Ph. 8601 5200 or Toll Free: 1800 136 066

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2. Disability Services Commissioner

Ph. 1300 728 187 or TTY service 1300 726 563

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3. State Government Ombudsmen

## PRIVACY

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### POLICY

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National Premier Disability Services respects the privacy of all individuals. We acknowledge and respect each individual's right to privacy and are committed to maintaining the confidentiality of personal information. National Premier Disability Services uses information in line with Privacy Acts and associated legislation to maintain information as confidential.

### COLLECTION OF PERSONAL INFORMATION

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To provide our service and conduct business, we are required to collect a range of personal information. We primarily collect information to assess, plan and manage client needs in providing services to them. If a client provides incomplete or inaccurate information to us, we may not be able to provide them with the services they require.

**“Personal information”** is any information about an individual whose identity is apparent, or can be reasonably determined from that information, e.g. name, date of birth, etc. “Personal information” also includes sensitive

information about individuals, e.g. health information, culture and religion. The types of personal information National Premier Disability Services collects will depend on the nature of the association with us.

**Clients** – If clients receive our services we may need to collect personal and medical information in relation to client status, occupational health and safety, processes of work, and other relevant information. The information from clients is only used for the purpose for which it was collected in connection with the delivery of services.

**Staff** – We need to collect personal details from staff including but not limited to name, address, contact details, qualifications, banking details, study, visa/residency status, and police records check. In some cases, we must also collect health information about a person's health or disability. We use information collected from staff only in connection with the delivery of service.

**Family and Friends** – we need to collect Next of Kin details from clients. We use this personal information only in case of an emergency.

Sometimes we are legally required to collect personal information, including where there is a threat to public health, or in connection with the monitoring of health services provided by National Premier Disability Services. Our use of personal information in such instances will be in accordance with our obligations under applicable privacy and health acts.

Although National Premier Disability Services primarily collects personal information to manage clients' needs in providing our service to them, we may also collect, use and disclose personal information about clients for other related purposes, such as:

- To meet government and regulatory requirements in relation to activities such as quality assurance, compliance issues and complaint management.
- For invoicing, billing and account management.

## **USE AND DISCLOSURE**

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National Premier Disability Services may at times disclose personal information about clients where it is necessary to deliver services. National Premier Disability Services will not rent, trade or sell personal information about clients to third parties. Personal information may only be disclosed outside of National Premier Disability Services in circumstances where:

- clients have consented to the disclosure, and
- disclosure is in accordance with the purpose for which we collected the information,

To meet service needs National Premier Disability Services may be required to discuss a client's personal information with other agencies or service providers. Should this be required the clients consent to share information will be acquired using the Consent to release of confidential information form.

National Premier Disability Services has a legal obligation to disclose personal information, such as to government or under health regulations, or where such disclosure is permitted by law, including under privacy laws.

## **SECURITY OF PERSONAL INFORMATION**

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National Premier Disability Services takes all reasonable steps to safeguard the security of personal information we have collected and hold. We may store personal information electronically on our computer database and/or in hard copy documents kept at our premises.

We have procedures in place to protect your personal information from unauthorised access, use, modification or disclosure. National Premier Disability Services staff who handle personal information have a duty to protect that information from unauthorised access and are granted access to personal information on a 'need to know' basis.

National Premier Disability Services ensures that personal information no longer required is destroyed appropriately.

## **ACCESS AND CORRECTION**

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Staff and clients have a right to request access to personal information that National Premier Disability Services holds about them and to update or change personal information about them if it is inaccurate, incomplete or outdated.

An exception to this right is where personal information was collected before 21 December 2001 and has not been used since by National Premier Healthcare Services.

If a staff member or client wish to exercise their right to seek access to the personal information that National Premier Healthcare Services holds about them; they must contact National Premier Healthcare Services Director. Requests for access to personal information must be made in writing stating exactly what personal information you wish to access or correct.

National Premier Disability Services will respond to all requests for access to personal information within 14 working days; depending on the type of personal information the staff member or client have requested access to. National Premier Healthcare Services reserves, the right to charge reasonable costs in the supply of requested information.

## **CONCERNS ABOUT PRIVACY**

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Any concerns or comments about this privacy policy, the practices of National Premier Disability Services or requests for access to personal information can be made via:

Mail to: **Diing Bul**  
 National Premier Disability Services  
 8 Hastings St, The Ponds, NSW, 2769  
 Email: aussiephs@gmail.com  
 Phone: 0421603096

## **REFERENCES**

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Privacy and Personal Information Protection ACT 1998 (NSW)

- promotes the responsible and transparent handling of personal information and balances the free flow of information with the protection of personal information.

Health Records and Information Privacy Act 2002 (NSW) – protects the health information of an individual

The Privacy Act 1988 (Commonwealth) – Covers the handling of personal information

Privacy Amendment (Enhancing Privacy Protection) Act 2012

## CLIENTS RECORDS MANAGERMENTS

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### POLICY

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National Premier Disability Services has processes in place to enable staff to maintain appropriate client records.

### PROCEDURE

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National Premier Disability Services is responsible for creating a setting that supports quality professional documentation by:

- Maintaining a documentation system that promotes pertinent sharing of information among team members while protecting client confidentiality.
- Providing an appropriate physical environment, reliable equipment, ample storage and quick retrieval processes.
- Developing documentation policies, procedures and forms.

Employees are responsible for ensuring that 'quality professional documentation' is maintained on the client records.

Documentation must be personalised to reflect the client's needs, values and rights and their involvement in service/care decisions.

Recording clients' comments supports understanding of their needs.

Documentation must give a true and clear picture of the client's perspective of their health and wellbeing, the plan of service/care, the service/care provided and the effects of that service/care.

Documentation must include all relevant information.

Documentation must record all events as soon as possible, to reflect the client's current status.

A chronological entry, that is information recorded during or immediately after an event, reduces the likelihood of errors or misunderstandings and is more reliable than information recorded later which is based on memory.

Record and sign a late entry after previous entries - remember to include the date and time of the event and the date and time it was written.

Documentation must be written in plain language and, if abbreviations or symbols are used, must be well understood and approved by National Premier Disability Services.

Remember to use the full word if the meaning could be misinterpreted.

Correct spelling and punctuation aid understanding.

Documentation must be based on clear and unbiased statements.

Avoid unfounded conclusions or value judgments and meaningless or vague phrases.

Disparaging remarks which criticise clients can bias other staff's perception of the client.

Documentation must be easy to read and decipherable.

Documentation must be in ball point pen.

Entries must be dated in full and authenticated by the signature and designation of the writer.

The use of symbols and abbreviations should be avoided.

The use of liquid paper (white out) is discouraged.

Follow the required formats (forms):

Structure and Storage

Effective and consistent filing systems enhance client care/service by ensuring required information can be readily accessed by authorised personnel.

Storage of Client Record

Paper Client Records are filed in a secure location.

Security

Unauthorised persons are not allowed access to client record storage areas.

Electronic Health Records

Client records are maintained in the electronic system called Client Management System (CMS): iPlanit

Access to Electronic Record

Access to Client Management System (CMS): iPlanit is only available via passwords. Service manager are provided with a unique password which provides them with access to client records held in the system.

Electronic Back Up Procedure

Client Management System (CMS) is backed up every week

## REFERENCES

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Privacy and Personal Information Protection ACT 1998 (NSW)

- promotes the responsible and transparent handling of personal information and balances the free flow of information with the protection of personal information.

Health Records and Information Privacy Act 2002 (NSW) – protects the health information of an individual

The Privacy Act 1988 (Commonwealth) – Covers the handling of personal information

Privacy Amendment (Enhancing Privacy Protection) Act 2012



## CONSENT FOR SERVICE DELIVERY

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### POLICY

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Consent is a significant aspect of client rights and responsibilities and risk management. National Premier Disability Services seeks to ensure that clients have a clear understanding of the service to be provided.

### PROCEDURE FOR GAINING CONSENT

Information is to be provided to a person accessing services in a form and language they can understand, taking into account any disabilities, communication needs or impairment they may have and taking into account matters such as stress or pressure.

The Service manager provides each person with sufficient information for there to be a genuine understanding of the nature of the service.

The Service manager should be aware that a client may prefer to discuss service options in the presence of family and/or friends. To ensure that privacy is respected, a client should be asked for their preference.

If a client expressly asks not to be told information, this should be documented clearly on their record and preferably signed by the client/consumer.

The Service manager must ensure that the client, parent, guardian or advocate has read and understands the information provided about the:

- Service to be provided
- Location of the service to be provided
- Frequency of the service to be provided
- Cost of the service to be provided – including cancellation fees
- Personnel providing the service

The Service manager must ensure that the client, parent, guardian or advocate subsequently signs relevant documents eg Consent to Share Information, Service Agreement, relating to consent, provides a copy to the client and then incorporates them in the client record.

The Service manager must ensure that clients are made aware that all information collected will be kept confidential.

When required, interpreters must sign the Consent to Share Information form to the effect that they have acted as an interpreter for the client/consumer during the consent process.

All attempts to obtain an accredited interpreter should be exhausted before using family or friends as the interpreter.

People should always be informed and encouraged to choose an advocate if they feel they need support to provide consent.

### EXCEPTIONS TO THE GENERAL PRINCIPLES OF CONSENT

The adult unable to give consent – where a person aged eighteen years or over is unable to consent due to a range of physical, mental or psychological conditions, substitute consent and decision-making must be arranged.

## PERIOD OF CONSENT VALIDITY

Best practice suggests that consent should be gained each time a service is to be provided.

Staff should ensure that each time a person's information is to be shared with a new service provider, agency or third party that consent is gained for that specific event. People must be made aware and consent to share obtained.

## COMPETENCY TO GIVE CONSENT

A person is assumed competent until proven otherwise. If a decision is made that a client is not competent to take a decision, it is up to National Premier Disability Services to demonstrate a clear process of assessment and evaluation prior to a decision being made. It is clearly imperative that this be documented in the client record. Full reference and consideration of assessments made by other clinicians is required.

## CONSENT BY/FOR A CHILD MINOR

Appropriate informed consent must be obtained for all clients under the age of 18 years.

## CONTINUOUS IMPROVEMENT

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### POLICY

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National Premier Disability Services accepts responsibility for the satisfaction of its customers and maintains a company culture that fosters continuous improvement. We have a process in place to ensure that non-conformances (including control of non-conforming products and services) are reviewed, actioned and evaluated for effectiveness.

### PROCEDURE

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#### Responsibilities

- It is the overall responsibility of management at National Premier Disability Services to continually improve the effectiveness of the quality management system in accordance with the Continuous Improvement Procedure. This process describes facilitation of the continual improvement of the quality system through the use of the quality policy, objectives, audit results, analysis of data, corrective and preventive action, client feedback and management review.
- Each manager/supervisor is responsible for the continual improvement of the quality management system in his or her respective areas.
- Every employee in National Premier Disability Services is encouraged to suggest new ideas for improving services, processes, systems, productivity, and the work environment

#### Sources for improvement opportunities

- Any staff member, client, representative or stakeholder can suggest an improvement.
- Improvement opportunities are identified from the following sources:

- Internal Audits
  - External Audits of the quality system
  - Staff Ideas
  - Non-Conformances
  - Hazard Alerts
  - Client Feedback
- Improvements and suggestions are documented on a Continuous Improvement form (CIF).

### **Non-conformity and corrective action**

- When a non-conformity occurs, we will take action to control and correct it and deal with any consequences. We will evaluate the need for action to eliminate the causes of the non-conformity, in order that it does not recur or occur elsewhere.
- Nonconformance will be reviewed, determining the cause of the non-conformity and determining if similar non-conformity exist or could potentially occur.
- We will implement any action needed, review the effectiveness of any corrective action and make changes to the QMS if necessary.
- Any corrective action will be appropriate to the effects of the nonconformities.

### **Investigation, Implementation and Evaluation**

- CIF's and improvement opportunities are reviewed by the Service manager and/or a delegated person.
- Each CIF is allocated a number by the Service manager or delegated person.
- Corrective actions are the immediate actions taken appropriate to the impact of the problems encountered.
- Identify if corrective action has been completed, ensure this is recorded if completed, if not completed identify corrective action, person to complete this, and a timeframe for completion on CIF.
- Investigate the cause of the issue, if required (causal analysis), and record this with the person to complete investigation, and a timeframe for completion on CIF.
- Allocate person and date to conduct the evaluation and/or review of the non-conformity and any corrective and/or preventive actions taken to ascertain their effectiveness or need for further review.
- Record the outcome of the evaluation/review of all actions taken on the CIF.
- When the actions taken have been identified as effectively managing the improvement opportunity raised, the Service manager and/or a delegated person can close the CIF.
- The timeframes between identification of action to be taken and the identification of the requirement to improve a process; and the timeframe between the implementation of action and the review/evaluation

of the effectiveness of the action must be related to risk exposure to Aussie Premier Healthcare Services.

### Continuous Improvement Register

- A Continuous Improvement Register (CIR) will be implemented and maintained by the Service manager and/or delegated person.
- The CIR is tabled at management review meetings to enable evaluation of the CIP process and how it is effectively managing risks across Caring More.

## DOCUMENT AND RECORD CONTROL

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### POLICY

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National Premier Disability Services has a systemic approach to the management of hard copy and electronic documents including policies, procedures, guidelines, work instructions, forms and records. National Premier Disability Services acknowledges the importance of keeping abreast of external developments within the industry. It is necessary to be informed of external regulatory and legislative requirements and to take the necessary actions when required.

### PROCEDURE

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#### Creating and updating documents

When creating documents, the **procedure template/eKey/electronic process** must be used. This will ensure that each controlled document required by the organization is identifiable, correctly formatted and reviewed and approved for suitability and adequacy.

#### Accessing controlled documents

Controlled documents are stored and maintained **electronically and in Hard Copy**. Documents are available in a **PDF Format** to prevent them from unauthorized changes or loss of integrity.

#### Development of New Documents

The Service manager and/or other designated personnel may draft a new document in consultation with relevant staff. Any staff may request the development of a new document.

The draft document will have the visible word DRAFT on it; the draft may be circulated for consultation but will not be available for use until approved.

Feedback from consultation is considered by the Service manager and/or other designated personnel, with documents approved for use as per the approval process above.

When a new document is approved and introduced, staff are formally notified of the effective date of implementation via email/newsletter or word of mouth.

#### Approval of Documents

Includes policies, procedures, guidelines, work instructions, and forms prior to issue.

Documents are endorsed by Director or the Management committee in consultation with the service manager for governance and operational related processes prior to issue. The footer carries a version of the document, and the most recent revision date e.g. Revision 1 – January 2014 (as per footer on this page).

The Service manager and/or other designated personnel are responsible for the management of updating and ensuring version control of documents.

Forms will only carry the name of the form, the version and year in the footer.

### **Amendment and Update of Documents**

The Director and/or other designated personnel are responsible for amending and updating documents. Any staff member may request an amendment or update.

The amended/updated document, incorporating relevant comments/feedback, may be circulated in draft format for consultation, with the word DRAFT clearly visible on the document

Changes will be clearly identifiable in ***bold italics*** until the next review.

Policies, procedures, documents and forms are approved as per the approval process.

When a document is substantially altered staff are notified of the effective date by the service manager and/or other designated personnel via email, memorandum, newsletter, or verbally.

### **Review of Documents**

Documents review occurs as part of the internal audit process or may be prompted by changes in the business or external requirements.

### **External Documents**

When documents of an external origin e.g. legislation, regulations, guidelines etc., developed by an external source and relevant to the business, are received these documents are reviewed by the director and/or other designated personnel.

When there is impact on National Premier Disability Services, or a current internal process, the related organisational document will be amended to reflect necessary changes and/or new document developed.

External documents required by the National Premier Disability Services on a regular basis for reference may be available in hard copy or electronically.

Monitoring for external compliance requirements occurs in the following ways:

- Service manager reviews appropriate external websites on a monthly basis. Contents are discussed with Client managers.
- Service manager reviews appropriate industry publications and contents are discussed with Client managers
- 

### **Obsolete Documents**

Obsolete documents, developed internally, are electronically archived and are not available for general staff access.

Paper records will be archived and then shredded and discarded in confidential waste bins.

## Records Register

A Records Register is maintained and updated by the Service manager and/or other designated personnel. The register outlines retention times and disposal methods for records required by National Premier National Services.

## Records management

No information or any form of media (such as USB drives) relating to National Premier Disability Services' work may be taken from the premises without the prior permission of the Director, Manager.

Archived documents will only be accessible to Executive staff or to others as required by law.

## Structure and Storage

Effective and consistent filing systems enhance client care/service by ensuring required information can be readily accessed by authorised personnel. Records should be legible.

## Storage of Client Record

Paper Client Records are filed in a secure location.

## Security

Unauthorised persons are not allowed access to client record storage areas.

## Electronic Health Records

Client records are maintained in the electronic system called Client Management System (CMS):

## Access to Electronic Record

Access to **the electronic system** is only available via passwords. **The service manager** are provided with a unique password which provides them with access to client records held in the system.

## Electronic Back Up Procedure

**The electronic system** is backed up *every day after office hours*

## Refer Privacy Policy

<b>Policy Code</b>	<b>G001.01</b>
<b>Person Responsible</b>	<b>Director</b>
<b>Status (Draft/Released)</b>	<b>Released</b>
<b>Date Last Updated</b>	<b>5 October 2018</b>

## EMERGENCY AND FIRE EVACUATION

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### POLICY

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National Premier Disability Services has processes in place to ensure staff are aware of action to take in the event of an emergency in the office.

### PROCEDURE

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This plan shall be implemented in the event of a fire / incident occurring in the office/building or in the event of an evacuation due to a threat from various sources eg: gas leak, fire next door, bomb threat, under direction from a law enforcement official, armed intrusion etc.

The aim of the fire / evacuation plan is to preserve life, alert personnel to danger and to remove staff/personnel / clients from the danger zone without unduly compromising the safety of any person.

In addition, copies of the Evacuation Plans and Emergency Action Sheets are displayed in prominent locations in the building.

The Director or their delegated person, shall assume the role of Fire Warden whose responsibilities are:

- Ensure that the alarm is raised if a fire is found or if an evacuation is required.
- To ensure that the door(s) to the area containing the danger are closed off if safe to do so.
- Assist any person / client in the office/building who is in immediate danger or who requires assistance to exit the building.
- Ensure that all personnel/clients who are present are evacuated from the building and are accounted for.
- Determine if it is safe to attack the fire with the nearest fire extinguisher.
- Ensure the relevant emergency service is called and advised of the situation.
- To determine when it is safe to return to the building following advice from the relevant authority.
- Only return to the building when the “all clear” has been communicated by the relevant authority
- Liaise with the building owner (in the event the office is rented space) to ensure there is understanding of the building process when/if there is an emergency action required.

Following the incident, the Fire Warden should raise an incident report. The management team will review the incident and determine the impact of the incident and the impact on the business / services provided.

Staff (office based) shall participate in a fire drill/evacuation to ensure that all personnel understand the procedure and adhere to the plan. This will be carried out annually.

## INTERNAL AUDIT

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### POLICY

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National Premier Disability Services has a planned audit program in place to ensure that key processes are appropriate and effective. Internal auditing allows for the continuous improvement of our systems and service and ensures individual and legislative requirements are monitored:

### PROCEDURE

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1. An audit schedule is developed based on the risk of the process and results of previous audits. Additional responsive audits may also be conducted in response to non-compliance. The audit program shall take into consideration the quality objectives.
2. Audits may be conducted by employees or an external consultant.
3. Auditors do not audit their own work in order to ensure objectivity and impartiality in the audit process. They can audit their own department just not the area they are accountable for.
4. The internal audit consists of the following activities and information gathering:
  - Interviewing staff.
  - Reviewing appropriate documentation such as policy, objective, plans, procedures, standards, instructions, records, contracts and so on.
  - Observation of activities and the surrounding work environment and conditions.
  - Reviewing reports from other sources such as client feedback and other relevant information from external parties.
5. At the conclusion of the audit, an Internal Audit Report is written and incorporates the findings; this may be on a document provided by a consultant or on National Premier Disability Services Internal Audit Report document. The results of audits are reported to appropriate managers for evaluation.
6. Continuous Improvement Forms are raised as required and managed appropriately ensuring action is taken without undue delay.
7. Audit results may be discussed at the relevant staff meetings.
8. A summary of the internal audit program is presented at the Management Review meetings.



## OCCUPATIONAL HEALTH AND SAFETY COMMITTEE-TERMS OF REFERENCE

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### PURPOSE

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The Occupational Health and Safety Committee is convened to monitor the effectiveness of the OHS processes and systems in maintaining a safe workplace and maintaining compliance with external requirements.

### FUNCTION

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- To review updates/changes to OHS external compliance requirements.
- To assess the effectiveness of key processes of the OHS system.

### MEMBERSHIP

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Director (Chair)

Service Manager (Secretary)

Service Coordinator

OH&S Officer

Other participants at the discretion of the Committee

### MINUTES

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Will be recorded and made available to all employees of National Premier Disability Services

### QUORUM

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The quorum will be at least three persons:

- One of which needs to be either the OH&S Manager or delegated representative
- At least two < **Staff** >.
- At least 1 < **Client** >.

### MEETINGS

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Meetings will be convened at least twice a year and as required.

## OCCUPATIONAL HEALTH AND SAFETY

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### POLICY

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National Premier Disability Services is committed to the provision of a safe and healthy work environment as much as practicable.

### EMPLOYER RESPONSIBILITIES

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Workplace Health and Safety is an integral part of National Premier Healthcare Services management system at all levels.

Management responsibilities include:

- The development, implementation and communication of health and safety policies and procedures
- The provision of a safe and healthy work place by identifying and eliminating or reducing risks to health and safety as far as is reasonably practicable
- Ensuring persons other than employees are not exposed to health and safety risks arising from the conduct of the undertaking of the employer
- Ensuring the absence of risks to health in connection with the provision, maintenance, use, handling, storage or transport of equipment or substances
- Provide adequate facilities for the welfare of employees at the workplace and informing staff how to enquire or make a complaint about health and safety
- Informing and providing staff with information about health and safety policies, procedures to enable the safe performance of duties
- So far as is reasonably practicable that the workplace and the means of entering and leaving it are safe and without risks to health
- Information and record keeping relating to the health and safety of employees

### CONSULTATION

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The employer will, so far as is reasonably practicable, consult with employees who are or are likely to be directly affected by the employer's decisions when:

- Identifying or assessing hazards or risks to health or safety at a workplace or arising from the conduct of the undertaking of the employer.
- Making decisions about the measures to be taken to control risks to health or safety.
- Making decisions about the adequacy of facilities for the welfare of employees.

- Making decisions about the procedures for resolving health or safety issues, monitoring the health of employees, or providing information and training.
- Determining the membership of any health and safety committee if staff has determined this as a need.
- Proposing changes to a workplace, the equipment, substances or other things used at such a workplace, or the conduct of the work performed at such a workplace, that may affect the health or safety of employees.

Employees will be consulted through the sharing of information about the matter on which the employer is required to consult; and by giving employees a reasonable opportunity to express their views about the matter; and taking those views into account.

## PROCEDURE

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National Premier Disability Services is committed to the provision of a safe and healthy work environment as much as practicable through the following objectives:

- Maintaining a consultation process.
- The development, implementation and regular review of OHS processes to support the well-being of our employees, clients, and contractors.
- The development, implementation and review of processes and systems to support and maintain the provision of a safe and healthy work environment.
- Maintaining awareness of external legislative, regulatory and other compliance requirements that are within the scope of services provided.

**Note:** Regular review, evaluation and identification of improvement opportunities of OHS processes and systems occur through internal auditing.

## RESPONSIBILITIES

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The management group will promote and maintain occupational health and safety as a primary responsibility. Staff **<and volunteers>** will exercise a duty of care, adhere to safety procedures, log accidents, incidents or hazards in a timely manner, and report any health and safety related issues to their manager, and if unresolved to their nominated Health and Safety representative.

**Employees** have a legal duty to take care to protect their own health and safety and to avoid adversely affecting the health and safety of any other person.

**Employees and Volunteers** have a responsibility to:

- report any incident or hazards at work to their manager or supervisor;
- carry out their roles and responsibilities being mindful of their duty of care, and ensuring their own safety and the safety of others;
- adhere to OH&S policies and procedures;

- obey any reasonable instruction aimed at protecting their health and safety while at work;
- use any equipment provided to protect their health and safety while at work;
- assist in the identification of hazards, the assessment of risks and the implementation of risk control measures;
- consider and provide feedback on any matters which may affect their health and safety;
- ensure they are not affected by alcohol or any other drug which may endanger their own or any other persons' health and safety.

Contractors and visitors to National Premier Disability Services are required to:

- comply with the occupational health and safety policies, procedures and programs established by National Premier Disability Services
- observe directions on occupational health and safety from designated officers of National Premier Disability Services

## References

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- Occupational Health and Safety Act 2004
- Occupational Health and Safety Regulations 2007
- Accident Compensation Act 1985
- Risk Management Policy/Procedure
- Incident Reporting Procedure
- Incident/Hazard Report

<b>Policy Code</b>	<b>G001.01</b>
<b>Person Responsible</b>	<b>Director</b>
<b>Status (Draft/Released)</b>	<b>Released</b>
<b>Date Last Updated</b>	<b>5 October 2018</b>

## REGULATORY COMPLIANCE

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### POLICY

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National Premier Disability Services has systems in place to identify and ensure compliance with external requirements including, but not limited to: legislation, professional standards, regulations, guidelines, contractual arrangements and funding agreements.

### PROCEDURE

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- Monitoring for external compliance requirements occurs in the following ways:
- Director reviews appropriate external websites on a monthly basis and contents are discussed with Service Manager
- Director reviews industry and contents are discussed with service Manager.
- Director reviews the ***funded agency channel and is responsible for accessing and reviewing compliance with all the funding arrangements.***
- When documents of an external origin e.g. legislation, regulations, guidelines etc., developed by an external source and relevant to the business, are received these documents are reviewed by the Director and/or other designated personnel.
- When there is impact on National Premier Disability Services, or a current internal process, the related organisational document will be amended to reflect necessary changes and/or new document developed as per Documents and Records Control.
- External documents required by National Premier Disability Services on a regular basis for reference may be available in hard copy or electronically.

## RISK MANAGEMENT

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### POLICY

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National Premier Disability Services has in place and will maintain a risk management framework to ensure the business is adequately equipped to identify, assess and manage risks. This will include:

- A risk identification process.
- Process to review the cause of identified risks.
- Identification of actions to take to reduce and/or eliminate risks.
- Review and evaluate the effectiveness of actions taken.

All staff have a responsibility to ensure a safe workplace.

## PROCEDURE

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The risk management framework has six components:

1. Risk identification in which potential risks are grouped into the following categories:
  - Threat to the safety, wellbeing and development of clients and families in the care of National Premier Disability Services.
  - Reputation and public image.
  - Unplanned, significant loss or reduction in third party funding.
  - Significant reduction in investment capital or income.
  - Breakdown of working partnerships and relationships.
  - Fraud, theft, misappropriation or other mismanagement of funds, records of any kind, intellectual property, data or any other property of National Premier Disability Services.
  - Non-compliance with legislation, policy and program standards, procedures and controls
  - Reduction in infrastructure capability and skilled workforce
  - Reduction or unplanned interruption of core business.
  - Loss of critical information and data
2. Risk Estimation in which each identified risk is assessed according to:
  - 2.1 Likelihood of occurrence:
    - Almost certain (5)
    - Likely (4)
    - Possible (3)
    - Unlikely (2)
    - Rare (1)
  - 2.2 Severity or Consequence:
    - Catastrophic (5)
    - Major (4)
    - Moderate (3)
    - Minor (2)
    - Insignificant (1)
4. Risk assessment in which the likelihood and severity of each risk are simultaneously assessed to produce a risk “rating” as shown in the table below.

Likelihood	Consequences				
	Insignificant (1)	Minor (2)	Moderate (3)	Major (4)	Catastrophic (5)
Almost Certain (5)	6	7	8	9	10
Likely (4)	5	6	7	8	9
Possible (3)	4	5	6	7	8
Unlikely (2)	3	4	5	6	7
Rare (1)	2	3	4	5	6

#### Risk Legend

	<b>Extreme Risk</b>
	<b>High Risk</b>
	<b>Moderate Risk</b>
	<b>Low Risk</b>

4. Risk management plans are developed including (but not limited to):
  - Adequate policy and procedures
  - Effective prevention, monitoring and detection controls
  - Clear allocation of responsibilities and segregation of duties
  - Supervision and self-assessment review
  - Training and awareness programs
  - Change control
  - Audit assessments
  - Insurance
5. Implementation of risk management plans and monitoring of the effectiveness of those plans in reducing risk.
6. Reporting on the effectiveness of the implementation of the risk management plans (as required), the identification of any new risks and of any significant changes to the assessed level of seriousness and/or consequences of existing risks through the management review forum (Corrective/Preventive Action). The Director is to be made aware of any major and/or catastrophic risk which is likely to occur or has occurred immediately.

The format for the risk management plan is:

Risk Name	Likely-hood	Severity	Rating (L+S)	Strategy	Current/ Proposed
<To be completed by organisation>					

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## CONSUMER PARTICIPATION COMMITTEE-TERMS OF REFERENCE

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### PURPOSE

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The Consumer participation meeting is convened to ensure people who use our services, their families and carers are involved in decision making about services, the processes and future planning of National Premier Disability Services

### FUNCTION

- Advise National Premier Disability Services on establishing and maintaining effective systems to ensure that the services provided meet the needs of the communities served by National Premier Disability Services
- Ensure that the views of vulnerable and disadvantaged members of the community are considered in decision making
- Communicate the consumer perspective on services and opportunities for improving the quality, safety, accessibility and appropriateness of services.

### MEMBERSHIP

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Service Manager (Chair)

**Consumer** (Secretary)

**Consumer representative**

- Current clients



- Past clients' family members
- Community members with a disability
- Advocates

Other participants at the discretion of the Committee

## **MINUTES**

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Will be recorded and available to relevant persons.

## **QUORUM**

The quorum will be at least three persons, one of which needs to be the Service Manager

## **MEETINGS**

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Meetings will be convened twice a year.

## **USE OF PRIVATE VEHICLE POLICY**

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### **POLICY**

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National Premier Disability Services staff may be required to use their private vehicles as part of service delivery. Staff may be required to transport clients to appointments, shopping or for community access.

National Premier Disability Services is committed to promoting the safety of all staff and clients when staff are required to use their private vehicle in the course of duty.

Staff must obey the law at all times and ensure safety to protect themselves, the client and others being transported.

### **PROCEDURES**

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#### **Employer Responsibilities**

Ensure that carers are advised of any client transport issues such as behavioural issues, prior to transporting the client.

Reimbursement for km's travelled.

Provide information on Motor Vehicle Child Restraints law

## Employees Responsibilities

Employees are required to hold a current driver's license, maintain safe driving practices adhering to all road rules. (All fines incurred through motor vehicle or traffic infringements will be the responsibility of the driver)

Employees who are transporting clients are required to hold a full license not probationary.

Employees must not have consumed any alcohol or illicit drugs or have taken any medication that may affect their driving ability, when driving for the purpose of their employment.

Ensure that the vehicle is legally registered, roadworthy and the employee has third party insurance. Employees must ensure the insurance policy allows for the vehicle to be used in the course of employment.

Employees who are required to use their own vehicle during the conduct of their work must provide at the time of commencement of employment and then when/if changes occur in relation to change of vehicle and/or restrictions or loss of licence the following information on an annual basis:

- Drivers licence – copy retained in personnel file
- Comprehensive Insurance policy (where applicable) – copy retained in personnel file
- Motor Vehicle Registration – copy retained in personnel file
- Third Party Insurance policy – copy retained in personnel file

Maintain the vehicle in good operating order and appearance, which means that the employee shall see to it that the vehicle receives required maintenance in a timely manner, and the vehicle is kept clean and smoke free (when transporting clients).

Abide by the Motor Vehicle Child Restraints law

## Application

This policy is applicable to National Premier Disability Services in all its operations and services including those situations where employees are required to work off site.

Any reference to an employee includes a reference to any independent contractor engaged by the employer and any employees of or duties undertaken by the independent contractor.

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## INTERNAL INCIDENT HAZARD REPORTING

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### POLICY

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National Premier Disability Services has processes in place to assist staff in identifying, reporting and managing incidents/accidents and hazards that have potential to impact on the health, welfare and safety of clients, staff and other stakeholders.

### PROCEDURE

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- All incidents must be recorded on the Incident/Hazard report form
- The form is to be completed as soon as possible following the identification of the hazard or the occurrence of the incident; this will be in most cases after the staff involved has communicated verbally with the Service Manager.
- The staff member who fills out the form must ensure the completed form is sent to the Service manager.
- Where the Incident/Hazard is of an emergency nature, staff are to immediately call the Service manager. and advise the nature of the Incident/Hazard

NOTE: If the incident occurs after business hours the staff member needs to report to the “ON CALL” staff member. The staff member “On Call” will then review the incident and take the necessary action which could include, calling emergency authorities i.e. 000, calling the Service Coordinator., or reporting the incident to the Service Manager on the next working day.

Each reported incident/hazard will be reviewed, and records of the investigation, timelines and responsibilities will be recorded on the incident/hazard report form until such time as corrective and preventive actions (when required) have been implemented and their effectiveness reviewed

Incident report trend data is a report identified on the management review meeting forum agenda.

NOTE: in the event the client is provided a funded service the Incident Reporting process for that program will be implemented and staff will be advised accordingly refer Incident Reporting Procedures.

## DUTY OF CARE

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### Policy

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A duty of care is the responsibility to take all reasonable care in relation to another person or persons. A duty of care is breached if a person behaves unreasonably.

National Premier Disability Services expects and will support staff to exercise their duty of care by providing guidance and support through policies and procedures and training.

## Procedure

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### Duty of Care

Staff providing support to the clients of National Premier Disability Services are in a position of responsibility for the clients in their care and as such owe a duty of care to them. A duty of care is breached if a person acts unreasonably or fails to act where action could be reasonably expected.

### Negligence

There are three parts to the definition of negligence and all three elements must be present in any situation for a staff member to be considered negligent by a court.

1. National Premier Disability Services, and therefore the staff, must owe a duty of care to a particular person or group of people.
2. There must be a breach of this duty of care i.e.-a staff member must have done something that a reasonable person would not have done in a particular situation.
3. Some harm must have been caused to the person because of this unreasonable action.

### Reasonable

The reasonableness of what a person has done or not done is assessed by considering how a hypothetical reasonable person at the same level-e.g. a co-worker would have behaved in the same situation.

What is considered reasonable will depend on all the circumstances. What is reasonable in one situation will not necessarily be reasonable in another.

### Prevention of Harm

Staff are expected to take steps to avoid, reasonably foreseeable, risks of harm or injury. However, no one will be found negligent for failing to prevent a completely unlikely or improbable incident resulting in harm to a client, particularly if staff can demonstrate work practices that indicate that risks are given due consideration and assessed sensibly.

### Precautions

It is important for staff to give consideration to available precautions. If the risk of harm from an activity can be reduced or eliminated by taking relatively simple precautions, then it will not be reasonable to proceed without taking those precautions.

If unsure staff are encouraged to talk to their appropriate manager.

## FEEDBACK FRAMEWORK

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National Premier Disability Services is committed to meeting and exceeding the expectations of our stakeholders. In order to ensure we understand what our clients want and to allow us to measure satisfaction with our services we ensure we gather feedback from a range of sources. We adopt a broad and systematic approach to assessing our operations and incorporating the feedback of relevant people and agencies into service.

Feedback Source	Stakeholders	Measure and monitoring
Internal stakeholders	Directors	Management Review minutes CI register review Complaints review
	Staff	Supervision Appraisal Continuous improvement process
	Other Services / Agencies Sector Research & Reports	External changes are monitored through the Document and records control procedure
External Stakeholders	Funding bodies – DHS, Commonwealth, NDIS	Funding agreement requirements monitored through internal audit process Tender review
	Certification body	Audit reports
	Community including: <ul style="list-style-type: none"> <li>▪ Community Alliances</li> <li>▪ Community Partners</li> <li>▪ Media</li> </ul>	Feedback and complaints via website Media response will be via Director and inform service delivery and evaluation.
	Financial Auditors	Financial audit reports
Clients	Children Young People Families Extended Families	<ol style="list-style-type: none"> <li>1. Direct client contact immediate worker response.</li> <li>2. Case notes record the immediate caseworker response and may progress to &gt;Supervisors&gt;Manager or may escalate to senior management if strategic action if required.</li> <li>3. Individual client plan review informs feedback at an individual level and informs service delivery requirements.</li> <li>4. Case closure highlights issues and informs program leadership about emerging trends and informs service delivery reviews for potential strategic planning.</li> <li>5. Client compliant Immediate worker response or &gt;Supervisors&gt;Manager or may escalate to senior management or Director if required.</li> </ol>

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## FINANCIAL MANAGEMENT

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### Policy

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National Premier Disability Services is committed to ensuring a high standard of accountability is in place relating to organisational financial management and practices.

Disability Premier Disability Services *is* committed to ensuring its management of finances are consistent with legislative and contractual requirements; this includes compliance to any funding bodies.

The Director has ultimate responsibility for effective management of finances and assets as well as the prevention and detection of fraud. The Director is responsible for ensuring that appropriate and effective internal control systems are in place.

National Premier Disability Services will ensure persons responsible for financial management are suitably qualified.

### Procedure

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#### Managing risk and compliance

Finance Officer will monitor and adhere to relevant laws and regulations pertaining to the financial activities of National Premier Disability Services.

Finance Officer will manage any statistical information required by funding bodies relevant to National Premier Disability Services and ensure it is gathered, entered, validated and sent in a timely manner.

Finance Officer will manage relevant contracts, budgets, policies, procedures and other quality management aspects of National Premier Disability Services for compliance requirements.

Finance Officer will manage bank account and tax office requirements in line National Premier Disability Services strategic plan.

### **Accounts Receivable and Payable**

Finance Officer will receive and enter payments for accounts.

### **Reconciliation**

Finance Officer manages the preferred accounting package.

### **Reports**

A profit and loss report is prepared by <Insert position>

### **Business Activity Statements (BAS)**

BAS is paid as per accounting principles - in accordance with ATO legislation.

### **Auditing**

Accounts are not currently audited.

### **Invoicing**

Invoices are raised, these always include the ABN, the date of the service and additional costs requested.

### **Payment of Accounts**

All invoices are authorised by the Finance Officer prior to payment.

### **Payroll Tax Return**

Payroll tax calculations are performed by the Finance Officer

### **Payroll**

The **Payroll Clerk** is responsible for the payment of wages.

### **Accounting systems**

**National Premier Disability Services uses MYOB.**

## **1.1 NSW - NATIONAL DISABILITY SERVICES STANDARD**

### **Introduction**

The policy manual outlines statements of principle and commitment to the Disability Services Act 1991 and Disability Services Standards. It aims to give effect to National Premier Disability Services commitment to the Disability

Services Standards and to person-centred service provision. The following general principles apply to all National Premier Disability Services' Standards Policy and Procedures related to disability specialist services by means of:

- Develop written policies and procedures to reflect the Disability Services Standards and National Premier Disability Services' commitment to best practice service provision.
- Ensure full and free access to all policies and procedures for potential and current the client, their families and advocates.
- Implement its written policies and procedures.
- Actively involve the client, families, advocates, staff, and Board members in policy development and review as appropriate.
- Ensure that the language and the physical form of policies and procedures will not become a barrier for the client, families or advocates who need to understand what National Premier Disability Services do and how National Premier Disability Services operate.
- Provide information regarding its activities to the target population within its geographical service area. - Have written policies and procedures endorsed by the Board thereby communicating the aims and expectations of the Company to its staff and to the broader community.
- Ensure policies and procedures are non-discriminatory on the basis of race, sexuality, religion, gender, age or level of disability.
- Provide services in a manner sensitive to the age, gender, sexuality, cultural, linguistic, individual choices, and religious background of each person we support.
- Inform the client of other services that might meet their needs.

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## RIGHTS

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### PURPOSE

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National Premier Disability Services is committed to deliver person centred services and will promote and respect the individual, legal and human rights of people with disability. The service will support the client to exercise decision-making to pursue their personal goals and choices like everyone else in the community. National Premier Disability Services is committed to providing an environment that ensures that people are free from discrimination, abuse, neglect and exploitation, and have policies and procedures in place to manage issues if they arise. National Premier Disability Services acknowledges the United Nations Convention on the Rights of Persons with Disabilities.

### PROCEDURES

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1. National Premier Disability Services will provide people access to information and support to understand and exercise their legal and human rights.
2. The client will be encouraged to be the centre of decision-making about the life they choose to live, with the support of their chosen network of family, friends and advocates.
3. National Premier Disability Services will provide a service that reflects the person's right to privacy and have their personal records and details about their lives dealt with in an ethical and confidential manner in line with relevant legislation.
4. National Premier Disability Services will only collect information about people that is directly relevant to effective service delivery. Each person will be informed of the types of personal information National Premier Disability Services holds and the reasons for holding this information. National Premier Disability Services will ensure that personal records are secured, and that confidentiality of records and personal information is not compromised or misused.
5. Each person's (or his/her person responsible) consent will be obtained before any information about him or her is sought or released by National Premier Disability Services to others. Each person has the right to see the information held about them. Information will only be released on a 'need to know' basis.
6. National Premier Disability Services will encourage and support people to access an advocate or advocacy service to promote their rights, interests and well-being, and assist them with grievances when issues arise.
7. All reported incidents will be handled promptly, sensitively and with strict regard to National Premier Disability Services procedures on confidentiality and grievances; and having regard to the law on criminal matters.
8. National Premier Disability Services will gain consent from the person we support, their person responsible or their legal representative for medical treatments and interventions.

9. National Premier Disability Services will take into account individual choice and the rights of each person and act in their best interests in relation to nutritional and behavioural management practices in line with relevant legislation, convention, policies and practices.
10. National Premier Disability Services will uphold the person's right to make decisions, including medical treatments and interventions, and when this is not possible, assisted or substituted (alternative) decision making is in line with relevant legislation, the person's expressed wishes, if known and if not, their best interests.
11. National Premier Disability Services will provide for the client a service that maximises their choices for social participation and cultural inclusion.
12. National Premier Disability Services will provide opportunities for people and their families and advocates to participate in the development of policy and processes that promote their rights in the service through a range of developmentally and culturally appropriate strategies. This may include having involvement in staff selection processes, reviewing policy, participating in customer service evaluations and meetings.
13. To protect the client from discrimination, abuse, neglect and exploitation is the responsibility of each staff member. National Premier Disability Services will provide staff with information and training to recognise and report incidents and to support clients in accordance with the Company policies and procedures.
14. Staff and Management are forbidden to abuse the client in any way. This includes all types of abuse such as verbal, emotional, sexual, financial and physical; neglect, discrimination or exploitation, and can be grounds for dismissal.
15. National Premier Disability Services will provide internal training and utilise external agencies to provide training and information to the client about self-protective behaviours that take into account their individual safety awareness, rights and cultural needs
16. When an incident concerning the abuse, neglect or discrimination or exploitation of a client is raised:
  - All incidents of abuse must be reported through the appropriate grievance channels and must be reported to the relevant National Premier Disability Services Manager as soon as possible
  - It is particularly helpful for long-term recovery from assault if the alleged victim (staff or person with a disability) can be counselled as soon as possible by a trained professional after the incident, to understand that the incident was not their fault
  - The first concern is the safety of the victim. Parents/carers/advocates will be contacted with the person's consent, depending on individual needs
  - The people who access our services will be supported to gain access to external agencies eg. Police, Community Health, or Department of Community Services, to report abuse where necessary and/or receive counselling

- If the perpetrator is another person with a disability that we support, National Premier Disability Services Pty Ltd. has an obligation to counsel and support them, providing appropriate resources and training to overcome these tendencies.
- Where the perpetrator is a staff member, they may be suspended from duty on pay until the matter is fully investigated or transferred to other duties pending an investigation
- Depending on the type of abuse, the Manager will report the incident to the Director and/or to the appropriate external service (with the victim's consent) where a criminal offence has been committed

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## **PARTICIPATION**

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### **PURPOSE**

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National Premier Disability Services will ensure that each person receiving disability services is supported and encouraged to participate and be involved in the life of their chosen community and in a manner of their choosing.

### **PROCEDURES**

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1. National Premier Disability Services will gain consent from the client to assist them to develop and foster social networks and connections with family and friends, in whatever way the person chooses.
2. National Premier Disability Services will ensure each person is provided with information about general community facilities and services through newspapers, brochures, discussion with staff and families etc. The client will receive training in how to use these facilities and services to ensure the success of their goals.
3. National Premier Disability Services has a commitment to encourage the client to use mainstream services and facilities by breaking down the barriers to participation and inclusiveness, and by providing ongoing support for that participation, within available resources.

4. National Premier Disability Services will develop, implement, and maintain its links with local connections such as other community agencies and community groups. Through the Personal Plan process, staff may identify other community services and facilities that can meet a person's preferences and needs, and a referral may then be made.
5. Through modelling respectful and inclusive behaviours inside National Premier Disability Services and in the wider community, staff will recognise and promote the abilities and competencies of the client and their unique and valuable contribution to the community. All publications, brochures, media releases as well as all verbal and written internal communications will reflect the valued status of the client.
6. National Premier Disability Services staff will be provided with training on the Person Centred Approach to working with people with disabilities to ensure that the participation is driven by the person and is meaningful to the person.
7. National Premier Disability Services respects the rights of people with a disability to be supported by their family, friends, advocates or other people of their choice when making decisions. (See DSS 1 Rights, DSS 3 Individual Outcomes, Policy 6.19 Decision Making and Guardianship).
8. National Premier Disability Services will be flexible and innovative in providing services, within available resources, particularly for people who are culturally and linguistically diverse (CALD).

## **INDIVIDUAL OUTCOMES**

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### **PURPOSE**

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Each person who accesses National Premier Disability Services receives a person-centred service that is designed by them; and with the support from family, staff and advocates will meet, in the least restrictive way, his or her unique lifestyle needs and goals.

### **PROCEDURES**

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1. Form 401 Personal Plan outlines the person's strengths and areas of required support. Form 410 Risk Profile identifies any areas of risk staff need to be aware of when supporting the person. These documents inform staff of the support they need to provide to each individual in the least restrictive manner.
2. The Personal Plan will outline the person's choices for the lifestyle they choose. It will focus on the person's strengths, talents, 'important to' and 'important for' events and ideas, gifts, choices and preferences.

3. People are given support to understand the Personal Plan process. They are given encouragement to take the central role in the process.
4. National Premier Disability Services will ensure barriers such as language and the physical form of policies and procedures will not become a barrier for the client who needs to understand what the service does and how it operates. Alternative forms of communication will be used as needed.
5. The Personal Plan is developed within three months of the person entering the Company disability specialist services.
6. National Premier Disability Services will inform people at the time of gaining a placement that they are required to be involved in the development of their Personal Plan as part of the Company's conditions of service.
7. The Personal Plan clearly defines the person's goals, wishes and choices. The person, their family or advocate and National Premier Disability Services agree on how the service will be delivered, and how the goals will be achieved and evaluated (including resourcing, monitoring, time frames and responsibilities of individuals).
8. People will be supported to participate in the Personal Plan process by the person/people of their choice. Support may be sought by their Programmer, Manager, family, friends, or advocates.
9. National Premier Disability Services will tailor its services to meet the assessed needs of the client within its resources in a flexible and responsive manner.
10. National Premier Disability Services will source the appropriate tools and resources that best meet the person's outcomes. This may include connecting with the person's friends and family, people in the community, as well as community organisations and other specialist services.
11. Where a person chooses not to participate in a formal Personal Plan, this will be documented, and National Premier Disability Services will regularly ensure, through informal discussions with the person and his/her circle of support, that the person's goals and needs are met.
12. The client has the right to request a review of their Personal Plan at any time.
13. The Personal Plan is reviewed and revised as needed, or at six-month intervals.
14. National Premier Disability Services will assist the client to participate in the community and will provide information to support access to these services.
15. National Premier Disability Services staff will develop, implement, and maintain its links with local connections such as other community agencies and community groups to assist the client to meet their individual outcomes.
16. National Premier Disability Services will provide Cultural Competence training to staff when required to meet the needs of people and families who are Culturally and Linguistically Diverse (CALD).
17. Consideration of a person's preferences will be made when allocating support staff.

18. National Premier Disability Services will ensure full and free access to relevant policies and procedures for the client. These documents will be presented in the most appropriate format.
19. National Premier Disability Services will actively involve the client and their families and/or advocates in quality assurance activities such as customer satisfaction surveys, morning meetings, policy and procedure review, audit activities.

## **FEEDBACK AND COMPLAINTS**

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### **PURPOSE**

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It is the aim of National Premier Disability Services to be fair and reasonable with all dealings with staff, the client and their families. We strive to maintain this principle and practice not just in relation to the matters covered by anti-discrimination laws, but in relation to all work, and workplace matters and in all service areas.

National Premier Disability Services supports people with disability to offer feedback without fear of retribution; and regards that process as a step towards continual improvement of our services.

### **DEFINITION**

A complaint is an act, situation, dispute, concern, problem, or grievance on any matter that a staff member, person we support, or family member considers to be unfair or unjust.

### **BACKGROUND**

In any employment or service situation, relationship problems, concerns or complaints do arise. It is important that satisfactory solutions be found so that problems are not escalated or continue unresolved which affects service delivery and people's well-being.

It is the policy of National Premier Disability Services to provide a fair and effective mechanism to investigate, rectify and resolve disputes, concerns or complaints. This policy promotes both informal and formal grievance resolution procedures structured to promote a fair, sensitive, quick and confidential process. To resolve disputes, problems or concerns, staffs are encouraged to use this policy and procedure, and also encourage and support people who access our services and their families to use the grievance procedure. We expect people to exercise good judgement and good faith in availing themselves of these rights. We would not expect people to make false allegations or complaints. There will be no recrimination against people availing themselves of the rights established under this policy.

Encouraging and supporting people to be open about issues and to raise them through this procedure helps develop harmonious and constructive work and service relationships for the benefit of all involved at National Premier Disability Services.

## PROCEDURES

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1. This procedure applies to all staff, the client and their families.
2. All people are informed of their right to complain and offer feedback at the time of their entry into services.
3. National Premier Disability Services will use Translator or Interpreter in order to ensure this information is appropriately communicated to the client, families or staff who are culturally and Linguistically Diverse. Appropriate resources will be provided to assist CALD people throughout the grievance procedure. National Premier Disability Services will ensure that staffs are trained in cultural competency to eliminate or reduce barriers to communication and de-escalate misunderstandings and disputes.
4. Client will be provided with regular training to assist them to understand their right to make a complaint, and the procedure in making a complaint. This training is provided by both National Premier Disability Services staff and external providers, such as a Disability Advocacy Network (DAN).
5. Families/carers and staff will be provided with regular reminders about our grievance policy and procedure to assist them to understand their right to make a complaint, and the procedure in making a complaint.
6. The Manager of National Premier Disability Services has an open-door policy, encouraging the client, their families/carers and staff to discuss issues and provide feedback in any form that is comfortable for them. The Manager will provide a private place for discussion, and confidentiality is assured.
7. National Premier Disability Services has a commitment to listening to the client and their families/carers and taking their feedback to shape the policies and procedures of the service. We will provide a variety of methods to encourage people to offer their ideas and suggestions such as staff/family meetings, surveys, focus groups.
8. All service related issues, problems, complaints, concerns, misunderstandings or disputes may be the subject of the grievance process. These may include discrimination in any form; working conditions, sexual harassment, intimidation or coercion, assault, workplace safety, disciplinary action, interpretation of the Company's policies, job assignments, service provision issues, or other issues.
9. It is important that all complaints be dealt with as quickly as possible. It is the responsibility of all staff and clients/families to minimise delay and to proceed through the grievance process in a timely and efficient manner. All involved have a further obligation to be absolutely diligent in maintaining confidentiality, and to remain fair, impartial and respectful of people during the process.
10. National Premier Disability Services have established time frames to support quick progress of matters.
11. Everyone is reminded that in any grievance procedure, the aim is to ascertain the facts as fully as possible, investigate the facts and circumstances, gather supporting evidence, then endeavour to reach a fair and

reasonable resolution after evaluating all information. Both sides will be given the opportunity to present their version of events and put forward supporting material if this is necessary.

12. Where the informal procedure does not resolve the issue, a staff member, person we support, or family member may follow the formal grievance procedure. A staff member, person we support, or family member may also opt to follow the grievance procedure without first pursuing informal resolution if desired within seven working days of the issue arising.
13. The client and their families will be supported by the person of their choice to make an informal and/or formal complaint in a way that is meaningful to them. If the support person is employed by National Premier Disability Services, this staff member will ensure that the client has clear communication about all steps of the process.
14. The nominated Manager will meet with the individual and a written record of the grievance is to be taken and is to be signed by the person. If the grievance relates to another person, then that person (or persons) against whom the complaint is made is to be informed at the earliest opportunity, and at least 48 hours before any formal discussions regarding the matter are conducted. The full facts of the complaint are to be provided. A written record of reply is to be taken (and signed).
15. Investigation into a grievance will be conducted by the relevant Manager or other designated person. The responsibility of the designated Manager is to then talk with the parties (together or separately), and others if involved, investigate issues, and gather information or evidence. Based on all this information, an evaluation will be made. Two outcomes are possible. The grievance is substantiated (it occurred), the grievance is unsubstantiated (facts do not support the allegation, or the facts are disputed). A written report of the evaluation, supported by recommendations, is to be provided no later than 4 weeks of the complaint being lodged. Action which may be taken, depending on the nature and seriousness of the grievance and outcome of procedures, range from requiring a written apology, to the issuing of a written warning, training, counselling or dismissal.
16. A record of all complaints is kept by the Director on the Company's Complaints Register and is regularly reviewed for analysis of trends. Complaints are advised to the Director and serious or external complaints reported to the Board if warranted.
17. National Premier Disability Services would not expect a staff member, client or family member to abuse these privileges by making false complaints.
18. National Premier Disability Services will keep the following written records as part of the formal grievance procedure:
  - the written statements of both the person with the grievance and the person who has the grievance made against them,
  - notes or reports of contact officers,
  - notes or reports of those reviewing the grievance,



- Any recommendations made, and action carried out
19. Grievances or outcomes of grievances are not to be placed on individual personnel files. All grievance reports and files are to be stored in the relevant director's office.
  20. At any stage during the process of raising or resolving a grievance the person(s) bringing forward the grievance have the option of having a support person(s) of their choosing to assist them.

## SERVICE ACCESS

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### PURPOSE

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To ensure that each person with disability has fair access to National Premier Disability Services' disability services on the basis of available resources; and that the services provided are person centred. National Premier Disability Services specialist disability services shall be available for the following:

- people living in the community who do not have access to existing learning and skills development support;
- people living in group homes and other types of supported accommodation who are in need of a learning and skills development program;
- persons who are at risk of entering a more intensive support model unless entry into a day or learning and skills development service is facilitated;
- people who have older parents or carers; and
- Persons with limited or no access to other services for reasons of social isolation, geographic location and limited peer support networks.

National Premier Disability Services will:

1. Establish clear entry criteria to disability Services.
2. Ensure that entrance criteria will include the priority targets established by the NDIA and these may be changed from time to time by the NDIA.
3. Be aware of, and act upon, any legal provisions of Commonwealth or Territory laws including contractual obligations.
4. Acknowledge that National Premier Disability Services' disability services cannot meet all the needs of every client
5. Provide support to people with disability to the extent of the resources available to it.

6. Ensure where National Premier Disability Services is unable to provide a person with disability access to its service, a referral to another agency may be made.
7. Develop and maintain networks with other services that provide support to people with disabilities, and mainstream services.
8. Ensure people will receive support that most appropriately meets their needs and goals in relation to lifestyle. Services will not be offered by National Premier Disability Services where a more appropriate agency exists and has the capacity to offer support.
9. Provide brochures and other materials about our services in various formats, as and when appropriate. For example, pictorial and easy to read documents, and use of electronic devices.
10. Follow clear exit procedures if a client chooses to withdraw from National Premier Disability Services' service or the Company ceases to provide services.

## ENTRY CRITERIA

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- Access to services is offered to eligible persons living with disability of all ages, regardless of race, gender, sexual preference, religion, philosophy, or cultural background.
- Referral to the service can be made by schools, families, advocates, other services or agencies or directly from the applicant themselves through the Company office.
- National Premier Disability Services will ensure that people making enquiries about disability services can exercise their right to:
  - Receive information about the eligibility criteria;
  - Receive information about the service's operations and how decisions are made;
  - Receive information about assistance and support available;
  - Privacy and confidentiality;
  - Negotiate how services are delivered to them; and
  - Access effective grievance mechanisms
- National Premier Disability Services will only provide support to people to the extent of the resources available to it.
- External assessments may be sought if the company deems it necessary for determination of eligibility to the service.
- Entry to services does not automatically entitle people with a disability to entry to the other services  
The people who access National Premier Disability Services need to:

- Have been determined to be eligible for specialist disability services by NDIA and/or have the appropriate funding to cover their support needs.
- Have family, a carer, advocate, or sponsor willing to offer additional support beyond the Company service coverage.
- Have demonstrated the ability and willingness to behave in a manner appropriate to the National Premier Disability Services environment. This includes being able to interact appropriately with the other clients accessing services.
- Be prepared to pay for agreed activities that are chosen and organised.
- Have family or a carer prepared to work as a team with the staff, especially in matters relating to behaviour management and health issues.
- Be prepared to follow National Premier Disability Services policies and procedures (eg. Medication procedures).

<b>Policy Code</b>	<b>G001.01</b>
<b>Person Responsible</b>	<b>Director</b>
<b>Status (Draft/Released)</b>	<b>Released</b>
<b>Date Last Updated</b>	<b>5 October 2018</b>

## EXIT POLICY

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### PURPOSE

A person can exit National Premier Disability Services' services at any time if they choose. Support will be provided to assist the person in their referral to other services if required. National Premier Disability Services can terminate the service at any time within specific criteria as detailed below.

This policy outlines the process that people can use to exit National Premier Disability Services' services. It also outlines the process National Premier Disability Services can use to exit a client from its disability specialist services.

## PROCEDURES

1. People can choose to exit services at any time. Where such a decision is made by the individual or their family without having alternative service access organised, a meeting with the person and their guardian/advocate will be encouraged to determine the reason(s) for the decision and to plan necessary support and/or referral to another service(s) if requested.
2. People are encouraged to give two weeks' notice when exiting the service unless special circumstances exist.
3. Where a person chooses to exit the service to take up alternative activities during the day, they will be supported to ensure the change occurs with minimal disruption to them.
4. Where a person (or guardian/advocate) continues to break or refuses to abide by the National Premier Disability Services' Conditions of Service, a meeting to discuss the situation will be held with the person, their family, carer or advocate to discuss a satisfactory resolution to the problem. Where a satisfactory resolution cannot be achieved, the Company will, in consultation with the client and their guardian/ advocate, refer the client to alternative generic or specialist community services. In such a situation, the person and their advocate/ guardian will be regarded as being in breach of the Service Agreement giving National Premier Disability Services the right to terminate the agreement.
5. All clients have the right to appeal any disciplinary action through the Complaints Process (Disability Service Standard 4, Policy 3.9 Grievance).
6. National Premier Disability Services can choose to exit a person from its specialist disability services if:
  - There are significant detrimental changes to the funding structure;
  - There is an economic downturn or situation where National Premier Disability Services cannot continue to financially support the service;
  - The level of support required by the client exceeds expectations, and is likely to continue to exceed them as specified in the Personal Plan;
  - Another service is identified as more appropriate for meeting the needs of the person;
  - The person will not follow specified safety procedures and consistently places himself/herself or others in dangerous situations after all attempts to rectify the behaviours through behaviour intervention plans have been unsuccessful;
  - The person no longer satisfies entry selection criteria;
  - The medical condition and physical health of the person deteriorates to such an extent that appropriate support cannot be provided by the Company;
  - The behaviour becomes dangerous to others in the program. The service will, in consultation with the client and their parent/advocate, refer the person to alternative generic or specialist community

services. If no alternate services are available, a referral will be made to the NDIA and ACT directorate of Housing, Disability and Community Services.

7. When a client leaves the Company's disability service, consultation will occur in regard to the transfer or disposal of personal records.

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## **SERVICE MANAGEMENT**

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### **PURPOSE**

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National Premier Disability Services adopts sound management practices that maximises outcomes for people with a disability, families, staff and the community. This policy identifies strategies utilised by National Premier Disability Services in order to provide the best possible service to people with disabilities in a professional manner within available resources.

### **PROCEDURE**

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1. National Premier Disability Services is managed in a manner which makes the best use of its human, physical and financial resources to maximise outcomes for the client.
2. National Premier Disability Services ensures the legal and human rights of people with a disability are upheld. This will also be reflected in the Company's policies, procedures and the actions of staff and Management.

3. National Premier Disability Services develops and implements operational policies and procedures that focus on meeting the needs of people with a disability (See Disability Service Standard 3 – Individual Outcomes), implementing a person-centred approach to service planning and provision.
4. National Premier Disability Services is aware of, understands, and carries out its role and functions to meet its funding obligations and legal responsibilities.
5. National Premier Disability Services monitors its activities and regularly evaluates its services through internal and external monitoring to meet the Company objectives and the requirements of the NSW Disability Services Act 1993 associated Standards. The client and their families/advocates will be aware of the processes of evaluation against the NSW Disability Services Standards and input will be invited informally at any time, and formally as arranged.
6. National Premier Disability Services is committed to the Disability Services Standards, Quality Assurance, and benchmarked industry best practice as well as to its own monitoring processes.
7. National Premier Disability Services continually monitors and improves the quality and delivery of its services, and support mechanisms through its proposed Quality Assurance Strategy.
8. National Premier Disability Services has a commitment to ensuring the best possible staff support is made available to the client.
9. National Premier Disability Services ensures that staff recruitment occurs in a manner that meets current industrial relations requirements
10. National Premier Disability Services will be committed to Equal Employment Opportunity policy and will ensure that it's employed, and volunteer staff receive appropriate support; and that they understand their role, the operations of the service and the accountability requirements for their work-related activities
11. Duty statements assist staff (including volunteer staff) to understand their roles and responsibilities.
12. All staff (including volunteer staff) receives orientation to National Premier Disability Services and to the section they work in so that their performance enhances outcomes for clients
13. All staff will undergo Criminal History Record Checks and to provide a Working with Children and Vulnerable People Check.
14. An annual Staff Appraisal system, including a recommitment to the National Premier Disability Services' Code of Conduct, shall be in place for support staff.
15. People with disability will receive services from appropriately skilled and competent staff. National Premier Disability Services commits itself to the ongoing educational and skills advancement of all staff.
16. National Premier Disability Services will document its strategic planning priorities.
17. A process for person-centred planning is in place for the client, with the support of their family/advocate, is central to the planning of the individual support they receive. (see Disability Services Standard 3 – Individual Outcomes).

18. National Premier Disability Services will support people to access external avenues for advocacy, and legal/human rights actions.
19. National Premier Disability Services will provide training and access to complaints procedures for the client and their families/advocates. (See Disability Services Standard 4 – Feedback and Complaints).
20. A variety of methods are provided for people to provide feedback to help shape the company's policies and procedures (eg. Customer Satisfaction surveys focus groups, staff recruitment procedures).
21. The roles and responsibilities of Directors, business unit managers will be clearly defined, documented and available.
22. Sound accounting practices in accordance with the Australian Accounting Standards and Companies Law are in place and reviewed.
23. National Premier Disability Services prepare annual budgets and financial year accounts and reports on each section monthly to the Director and annually to funding departments, the Australian Securities Commission, and to the shareholders
24. National Premier Disability Services monitors administrative costs and overheads as part of its financial monitoring.
25. National Premier Disability Services maintains an appropriate level of insurance.
26. National Premier Disability Services is aware of the legal and social expectations to ensure a safe environment for the delivery of services.
27. National Premier Disability Services ensures that each section establishes and maintains workplaces in a condition that is safe for all those who work or visit there (see Work Health & Safety policy).
28. National Premier Disability Services will provide and maintain appropriate facilities and equipment; allowing staff to work in an environment that maximises their personal and professional skills in ways that promote positive outcomes for the client (see Work Health & Safety policy).
29. National Premier Disability Services will participate in coordination, networking and benchmarking with other agencies and other relevant organisations.

<b>Policy Code</b>	<b>G001.01</b>
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## 1.2 SERVICE DELIVERY

### CLIENTS RIGHTS AND RESPONSIBILITY

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#### POLICY

National Premier Disability Services has processes in place to ensure clients are provided with information to assist them to make service and life choices.

#### CLIENT HANDBOOK

Upon accessing the service, a new client will be provided with a client handbook by the **Client manager**. This should occur no later than **the initial assessment visit**.

Understanding of the information will be confirmed with the person, their carer or family and this will be recorded on the Assessment form. Clients are required to sign they have received and understood the information provided on the assessment form.

Information is provided in an accessible format and methods used to achieve this may include, but are not exclusive to:

- The **Client manager** taking the client through the information contained in the Client Information Pack and verbally reiterating the content;
- Ascertaining if an interpreter is needed prior to conducting the client assessment and providing information resulting in arranging for an interpreter to be available;
- Ascertaining if the client has a requirement for sign language and arranging this prior to the initial visit;
- Developing client information in required languages if/when demographics of the client group require this;
- Developing client information in other formats eg compic if this is determined through demographics of the client group accessing the service;

#### RIGHTS AND RESPONSIBILITIES

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As a **NSW Citizen** people have the following rights:

1. Your right to recognition and equality before the law
2. Your right to life
3. Your right to protection from torture and cruel, inhuman or degrading treatment
4. Your right to freedom from forced work
5. Your right to freedom of movement
6. Your right to privacy and reputation
7. Your right to freedom of thought, conscience, religion and belief
8. Your right to freedom of expression



9. Your right to peaceful assembly and freedom of association
10. Your right to protection of families and children
11. Your right to taking part in public life
12. Every person has the right to take part in public life, such as the right to vote or run for public office.
13. Cultural rights
14. Property rights
15. Your right to liberty and security of person
16. Your right to humane treatment when deprived of liberty
17. Rights of children in the criminal process
18. Your right to a fair hearing
19. Rights in criminal proceedings
20. Right not to be tried or punished more than once

People who access our services also have the following rights:

21. Access to an expected quality of service
22. Access to an advocate of your choice during any interaction with National Premier Disability Services
23. Personal privacy and dignity
24. Access to personal information
25. Access to feedback processes
26. A process for complaints, appeals and allegations of abuse and neglect
27. Freedom from abuse, neglect, violence and preventable injury.

People receiving services have a responsibility to:

- Respect the human, legal and industrial rights of workers including the right to work in a safe work environment.
- Treat workers without exploitation, abuse, discrimination or harassment.
- Abide by the terms of their written agreement.
- Acknowledge that needs change and negotiate modification to care and services.
- Accept responsibility for personal actions and choices which may contain an element of risk.
- Give enough information to assist National Premier Disability Services to develop, deliver and review care plan.
- Tell National Premier Disability Services and our staff about any problems with the care and services.
- Allow safe reasonable access for workers at the times specified in my personal plan or otherwise by agreement.
- Provide reasonable notice if I do not require a service.

- Pay any fee as specified in the agreement or negotiate an alternative arrangement with National Premier Disability Services if any changes occur in my financial circumstances.
- Provide enough information to determine an appropriate level of fees.

## **ADVOCACY**

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### **POLICY**

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National Premier Disability Services has processes in place to ensure people are supported to access and utilise an independent advocate of their choice in all dealings with National Premier Disability Services.

### **PROCEDURE**

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All clients have a right to involve an advocate of their choice to assist in communications with National Premier Disability Services. Examples of situations where people will be informed of their rights and encouraged to access an advocate include but are not limited to:

- Conducting an assessment
- Development/review of care plans
- Raising comments/complaints
- Requesting access to personal information or discussing privacy issues with us
- Leaving our service

The advocate may be a family member, friend, or from an advocacy service eg Office of Public Advocate [www.publicadvocate.nsw.gov.au](http://www.publicadvocate.nsw.gov.au).

People accessing our services are made aware of their entitlement to be represented at all stages by an advocate of their choice and they are informed of this right when lodging a complaint. Wherever possible we will facilitate clients access to an advocate should they wish.

When a client informs National Premier Disability Services of their choice to access and utilise an advocate the Client manager is to record this on the client record.

To ensure currency a list of advocacy services is available and should be accessed from the Australian government Department of Social Services website.

### **STAFF MEMBERS AS ADVOCATES**

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Staff members within our organisation will not become a client's advocate in relation to our own organisation.

### **OTHER CONTACTS:**

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People who are deaf, or have a hearing impairment or speech impairment, can be supported to contact us through the [National Relay Service](#).

## ALLEGATIONS OF ABUSE AND NEGLECT

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### POLICY

National Premier Disability Services has process in place to provide staff **and volunteers** with information and training to ensure the safety of people using our service.

To ensure that our staff **and volunteers** safeguard people who use our services and keep them safe from abuse and neglect we require each staff or volunteer to have some current police **and working with children** check and meet all requirements of National Premier Disability Services Recruitment and Selection policy/procedure.

We recognize the vulnerability of children and young people with disabilities and acknowledge our duty of care.

### UNDERSTANDING ABUSE AND NEGLECT

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**Physical abuse:** Any non-accidental physical injury or injuries to a child or adult. This includes inflicting pain of any sort or causing bruises, fractures, burns, electric shock, or any unpleasant sensation

**Sexual abuse:** Any sexual contact between an adult and child 16 years of age and younger; or any sexual activity with an adult who is unable to understand, has not given consent, is threatened, coerced or forced to engage in sexual behaviour.

**Psychological or emotional abuse:** Verbal assaults, threats of maltreatment, harassment, humiliation or intimidation, or failure to interact with a person or to acknowledge that person's existence. This may also include denying cultural or religious needs and preferences.

**Constraints and restrictive practices:** Restraining or isolating an adult for reasons other than medical necessity or the absence of a less restrictive alternative to prevent self-harm. This may include the use of chemical or physical means or the denial of basic human rights or choices such as religious freedom, freedom of association, access to property or resources or freedom of movement.

**Financial abuse:** The improper use of another person's assets or the use or withholding of another person's resources.

**Legal or civil abuse:** Denial of access to justice or legal systems that are available to other citizens

**Systemic abuse:** Failure to recognise, provide or attempt to provide adequate or appropriate services, including services that are appropriate to that person's age, gender, culture, needs or preferences.

Forms of Neglect include (but are not limited to):

**Physical neglect:** Failure to provide adequate food, shelter, clothing, protection, supervision and medical and dental care, or to place persons at undue risk through unsafe environments or practices.

**Passive neglect:** A caregiver's failure to provide or willful withholding of the necessities of life including food, clothing, shelter or medical care.

**Willful deprivation:** Willfully denying a person who, because of age, health or disability, requires medication or medical care, shelter, food, therapeutic devices or other physical assistance - thereby exposing that person to risk of physical, mental or emotional harm.

**Emotional neglect:** The failure to provide the nurturance or stimulation needed for the social, intellectual and emotional growth or wellbeing of an adult or child.

## REPORTING INCIDENTS, OR SUSPECTED INCIDENTS OF ABUSE OR NEGLECT

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National Premier Disability Services has a moral, professional and legal obligation to provide a safe environment for service users. To this purpose staff, **volunteers**, and families are also made aware of their duty of care, professional boundaries, and reporting obligations including the need to exercise vigilance in reporting any incident, or suspected incident or concern, to Service Manager. Mandatory requirements for the reporting of allegations of Physical and Sexual Abuse must be managed by **Service Manager** in a timely manner as prescribed by funding requirements.

Every situation will be treated with respect and assessed on the individual circumstances and in accordance with departmental guidelines.

## REPORTING ALLEGATIONS OF PHYSICAL OR SEXUAL ASSAULT

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Physical or sexual assault constitutes a Serious Incident and must be immediately reported to the most senior staff member available or the **Service Manager**. In the event of such an incident management and staff will be required to refer to/follow the Incident reporting procedure. All suspected, actual or alleged incidents of physical or sexual assault must be reported to the Director who will respond in accordance with Government Guidelines.

## MANAGING AN ALLEGATION OF ABUSE

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If the **Service Manager** believes that the person is at immediate risk, take whatever steps are required to mitigate the risk and ensure the person's safety while the matter is fully investigated.

Staff will follow the Incident Reporting procedure and mandatory reporting procedure. The **Service Manager** in consultation with staff and the person, their family, carer or advocate will determine whether to take further action.

Where an allegation is made about a staff member, that person may be removed from duty until the allegation is resolved. Staff members involved in allegations will be supported until that allegation is substantiated or resolved. Staff members will be offered employee assistance.

We will involve family members or advocates where appropriate and requested by the client and seek the advice and expertise of other professionals and involve other government organisations as required, to determine whether to take or not take action or investigate the allegation.

The **Service Manager** has responsibility to continue to monitor the situation, review at predetermined timeframes record and document the decisions taken and the reasons that led to the decisions.

If the matter involves any actions that are unlawful immediately advise the Director who will in turn ensure the relevant authorities (police, funding bodies, Disability Services Commissioner) are notified. Ensure that the person receives the appropriate professional support and counselling as required.

Once the matter has been finalised identify areas of service improvement with the aim of preventing any similar incidences occurring in the future. Provide people and their families, significant others or advocates feedback and outcomes resulting from the incident.

## REPORTS OF DOMESTIC VIOLENCE

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Where staff are informed of domestic violence or suspect that domestic violence is occurring within a family they should discuss this with their **Service Manager**. Family members will be supported to access professional organisations which specialise in domestic violence.

## REFERENCES

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Disability Services Employment Safety Screening Policy 2005

Working with Children Act 2005

Abuse and Neglect Procedures -NSW GOVERNMENT

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## RESTRICTIVE INTERVENTION

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### POLICY

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National Premier Disability Services has processes in place to ensure each person's human rights are respected and upheld. Where a person's behaviour requires some restriction of their rights, we ensure the least restrictive alternative is applied only when necessary and for as little time as possible.

We will work with people who use our services, their family, support network and advocates to empower them and provide appropriate support for each person who has a restriction placed on their rights.

We will ensure monitoring processes and strategies are in place to regularly monitor and review all interventions that restrict rights.

## UNDERSTANDING RESTRICTIVE INTERVENTIONS

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**Definitions:** The Behaviour Support Policy (2012) contains the following definitions that are relevant to the use of restrictive interventions.

<b>Exclusionary Time Out</b>	Recommendation to deny access to reinforcement by forcibly moving a Service User from one setting to another (e.g. room, corridor) for a period of time under supervision.
<b>Restricted access</b>	The recommendation to use physical barriers such as locks or padlocks or impose enforceable limits or boundaries in an environment beyond normally accepted community practices
<b>Seclusion</b>	The recommendation to isolate an adult Service User (18 years and over) on their own in a setting from which they are unable to leave.
<b>Psychotropic Medication on a prn basis</b>	The use of Psychotropic Medication on a prn basis <sup>18</sup> is considered a Restricted Practice. Although the medication must always be administered as prescribed by the medical practitioner, the recommended support strategies are authorised and monitored through the RPA mechanism.
<b>Response cost</b>	The recommendation to withhold positively valued items or activities from a Service User in response to a particular behaviour or set of behaviours (e.g. access to a computer game or TV program).
<b>Physical restraint</b>	The recommendation to intentionally restrict a Service User's voluntary movement or behaviour by the use of: <ul style="list-style-type: none"> <li>• devices such as lap belts, table tops, posy restraints, bedrails, water chairs, deep chairs or beanbags;</li> <li>• physical force; or</li> <li>• arm splints</li> </ul> beyond that which is reasonably required to ensure safety, prevent harm or to comply with legal requirements.

### RESTRAINT AND SECLUSION

Restraint and seclusion can only be used to prevent a person from causing physical harm to themselves or others or destroying property in a manner that may cause harm to themselves or others.

Other criteria for the use of restrictive interventions include:

- restraint and seclusion is the option which is the least restrictive of the person as is possible in the circumstances; and
- restraint and seclusion is included in the person's behaviour management plan; and
- the use of restraint or seclusion is in accordance with the person's behaviour management plan; and
- is only applied for the period of time authorised by the Behaviour support practitioner and Restricted practice Authorisation Panel.

## PROHIBITED PRACTICES

Prohibited Practices include those that are abusive, those that constitute assault and those that constitute wrongful imprisonment. Prohibited Practices include those that:

- Cause physical pain or serious discomfort;
- Restrict access to basic needs or supports;
- Are degrading or demeaning to the Service User;
- May reasonably be perceived by the Service User as harassment or vilification;
- Are aversive;
- Are unethical; and
- Constitute an unauthorised Restricted Practice.

In addition, we comply with the Children and Young Persons (Care and Protection) Regulation (2000) requirement and prohibit strategies including:

- Any form of corporal punishment;
- Any punishment that takes the form of immobilisation, force-feeding or depriving of
- food; and
- Any punishment that is intended to humiliate or frighten a Service User.

## REPORTING RESTRICTED PRACTICES

Restricted practices will be linked to an approved Behaviour support plan. This should be developed with a competent Behaviour support practitioner. All restricted practices will be approved by the Restricted Practice Authorisation Panel.

## REFERENCES

Office of the Senior Practitioner, Ageing, Disability and Home Care, Department of Family and Community Services  
NSW Behaviour Support Policy (2012)

## ACCESS INTAKE AND REFERRAL

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## POLICY

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National Premier Disability Services has procedure in place for the allocation and provision of equitable services. Services are provided free from discrimination and are responsive to community diversity. People are allocated services based on a fair process of prioritisation of need and people eligible for services are informed of associated costs or conditions.

Services consider the needs and requirements of individuals from Aboriginal and Torres Strait Islander backgrounds, diverse linguistic and cultural backgrounds, and are responsive to individual circumstances.

Where barriers to access are identified during intake and assessment National Premier Disability Services will work with individual clients and their families, or advocate in meeting their needs and providing responsive services.

## SERVICE ACCESS

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Clients may access National Premier Disability Services by:

- ***Completing the on-line Enquiry form.***
- ***Telephone or email.***
- ***Referral from other practitioners or agencies.***

## ELIGIBILITY

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Eligibility for service provision is completed during initial contact. This may vary depending on:

- The service need of the client and National Premier Disability Services capacity to meet this.
- If a service to be provided is funded through a recognised funding program eg: Department of Human Services.

(Note: National Premier Disability Services does not operate a waiting list for non-funded services.)

To be eligible for funded services from National Premier Disability Services people must meet the following criteria:

- ***have a disability as defined by the NSW Disability Service Act 1993***
- ***live at home with their family or in home-based care, including foster / long term care***>
- ***Be eligible for NDIA funding***

***To be eligible for purchasable services clients must have access to funds that will enable full cost recovery of any service provided.***

## PRIORITY OF ACCESS

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Eligibility for the service does not guarantee access to the service. Access to National Premier Disability Services is determined by a range of factors. To support equitable access decision making, the following priority criteria have been developed

1. The need to strengthen or support the role of the family, carer or person's support network
2. The need to provide support to ensure the safety and wellbeing of the person, their family or carer or the wider community
3. The existence of multiple disadvantages within the person's personal, social or community context
4. The immediate and potential benefit of the support to reduce the likelihood for more intensive assistance in the future



5. The impact on the individual's wellbeing, living situation and quality of life should the disability service be unavailable
6. Aboriginal and/or Torres strait Islander

## **REFUSAL OF SERVICE**

On occasion, and after consultation and assessment, a decision may be made that National Premier Disability Services is unable to support the needs of a prospective or current client. In such circumstance the client/family will be supported to clearly understand the issues and provided with information, referral and support to seek the further assistance from government –through referral to DHS, Regional Intake and Response team. National Premier Disability Services will also provide information and referral to alternative support services.

Where a service cannot be provided the written response will include-

- The reason for refusal
- The placement on a waiting list-if applicable
- Contact details of alternative services/DHS
- Right of review/appeal
- Statement that if the persons circumstances change that they may re-apply, and this reapplication will be taken on its merits.

## **WAITING LIST MANAGEMENT**

When Aussie Premier Healthcare Services cannot meet demand for service a waiting list is used. The service manager will ensure the waiting list is monitored at least monthly and unmet need is reported to service manager. People placed on the waiting list are informed in writing and advised that they will be contacted every three months to reassess their requirements if services have not been provided.

People placed on the waiting list will be provided with information in an accessible format about alternative services in their community.

## **FEES**

National Premier Disability Services is committed to ensuring that financial disadvantage is not a barrier to accessing services. We will work with the individual client/family experiencing financial hardship to develop a manageable plan for payment or an agreement to reduce or waive fees/costs if appropriate.

People accessing services will be provided with information regarding any costs they will incur in a format which facilitates their understanding.

## EXIT FROM SERVICE

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There may be circumstances where a determination is made either by the client, National Premier Disability Services or due to funding /program restrictions that a person will leave our services. National Premier Disability Services in consultation with the client and their family or advocate and other services supporting the person will seek to ensure that exit from services is a planned and reflects a person-centred process which includes advocacy support and referral to other services/supports.

From time to time services may be withdrawn because of eligibility requirements, program and funding issues, for safety reasons or changed client needs.

## REFERRAL TO OTHER SERVICES

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National Premier Disability Services works collaboratively with other organisations to support a holistic approach to service delivery. We aim to refer people to appropriate services where a need is identified through assessment and planning and in consultation with people accessing our services.

We establish and maintain coordinated service pathways with relevant funded organisations including:

- ***Cald Organisation***
- ***Aboriginal organisation***

Staff are supported to provide people with accessible information about other services which may meet their needs. Staff work in a team environment and a local resource directory will be maintained to support staff to access current and relevant information about other services. Referral information and services may also be accessed through networks and partnerships.

## RE ACCESSING SERVICES

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Where a person chooses to leave our services or situations outlined above occur they will be informed of their right to reapply for services.

People will be supported to re access services by following the intake procedures outlined in this procedure.

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## ASSESSMENT AND PLANNING

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### POLICY

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National Premier Disability Services has procedures to ensure that people receive services that are planned, designed and delivered around their individual circumstances, needs and preferences.

*“Planning encompasses a range of responses from a brief discussion and agreement about actions required through to an extensive process and the development of a plan across a whole range of life areas documented in a format that is meaningful to the person and their network”-Disability Act 2006, Section 52(2)*

This policy establishes standards of practice that recognise each client of our organisation as having unique interests, preferences, personal goals and support needs. The policy has been framed around meeting individuals' needs as they are specified in the Disability Act 2006.

### PROCEDURE

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The following procedures ensure that National Premier Disability Services meets its policy objective of designing and delivering services that are planned in response to each individual's circumstances, needs, preferences and goals.

National Premier Disability Services will:

- Involve people and their key family members in the assessment of their needs and development of a plan for the provision of services.
- Inform people and their family that they may have an advocate of their choice to assist with planning and that we can assist them to access an Advocacy Service.
- Inform people and their families from a culturally and linguistically diverse background that Interpreter services can be made available

### ASSESSMENT

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The client manager may complete assessments through telephone contact and/or face to face interview depending on the complexity of the service delivery requirements and the needs of the client. People accessing services will be actively involved in the assessment which includes their strengths, risk, wants and needs. Where the initial assessment indicated the need for immediate assistance, we will support that person to have those needs met.

Assessment will occur no later than two weeks from accepting a referral.

When assessments are conducted in client's homes a home safety checklist is to be started prior to visiting the home and completed prior to the commencement of service. Staff should complete the home safety checklist and a copy should be retained in the client file.

A range of assessment tools may be used to ensure the needs of each individual are clearly identified and will take into consideration at a minimum a person's:

- Age

- Ability
- Gender
- Sexual identity
- Culture
- Religion or spirituality
- Interests
- Goals and aspirations
- Communication needs
- Health needs

Assessment processes are in place to support us and the person receiving services to ascertain what resources or services are required to meet their needs. When assessments identify needs that are not within National Premier Disability Services' service provisions, people will be advised, and an offer made to assist them through referral to other service providers.

## **SUPPORTING A PERSON DURING ASSESSMENT**

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A person's support person's needs may also be incorporated into assessment at the request of the client.

If appropriate a person may be supported by a person sensitive to their cultural needs.

Assessment must always consider a person's communication needs and these needs will be responded to.

Assessments will include, with client approval, information about other services and professionals in their support team. Consent to share information will be obtained for each person/service with whom information will be shared. On completion of the assessment a copy of the client assessment record is offered to the client. Staff will record who has received a copy of the assessment record on the document and a copy of the current client assessment will be filed in the client record.

## **PERSON CENTERED PLANNING**

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Planning processes are underpinned by the rights of each person to exercise control over their lives including living independently and managing their daily routines. Where appropriate and with the consent of the client, family members, carers and significant others, including other services and independent advocates will be engaged in the planning process.

Planning takes into account peoples:

- Age
- Ability
- Gender
- Sexual identity
- Culture
- Religion or spirituality
- Health and wellbeing needs

The Client manager in consultation with the person will develop Individual Person Centred Plans for each client specify timeframe. Where possible the Plan promotes functional and social independence and builds on the clients' strengths and capabilities. The plan should ensure that National Premier Disability Services are advocating for service options which best meet the needs of the person. The Individual Person Centred Plan is goal-oriented ensuring that each goal is measurable and reflects :(at a minimum):

- A persons strengths, needs, goals, supports and long-term outcomes
- Individual client goal/s (ascertained from the assessment and the clients preferences).
- Strategies to work towards meeting the goal/s.
- Persons responsible for the implementation of strategies.
- Timeframes for completion of the strategies.
- A date for review/evaluation of the Individual Person Centred Plan and associated plans.

Plans should include actions to minimise risk in the least intrusive and restrictive manner.

Individual Person-Centered Plan's should be signed by the client and/or their preferred person and a copy of the Plan is offered to the client. The Client manager will document on the plan who was involved in the development of the plan and who has received a copy.

## REVIEW/REASSESSMENT

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The Director will undertake a reassessment of the plan, at least annually unless increased frequency is identified by the person, their family or advocate, our organisation or a member of the support team.

The review includes, at a minimum:

- Consultation with the person and relevant others.
- Consultation with **Support Workers**.
- Review of each goal identified on the client Individual Person Centred Plan, and other associated plans
- Recording of progress to date in relation to the goals set (information may be recorded on the related plan and/or in a client file note). Goals may be met, partially met or not relevant any longer.

The review may result in:

- Recording of a new Individual Person Centred Plan or other plan/s, and ensuring this new plan or changes to the previous plan are signed off by the client and that the client is offered a copy of the new/revised plan.
- Conduct of new assessment/s – with needs identified transferred to goals on the Individual Person Centred Plan.

## REFERENCES

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NSW Disability Service Act 1993

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<b>Person Responsible</b>	<b>Director</b>
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## **INCIDENT REPORTING**

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### **POLICY**

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National Premier Disability Services has processes in place to report and monitor client related incidents. National Premier Disability Services follows mandatory procedures for recording and reporting incidents within the National Disability Insurance Scheme (NDIS). Incidents are reported promptly and accurately to enable management to meet the reporting requirements of DHS and facilitate ongoing monitoring and risk assessment.

### **PROCEDURE:**

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The current DHS guidelines and current DHS Incident Report Form are to be used to record all client related incidents. Staff are to write/print legibly using a black pen to enable hand written forms to be copied and faxed as required.

### **REPORTING CATEGORIES**

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There are two categories of reportable incidents-

#### **1. Category One Incidents**

Category One incidents are the most serious incidents that can occur at the service and must be reported immediately (as is practical) and accurately.

Category One incidents include:

- Client's whereabouts is unknown and there is grave concern for their or other's safety and welfare.
- Loss of or unauthorised disclosure of client information. Private client documents not stored according to privacy requirements
- Service related matters involving or impacting upon a client that have the potential for or result in public (media) or community comment.
- All deaths of a client in unusual or unexpected circumstances including but not limited to murder, overdose or suicide.
- Death of a parent, guardian or carer in unusual or unexpected circumstances that places clients under 18 years at risk.

- Possible overdose that results in loss of consciousness. Use that result in the client being admitted to hospital as an 'in-patient'. Use that is life-threatening
- Illness that has come on suddenly and results in unplanned hospitalisation as an 'inpatient'.
- An injury for which a person is admitted to hospital as an 'in-patient' and/or any of the following injuries: fractures, concussion, burns, severe cuts and/or a pattern of unexplained and/or concerning injuries.
- Unanticipated deterioration of a known medical condition that is life threatening and/or the client is admitted to hospital as an inpatient.
- Any medication error that results in significant or major life impact and/or the client is admitted to hospital as an 'inpatient'. Unauthorised administration of PRN restraint medication.
- All assaults of or by a client that led to serious injury and hospitalisation as an 'inpatient'. Assaults involving a weapon regardless of injury. All assaults or alleged assaults of a client by a staff member or volunteer carer regardless of injury.
- Failure to care adequately for a client to the extent that the health, wellbeing and development of the client is significantly impaired or at risk.
- Client found with illegal arms, explosives/dangerous goods.
- Damage or disruption to departmental or community service organisation property that significantly impacts on clients such as fire that results in severe service disruption.
- Actions/ behaviours by a client that intentionally cause harm or injury to self that requires admission to hospital as an 'inpatient'.
- Actions/behaviour with the intention to take one's life that requires urgent action such as assessment, medical treatment, mental health treatment and/or hospitalisation.
- Alleged rape (penetration or attempted penetration) of or by a client. Exchanging sex with predatory adults for money, goods, substance or favours.
- Any indecent act in front of or by a client that is reportable to the police. Exchanging sexual acts with predatory adults for money, goods, substance or favours. Production/possession of child pornography.

### Reporting Category One Incidents

1. The most senior member of staff involved in a Category One Incident must report it immediately to the Service manager. The Service manager. will forward the Incident Report to a senior **Department of Human Services Officer** as soon as possible, but no later than the next working day.
2. An Incident Report may include personal information from a third party, that is, someone who is not a client or staff member but perhaps witnessed or was involved in an incident. Where this occurs, the Privacy Policy in relation to collecting information from third parties will apply.

3. Once an Incident Report is completed by a witness or by the person to whom the incident was reported, the completed sections of the report must not be amended or altered in any way or for any reason. Should other witnesses or individuals disagree with the content of the report, the alternative views must be put in writing, on a separate piece of paper and attached to the completed Incident Report.
4. Section B of the Incident Report covers the response to the incident, and is completed by the Service manager. It is important that immediate action in response to the incident is recorded. If appropriate, action planned to prevent reoccurrence should also be completed. Where the need to develop long term or complex responses coincides with the urgent submission of the Incident Report to the Department, this should be noted on the Incident Report. The response should then be completed within five working days and appended to the original Incident Report. Copies should be placed on relevant client and staff files.
5. The **Service manager** should notify their **DHS agency liaison** and inform them of the reporting of a Category One incident immediately following the lodgement of the report.

Category Two incidents involve events that seriously threaten clients or staff, but do not meet the Category One definition. Incidents occurring at the service or during service delivery must be reported.

Category Two incidents typically include:

- Client's whereabouts is unknown and there is concern for their or other's safety and welfare
- Agitated behaviours that result or pose a threat to self or other such as throwing items, banging or kicking windows/doors with injury property damage, placing self a risk on road, playing with matches lighters Minor theft/robbery by a client.
- Behaviour that interferes with the delivery of service and intervention is not outlined in a documented support plan. Behaviour(s) of such intensity, frequency or duration that the physical safety of the person or others is placed at threat.
- Sexual actions (including sexual play) of concern by a client and/or there is a power imbalance. Chronic preoccupation with sexually aggressive pornography
- Neighbourhood or localised incidents as the result of a client's actions and/or illegal activities in departmental or community service organisation facilities.
- Death of a client who was living in disability residential accommodation which was a consequence of the progression of a diagnosed condition or illness.
- Use (of drugs) for which the client attends and/or receives treatment by a medical practitioner or presentation at a hospital emergency department. Use (of drugs) by a client under 18 years in care where the client's functioning is impaired.
- An illness that has come on suddenly and the client attends and/or receives treatment by a medical practitioner but is not admitted to hospital as an 'inpatient'.



- An injury for which a person attends and/or receives treatment by a medical practitioner or presentation at a hospital emergency department. Unexplained injuries (for example bruises and/or cuts).
- Unanticipated deterioration of a known medical condition where the client attends or receives treatment by a medical practitioner or presentation at a hospital emergency department.
- Any medication error that may result in a less significant or major life impact based on advice from a doctor, pharmacist or poisons information centre and/or the client attends and/or receives treatment by a medical practitioner or presentation at a hospital emergency department.
- Assault of or by a client that results in medical attention being sought or required for the victim and/or presentation at a hospital emergency department and/or threatens health, safety or wellbeing. Threatened assault of or by a client that has potential to cause harm.
- Inappropriate behaviour or inadequate care by caregivers (including members of a carers' household) or staff. Inappropriate behaviour by a carer or staff in response to disruptive or dangerous behaviour of a client.
- Client found with other illegal or unauthorised goods/drugs.
- Damage or disruption to a department or community service organisation property that impacts on clients including minor fire damage. Vehicle damage as the result of an accident which occurred while transporting clients. Theft/robbery of a client's assets (including property/money) in department or community service organisation managed property by a person unknown.
- Actions/behaviours by a client that intentionally cause harm or injury to self that requires medical attention and/or presentation at a hospital emergency department
- Actions/behaviour with the intention to take one's life that requires medical attention and/ or presentation at a hospital emergency department. Words/gestures that threaten suicide with capacity to implement or carry out the threat.
- Public display of verbal and/or physical of sexualised behaviour by clients that may be of concern to others.

### **Reporting Category Two Incidents:**

1. The most senior member of staff available at the time of the incident must report the incident immediately to the relevant Service manager. The Incident Report must be submitted to the Service manager by the next working day
2. Once received by the Service manager, the completed Incident Report form needs to be faxed to the **Department of Human Services** within two working days.
3. The Service manager will be required to record the incident on the Category Two Incident Register.

An Incidents Register will be maintained and reviewed at the end of each quarter at the Annual meeting, to monitor any trends or patterns of behaviour. The on- going review and response to incidents will be an agenda item for fortnightly staff meetings to monitor type and frequency and to monitor the effectiveness of responses to reduce risk/reoccurrence.

**Reporting/ responding to physical and sexual assault. Refer also to Allegations of Abuse and Neglect procedure.**

## References

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## INFECTION CONTROL

### POLICY

National Premier Disability Services has processes in place to guide the practice of staff in their awareness of infection control practices.

### HAND WASHING

Hand Hygiene includes; (1) alcohol-based hand rubs (ABHR) and (2) running water with plain or microbial liquid soap. The ABHR should contain between 60% and 80% v/v ethanol or equivalent

Hand washing and hand care are considered to be the most important measures in infection control. Skin that is intact, this is without cuts, abrasions or lesions, is a natural defence against infection. The risk of personnel acquiring transient organisms on their hands is usually greatest after contact with body substances and fluids or through contaminated objects.

As artificial nails have been associated with higher levels of infectious agents, artificial nails are not to be worn. Fingernails should be kept short. It is good practice not to wear nail polish and if so, it should be removed every 4 days. It is recommended not to wear watches, rings or other jewellery during health care. If jewellery is to be worn it should be limited to a plain band (e.g. wedding ring) and this should be moved about on the finger during hand hygiene practices.

Purpose - the purpose of hand-washing is simply to remove bacteria from recent contact with contaminated substances or objects.

Steps - Wash hands using a neutral hand cleaning liquid soap. Washing involves a rubbing action followed by rinsing under running water and then drying with a paper towel. There are liquid soap dispensers and paper towel dispensers at each hand basin throughout the facility. In the absence of soap and water, an alcohol disinfectant is used.

When - Hands are to be washed or ABHR used

1. Before commencing work;

2. Before and after contact with clients and between individual clients;
3. Whenever hands are exposed to body fluids, garbage or dirty linen;
4. After removing gloves;
5. Before and after performing any procedures;
6. Following any cleaning procedure;
7. Before & after meal breaks;
8. When finishing work;
9. Before and after touching food and utensils;
10. After sneezing or coughing into hands;
11. After going to the toilet.

Healthy intact skin provides an adequate barrier to infection. Breaks in skin should be covered with a waterproof dressing.

## **BLOOD SPILLS AND OTHER BODY FLUIDS**

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It is important to treat all blood and body fluids as potentially infectious.

Gloves should be worn whenever contact with blood or body fluids is likely to occur.

Care should be taken to prevent splashing of blood and other body fluids on to mucous membranes such as eyes and mouth.

### **Management of blood or body substance spills**

<b>Spot cleaning</b>	Select appropriate PPE Wipe up spot immediately with a damp cloth, tissue or paper towel Discard contaminated materials Perform hand hygiene
<b>Small spills (up to 10cm diameter)</b>	Select appropriate PPE Wipe up spill immediately with absorbent material Place contaminated absorbent material into impervious container or plastic bag for disposal Clean the area with warm detergent solution, using disposable cloth or sponge Wipe the area with sodium hypochlorite and allow to dry Perform hand hygiene
<b>Large spills (greater than 10cm diameter)</b>	Select appropriate PPE Cover area of the spill with an absorbent clumping agent and allow to absorb Use disposable scraper and pan to scoop up absorbent material and any unabsorbed blood or body substances Place all contaminated items into impervious container or plastic bag for disposal

	Discard contaminated materials Mop the area with detergent solution Wipe the area with sodium hypochlorite and allow to dry Perform hand hygiene
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## SHARP INJURIES

If an incident occurs which involves a break to the surface of the skin:

- Encourage bleeding of the punctures or cuts and wash the area with soap and water.
- If the eyes are contaminated, rinse eyes while open with lots of tap water or saline.
- If blood gets into the mouth, spit and then repeatedly rinse with water after carrying out the appropriate first aid measures previously outlined.
- The incident should be reported to Service manager.
- The staff member involved in the incident should be encouraged to see a medical practitioner who will assess the risk of disease transmission and discuss options for testing and treatment.
- Management provide immediate counselling and time out for the staff member if required.
- An incident report is to be completed.

## LINEN AND LAUNDRY

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Gloves should be worn when handling linen used by clients. Where possible each person's laundry should be washed separately.

## VIRAL GASTROENTERITIS

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- Viral Gastroenteritis is a common illness and outbreaks often occur. The symptoms are non-bloody diarrhoea, vomiting, nausea, headache, fever and chills.
- Any client or staff member suspected of having viral gastroenteritis needs to be kept away from other staff and clients and leave work as soon as possible.
- Viral gastroenteritis is highly infective; staff with gastroenteritis should not work for 48 hours after symptoms have stopped.

***What are the symptoms of viral gastroenteritis?***

The main symptoms of viral gastroenteritis are vomiting and watery diarrhoea. Other symptoms may include nausea, fever, abdominal pain, headache, and muscle aches. Dehydration can follow. Symptoms can take between one and three days to develop and usually last between one and two days, sometimes longer.

### ***Mode of Transmission***

Viral gastroenteritis occurs when viruses are taken by mouth. This happens in the following ways:

- From person to person by either direct contact – by personal contact or contact with faeces or vomit of an infected person, or by indirect contact – by touching contaminated surfaces e.g. taps, keyboards, toilet handles.
- Airborne droplets from when a person vomits or has diarrhoea.
- Drinking contaminated water or consuming food grown in, washed or prepared with contaminated water.
- Infected people may continue to have the virus in their faeces and pass the infection on to others from 48 hours to 14 days after symptoms have stopped.
- People can also briefly carry the virus, which causes viral gastroenteritis without having any of the symptoms. These people can still pass the disease to others.

### ***What Should People With Viral Gastroenteritis Do?***

- There is no specific treatment for viral gastroenteritis except rest and drinking plenty of fluids. Most people will recover without any complications. However, viral gastroenteritis can be serious for those who may have difficulty replacing fluids lost through vomiting and diarrhoea.
- People with vomiting or diarrhoea should:
  - Rest at home, not attend work or school or child care.
  - Not prepare food for others and not care for clients.
- These precautions should continue until 48 hours after recovery:
  - Wash hands thoroughly with soap and running water after using the toilet.
  - Drink plenty of clear fluids. Avoid undiluted fruit juice and soft drinks as they may increase dehydration and diarrhoea.

## **CONTROL MEASURES**

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### ***Preventive Measures***

Prevention is dependent on attention to safe food handling practice and personal hygiene.

### **Control of Case**

Treatment is symptomatic and is focused on maintaining hydration. Support workers and food handlers should be excluded from work until at least 48 hours after symptoms have ceased.

### **Standard Precautions**

Blood and body substance precautions (standard precautions) are intended to reduce the risk of transmission of blood-borne pathogens.

All blood and body substances are considered to be potentially infectious. This principle is applied universally to all people regardless of their infectious status. Standard precautions involve the use of protective barriers and practices to protect clients and support workers exposure to blood and body substances, and to minimise the transmission of blood-borne disease.

Standard precautions consist of:

- Hand hygiene, before and after every episode of client contact
- The use of personal protective equipment (PPE)
- Routine environmental cleaning
- Cough etiquette
- Waste management
- Appropriate handling of linen.

### **Personal Protective Equipment**

Personal protective equipment is readily available and accessible. The type of protective equipment required depends on the nature of the interaction with the client. Gloves should always be available for use when handling laundry and supporting a person with personal hygiene needs.

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## MEDICATION MANAGEMENT

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### POLICY

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National Premier Disability Services has processes in place to ensure that only appropriately skilled and qualified staff are involved in the administration, storage, and disposal of medications. Only staff who are trained to administer medications are allowed to administer medications. All other staff are only able to provide assistance to clients to self-administer their own medications.

### Definitions

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- Oral Medications – those medications taken by mouth (orally), e.g. tablets, capsules, pills, lozenges, syrups.
- Topical External Medications – those medications that are applied to the body, eg creams, ointments and lotions.
- Inhalant Medications – those medications that are inhaled into the body via the nose or mouth. They come in aerosols or nebulisers.
- Inserted Medications – those medications that are introduced into the body either per rectum or per vagina, eg suppositories, enemas, pessaries.
- Injectable Medications – those that are introduced in the body with a needle and syringe.
- PRN Medication – medication that is administered 'as required'.
- Dose administration aid (eg Dosette box or Webster pack) – a dose administration container that divides medication such as tablets and capsules into prescribed doses to be taken at specific times during the day and week.

Staff may only administer medications within their scope of practice. This will be agreed at recruitment with the following guidelines in place:

1. No staff member will administer medications without prior training in medication management.
2. The following routes of administration will require additional training:
  - a. Inserted Medications
  - b. Injectable Medications

### PROCEDURE

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Medication must be appropriately labelled in a -.

- Webster pack or;
- A **dosette box or original packet**, which is clearly labelled with the person's name, current medication dosage and frequency information. (Staff are not allowed to fill dosette boxes, **only assist in the administration of the medication**.)

- Liquid Medication is in its original container, which is clearly labelled with the person's name and current dosage and frequency information. An appropriate measuring device must also be provided eg a measuring cup or dropper.
- Medication as required or PRN medication eg Ventolin, Panadol, Valium is presented in its original container or dose administration aid, which is clearly labelled with the person's name.
- All creams and lotions are clearly labelled with the person's name and application instructions.

If the Medication administration forms are not presented, or medication is not supplied in accordance with this policy, then the staff member will not be permitted to support the person to take their medication.

All administration of medication must be recorded on the Medication form to ensure that National Premier Disability Services is accountable for the medication given by its staff. All medication will be kept in a locked, secure place at all times.

Staff will be provided with relevant medication training to ensure that medication is administered correctly and efficiently.

When staff are supporting people to administer their medication, the issue of consent needs to be considered. Staff must only do what is necessary and reasonable, they must not force the person and must only act in the persons' best interest.

Staff should note that consent is not required where:

- Basic first aid is needed
- An emergency exists so consent cannot be obtained at this time. It is necessary to act immediately to save the life of a participant or to prevent serious injury from occurring.

## **ADMINISTERING MEDICATION**

When medication is to be administered, staff will follow a set procedure and only staff who have completed the required training may administer medication. For all instances when there is only one staff member they will perform a double check i.e. go through the checklist.

- **Right Person**
- **Right Day**
- **Right Time**
- **Right Dosage (where medications are in original containers)**
- **Right Route**

If the medication is given orally, the staff member administering the medication must remain with the client until they are satisfied that the dose has been swallowed.

If a client spits out or vomits up the medication, staff will not re-administer the medication. Staff will contact Service manager to seek further instruction.

Staff are required to sign the medication forms following administration of the medication. Where possible a second staff member will witness the medication being administered. 'White Out' must not be used on the medication administration sheets at any time. If staff make a mistake, it should be crossed out and the correct entry made next to it with staff initials.

Staff must immediately report any unusual changes in the persons physical condition and/or behaviour to Service manager. They will instruct staff on the next action eg call Poisons Information, parents etc.



## MEDICATION ERRORS

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A medication error is when one of the five 'Rights' has not been adhered to. For example, when a medication is missed, when medication is given to the wrong person or a person is suspected of self-administering medication that they shouldn't have.

If a medication error occurs, then staff should follow the procedure of:

1. Staff should immediately contact the Poisons Information Line on 131126 and then follow their instructions.
2. The staff member will contact the Service manager to notify the outcome and follow their instructions.
3. An Incident Report will be completed as soon as possible. The report should be forwarded to the Service manager by the next working day.

## PRN MEDICATION ADMINISTRATION

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1. Staff should ensure all PRN Medication is prescribed by a medical practitioner.
2. Staff are only to administer PRN medication after consulting with <**appropriate manager**> to enable approval and meet reporting requirements.
3. Staff must document that PRN medication has been administered.

## REFUSAL TO TAKE MEDICATION

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Where it is documented that the person usually rejects medication when it is first offered but agrees to take medication on subsequent attempts to administer it, staff may persist with trying to administer the medication.

However, if a person is clearly refusing medication and not displaying a usual pattern of behaviour then staff should follow the procedure below.

1. If a person refuses prescribed medication, the staff member should attempt to find out from the person why they do not wish to take the medication, if this is possible.
2. The staff member should explain to the person the reasons for taking medication as well as the implications of not taking it.
3. If the person refuses medication, staff must not force the person to take the medication. The Service manager must be notified, and they will decide on any further action.
4. The staff member responsible for administering the medication must record the persons refusal on the medication sheet in the appropriate date/time slot and sign their initials.
5. Staff must observe the person for any changes in behaviour or well-being and report these to Service manager, who will decide on any further action.
6. Staff must complete an Incident Report.

## REFERENCES

Drugs and Poisons Act

## CULTURAL AND LINGUISTIC DIVERSITY

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### POLICY

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National Premier Disability Services has process in place to ensure safe and appropriate services are delivered to people from a variety of cultural and linguistically diverse backgrounds.

We will ensure we provide culturally competent services which respect a person's culturally and linguistically diverse identity.

We will ensure we maintain appropriate community linkages, including formal and informal collaborations to meet the cultural, spiritual and language needs of people using our services.

We will ensure interpreters are readily available for people requiring them.

We will support people with cultural and linguistically diverse backgrounds to maintain their cultural identity and connection to community.

### PROCEDURE

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- Use translation services to provide essential written material in the appropriate languages if necessary
- Use interpreters (formal or informal) to assist with verbal communication at meetings or during phone calls, etc.
- Respect and adhere to specific cultural needs. For example: dietary restrictions related to religion or culture
- Regard the ability to speak a second language as a positive attribute where all other staff recruitment and selection criteria are met
- Promote a culture of awareness of, and respect for diversity, across National Premier Disability Services and specific awareness in relation to supporting the cultural or diversity needs of individual participants
- Provide staff and volunteers with cross cultural awareness training. This will occur as appropriate and required
- Collaborate with, and refer to, other organisations to meet the needs of culturally and linguistically diverse groups

### INTERPRETER CONTACTS

***Interpreting and Translation Services (ITS)***

***<http://client.vits.com.au>***

***Telephone: (03) 9280 1955 (24 hrs seven days a week)***

***By email: [interpreting.bookings@vits.com.au](mailto:interpreting.bookings@vits.com.au)***

## SUPPORTING ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE

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### POLICY

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National Premier Disability Services recognises that services must involve a holistic culturally competent approach and includes links with other agencies to ensure the context of care and service delivery are appropriate.

### PROCEDURE

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National Premier Disability Services will provide culturally competent services which respect each person's Aboriginal and Torres Strait Islander cultural identity. We will strive to maintain formal and informal community linkages and collaborate with Aboriginal services to meet the cultural needs of Aboriginal and Torres Strait Islander people.

We will ensure that each service delivery site and central office site uses resources and symbols which are responsive to people's needs, cultural or Aboriginal and Torres Strait Islander background, disability, age or developmental stage.

We encourage the employment of Aboriginal and Torres Strait Islander people.

Staff will be provided with appropriate training to ensure they have an understanding of the cultural competence framework.

We will seek, when possible, to work in a collaborate manner with other organisations to provide quality care and service to Aboriginal and Torres Strait Islander people.

### REFERENCES

Aboriginal Cultural Competence Framework (DHS 2008)

<b>Policy Code</b>	<b>G001.01</b>
<b>Person Responsible</b>	<b>Director</b>
<b>Status (Draft/Released)</b>	<b>Released</b>
<b>Date Last Updated</b>	<b>5 October 2018</b>

## NDIS CONFLICT OF INTEREST POLICY AND PROCEDURE

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### PURPOSE

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This policy outlines the process National Premier Disability Services must take in managing any perceived or actual conflicts of interest in relation to the contracting and delivery of supports to participants of the National Disability Insurance Scheme (NDIS).

National Premier Disability Services is committed to ensuring that any potential conflicts of interest are identified and managed in a manner that ensures participants retain choice and self-determination in relation to the use of their funding and the integrity of the organisation is protected.

The NDIA Terms of Business have clarified that registered providers must not constrain, influence or direct decision making by a person with a disability and/or their family so as to limit that person's access to information, opportunities and choice and control.

This policy and procedure apply to the all National Premier Disability Services NDIS services.

### DEFINITIONS

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**Conflict of Interest:** A conflict of interest may occur in the situation where National Premier Disability Services as a registered provider enters into a Service Agreement with a participant to deliver Plan Management, or Coordination of Supports and other funded supports included in a participant's plan.

### POLICY

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Conflict can occur between the organisation's interest and the participant's interest. For example, a conflict of interest exists when an organisation is in a position to benefit by both managing a participant's plan and providing Support Coordination and other types of supports to a participant, when it may not be in the participant's best interests to receive both from the same provider.

A conflict of interest can occur when National Premier Disability Services, through their Plan Management or Support Coordination (where provided), refers the participant to another service offered by National Premier Disability Services when there are alternative organisations that provide the same type of service, and which may better meet the needs of the participant. In some locations there may be limited service options available, but the participant has a right to know what options are available to them.

In these circumstances, it is incumbent on National Premier Disability Services to ensure participants are provided with transparent information and advice about the full range of options available to them, so they can exercise informed choice. There may also be occasions when a participant exercises their choice to receive both types of supports from the same organisation because they prefer to deal with a single provider or have an on-going trusting relationship with that provider. Once the participant makes an informed choice and the NDIA has been consulted where necessary, the conflict of interest will have been appropriately dealt with.

## PROCEDURE

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### Managing Conflicts of Interest

When a potential conflict of interest has been identified, and before a service quote or Service Agreement is developed, National Premier Disability Services must:

- Advise the participant of the potential for a conflict of interest and explain how this can occur
- Advise the participant of alternative options for receiving Plan Management, Coordination of Supports or other supports from different providers
- All advice and information provided to a participant about support options (including those not directly delivered by National Premier Disability Services) will be transparent and promote choice and control
- Ensure the participant understands the potential conflict of interest by asking them to explain in their own words their understanding of what it means (this ensures informed consent)
- Obtain the participant's consent to proceed with the service quote or Service Agreement by drawing to their attention the consent clause contained in the Service Agreement with National Premier Disability Services and the participant
- It may be appropriate for the Director to contact the NDIA for advice before proceeding.
- National Premier Disability Services will manage conflicts of interest as they arise in line with NDIS Operational Guidelines or pricing arrangements and guidelines.

Further:

- Staff providing Plan Management or Support Coordination will not have any role in the coordination of delivery of direct services for the participants they are supporting
- Where National Premier Disability Services operates as a financial intermediary, systems will be in place to ensure funds that are allocated to participants remain independent of funds used for other organisational purposes and will only be used for the purposes intended. Clear guidelines will be in place regarding the allocation of NDIS funds, the independence of funds and the process of managing a participant's funds as stipulated in the participant's plan.
- National Premier Disability Services staff or volunteers will not accept any offer of money, gifts, services or benefits that would cause them to act in a manner contrary to the interests of the participant.
- National Premier Disability Services or its staff or volunteers will have no financial or other personal interest that could directly or indirectly influence or compromise the choice of provider or provision of supports to a participant. This includes the obtaining or offering of any form of commission.

### Recording a Conflict of Interest

All identified conflicts of interest are to be reported to the Director who will record them in the Conflicts of Interest Register.

The Conflicts of Interest Register will document:

- The participant's name;
- The participants NDIS number;
- The nature of the conflict of interest; and
- A summary of how the conflict was managed, including any advice from the NDIA

The Register will be routinely reviewed.

<b>Policy Code</b>	<b>NDISP002.01</b>
<b>Person Responsible</b>	<b>Director</b>
<b>Status (Draft/Released)</b>	<b>Released</b>
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## **NDIS CANCELLATION POLICY AND PROCEDURE**

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### **PURPOSE**

This policy provides a framework for National Premier Disability Services processes and obligations, should a client's parent/guardian request a cancellation of services.

This policy and procedure applies to the Director, staff, students, contractors and volunteers and all potential and existing clients, their family members and other supporters.

### **DEFINITIONS**

**Cancellation** - Refers to an individual notifying National Premier Disability Services, in advance, that scheduled hours of service are not required or unable to be received. There are two categories of cancellation:

- Short notice – where less than a minimum of 24 hours' notice is provided.
- Reasonable Notice – where 24 hours or greater notice is provided.

**No Show** – Refers to an individual not attending or being unavailable without notice for a booked/scheduled service, or where the individual is not at the agreed location at the agreed time for the service.

### **POLICY**

- National Premier Disability Services is committed to transparent processes by which services can be cancelled.
- This policy complies with NDIA and NDIS Policy on the management of cancellation of services by a customer.

## PROCEDURE

- The cancellation of a National Premier Disability Services by the client, or failure to attend a scheduled service without notice (No Show), may result in the client being charged the full applicable fee for the booked service and where appropriate, funding may be claimed.
- Individual NDIS Service Agreements, booking request and/or other confirmation documentation provided to clients/parents/guardians will outline requirements for service cancellation notification.
- Where the client attends for only part of the scheduled service, without notice, payment for the entirety of the booked service may be charged.
- Where the client fails without notice to attend for the planned service, National Premier Disability Services will make every effort to contact the client and/or Carer/guardian to confirm the planned attendance.
- Where notice is given with less than 24 hours (short notice), National Premier Disability Services will try where possible to offer and book the scheduled service to an alternative client.
- Where the service cannot be offered to an alternative client, the hours of service may be forfeited by the original client and National Premier Disability Services will be paid as per the scheduled fee as if the service had occurred.
- More than 8 instances of cancellations or no shows in a continuous 12-month period will be notified to the funding Agency, to enable consideration of review of the client's plan.
- For instances where National Premier Disability Services initiates the cancellation of a service due to operational reasons, the service will be rescheduled at no penalty to either party.
- Should either party wish to end this Service Agreement they must give one month's notice. If either party seriously breaches this Service Agreement the requirement of notice will be waived.
- All new Service Agreements between clients and National Premier Disability Services will include details of advice periods for cancellations and possible forfeit of the booked service.

### Notice Period before Scheduled Service Action Fee

- Where Reasonable Notice is provided, there will be no penalty and National Premier Disability Services will reschedule the service with the client.
- Where the client provides Short Notice, the client forfeits the service if it cannot be offered and booked to another client and National Premier Disability Services is paid as if the Service occurred. As per scheduled service fee.
- Where the client provides No Notice (No Show) the client forfeits the service and National Premier Disability Services is paid as if the Service occurred. As per scheduled service fee.

<b>Policy Code</b>	<b>NDISP002.01</b>
<b>Person Responsible</b>	<b>Director</b>
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