

# **WELLINGTON MULTI SERVICE CENTRE INC.**

## **Policy Manual**

# Contents

## Overview

Introduction and Background

Aged Care Quality Standards

NDIS Practice Standards

## Service Management

Constitution..... 6

Vision/Mission.....11

Community Understand and Engagement..... 12

Continuous Improvement.....13

Emergency Management.....14

Risk Management.....18

Fees policy.....20

Financial Hardship.....22

Financial Management.....24

Governance & Regulatory compliance.....27

Donations, Gift, Benefits and Bequest Policy.....29

Open Disclosure Policy.....32

Physical Resource.....33

Records/documents Control.....43

Work Health & Safety.....45

Food Safety.....48

Conflict of Interest.....51

Motor Vehicle Use .....53

## **Service Delivery**

Meals on Wheels.....	56
Social Support Service.....	57
Respite Service.....	58
NDIS Service.....	59
Accessing Services Policy.....	61
Client Centre Approach.....	65
Abuse.....	67
Advocacy.....	74
Support Planning Policy.....	75
Carers Policy.....	77
Community Engagement.....	78
Consumer Rights.....	79
Consumer Dignity, Autonomy and Choice.....	82
Delivering Lifestyle Services and supports.....	84
Exit Policy.....	85
Feedback & Complaints.....	86
Assessment & Reassessment.....	90
Client Non-response.....	92
Privacy and confidentiality.....	93
Wellness and Reablement.....	95
Medication Management.....	96
Infectious & Waste Control.....	103

## **Human Resources**

Code of Behaviour.....	110
Community Service Leave policy.....	112
Police & Working With Children Check Policy.....	113

Safe Home Visiting.....	115
Social Media Policy.....	117
Staff Employment.....	118
Timesheet Policy.....	123
Dismissal Policy.....	124
Staff Grievance Policy.....	126
Bulling & Harassment.....	128
Volunteer Policy.....	130
Managing Clients with Challenging Behaviours Policy.....	131

## **Legislation and Guidelines.....133**

## **Appendix (forms).....135**

# Overview

## Introduction and Background

Wellington Multi Service Centre Inc., provides Commonwealth Home Support services in the townships of Wellington and the surrounding local government area. This organisation is funded to provide:

Meals,        Respite,    Social Support

The Commonwealth Home Support Program is funded by the Australian Government Department of Health (DOH). Wellington Multi Service Centre Inc is a NDIS Registered Service providing disability services in the townships of Wellington and the surrounding local government area. Disability services provided include:

- Assist- Personal Activities
- Participate Community
- Assist- Travel/Transport
- Household Tasks

## Aged Care Quality Standards

The Aged Care Quality Standards underpins service delivery for all Commonwealth Home Support Program services and provides a guide for effective service delivery. This Policy Manual is formed around The Aged Care Quality Standards (replacing the Home Care Standards below)

Quality Aged Care Standards
Standard 1: Consumer dignity and Choice
Standard 2: Ongoing assessment and planning with participants
Standard 3: Personal care and clinical care *
<i>Only required where services are funded for personal care/clinical care</i>
Standard 4: Services and supports for daily living*
<i>Includes food services, domestic assistance, home maintenance, transport, recreational and social activities</i>
Standard 5: Organisation's service environment *
<i>Refers to the physical environment through which care and services are delivered, including aged care homes, cottage style respite and day centres. This does not include a person's privately owned/occupied home through which in-home services are provided</i>
Standard 6: Feedback and Complaints
Standard 7: Human Resources
Standard 8: Organisational governance

## NDIS Practice Standards

There are four Practice Standards that apply to disability service providers.

1. **Rights & Responsibilities:** - The rights of participants and the responsibilities of the provider that deliver supports and services to them
2. **Governance & Operational Management** - Sets out the governance and operational management responsibilities
3. **Provisions of Supports:** The responsibilities for NDIS providers when providing supports to participants
4. **Supports Provisions Environment:** The environment in which supports are to provide to participant.

# Service Management

## Constitution

*Aged Care Quality Standard 8 - Organisational Governance*

*NDIS Practice Standard 2- Governance & Operational Management*

### **CONSTITUTION AND RULES OF WELLINGTON MULTI SERVICE CENTRE INC.**

#### **1. NAME**

The name of the Association shall be "Wellington Multi Service Centre Incorporated".

#### **2. OBJECTS**

The objects of the Association shall be to maintain frail aged and young people with disabilities, who are at risk of premature or inappropriate institutionalisation, in their own homes by providing Meals on Wheels, Social Support and Respite Services.

#### **3. MEMBERSHIP**

- a) Membership is open to all individuals and organisation who accept the objects and rules of the Association.
- b) Individuals and organisation wishing to become members of the Association shall apply to the Board for membership.
- c) Members shall pay such fees as determined by the Board.
- d) (i) The Public Officer of the Association shall established and maintain a register of members of the Association specifying the name and address of each person who is a member of the Association together the date on which the person become a member.  
(ii) The register of members shall be kept at the principal place of administration of the Association and shall be open for inspection, free of charge, by any member of the Association at any reasonable hour.
- e) Members shall cease upon resignation, death, expulsion, or failure to pay outstanding membership fees within three (3) months of the due date.
- f) Membership renewals shall fall due on the day of the Annual General Meeting of the Association. The financial year of the Association shall run from 1 July to 30 June.

#### **4. MEMBERS LIABILITY**

The members of the Association shall have no liability to contribute towards the payment of debts and liabilities of the Association or the cost, changes and expenses of the winding up of the Association except to the amount of any unpaid membership fees.

#### **5. DISCIPLINING OF MEMBERS**

The procedures for disciplining members shall be determined by the Board. Any member who wishes to appeal against a decision expelling them from membership or otherwise disciplining them) may do so at the next general meeting of the Association.

#### **6. MANAGEMENT - BY THE BOARD**

- a) The Association shall have it affairs controlled and managed by the office bearers and other members known ad the Board.
- b) (i) The Board is to consist of up to nine (9) members.

- (ii) The members of the Board are to be elected at each Annual General Meeting. Any casual vacancy occurring in the Board may be filled by a member appointed by the Board.
- c) The Office Bearers of the Association shall be the President, Vic President, Secretary and Treasurer and shall be elected by the Board.
- d) Each member of the Board shall hold office from the date of their election or appointment until the next Annual General Meeting. The President shall hold office for a period not exceeding three (3) years but shall be eligible for re-election after a lapse of one year.
- e) Retiring Board members are eligible for re-election.
- f) The Board shall meet as often as necessary to conduct the business of the Association and not less than quarterly.
- g) The Quorum for meeting of the Board shall be 50% + 1 (one) Board members.
- h) Notice of the Board meetings shall be given at the previous Board meeting or by such other means as the Board may decide upon.
- i) A member of the Board shall cease to hold office upon resignation in Writing; death; removal as a member of the Association; or absence from three successive Board meetings without approval by the Board.
- j) The Board may function validly provided its number is not reduced below the Quorum.
- k) Questions arising at any meeting of the Board shall be decided by the majority of votes of those present.
- l) In case of any equality of votes the person appointed to chair the meeting shall have a second or casting vote.

## **7. GENERAL MEETINGS**

- a) An Annual General Meeting of the Association shall be held each year within 3 months from the end of the financial year of the Association.
- b) The Board may, whenever it thinks fit, convene a special General Meeting of the Association. A special General Meeting must be convened by the Board within 3 months of receiving a written request to do so from the President or from at least five members setting out the specific business for the special meeting.
- c) At least 7 days notice of all General Meetings shall be given to all members. In the case of a General Meeting where a special resolution is to be proposed, notice of the meeting shall be given to members at least 7 days before the meeting.
- d) No business other than specified in the notice convening a General Meeting shall be transacted at the meeting. In the case of the Annual General Meeting the following business shall be transacted whether specified or not:
  - i) confirmation of the minutes of the last Annual General Meeting and any recent special General Meeting;
  - ii) receipt of the Board's report upon the activities of the Association in the last financial year;
  - iii) election of members of the Board;
  - iv) receipt and consideration of the statement which is required to be submitted to members by section 26(6) of the Associations Incorporation Act.

- b) Appointment of an Auditor. The Auditor shall examine all accounts, vouchers, receipts, books, etc and furnish a report to the members two (2) months after the financial year and no later than three (3) weeks prior to the Annual General Meeting.
- e) The quorum for General Meetings shall be 50% +1 (one).
- f) Voting at General Meetings shall be by a show of hands unless a secret ballot is demanded. Decisions shall be made by a simple majority vote except for those matters which must be decided by special resolution where a  $\frac{3}{4}$  majority is required.
- g) All votes shall be given personally.
- h) In the case of the equality of the votes the person appointed to chair the general meeting shall have a second or casting vote.
- i) The Board may delegate to one or more sub-committees.
- j) A member of the Board shall not be appointed to any paid position. The members shall be reimbursed for any out-of-pocket expenses and ratified at the general meeting.
- k) Any member must disclose any direct or indirect interests in any contract or proposed contract with the Association. This is to be documented in the minutes of that Meeting.
- l) Nominations of candidates for election as office bearers or other Board members may be made at the Annual General Meeting or in such other ways as maybe determined by the Association at General Meeting.

## **8. OFFICE BEARERS**

- a) The President or in the Present's absence, the Vice President, shall act as Chairperson at each general meeting and Board meeting of the Association.
- b) If the President and Vice President are absent from a meeting or unwilling to act, the members present at the meeting shall elect one for the member to act as chairperson.
- c) The Secretary shall keep records or the business of the Association including rules, minutes of all general and Board meeting and a files of correspondence.
- d) The Treasurer shall ensure that all money due to the Association is collected and received and that all payments authorised by the Association are made. All cheques and other negotiable instruments shall be signed by any two (2) authorise to do so by the Board.
- e) The Treasurer shall ensure that correct books and accounts are kept showing the financial affairs of the Association. These records shall be available for inspection by any member and shall be held at the principal administration places of incorporation.
- f) If the Board members are unable to occupy all Executive positions, dual positions are allowed.

## **9. SPECIAL RESOLUTIONS**

- a) A special resolution must be passed by a General Meeting of the Association to effect the following changes:-
  - i) a change of Association name;
  - ii) a change of the Association's rules;
  - iii) a change of the Association's objects;
  - iv) an amalgamation with another incorporated Association;
  - v) to voluntarily wind up the Association and distribute its property;
  - vi) to apply for its registration as a Company



b) A special resolution shall be passed in the following manner:

- i) a notice must be sent to all member advising that a general meeting is to be held to consider a special resolution;
- ii) the notice must give details of the proposed special resolution and give at least seven(7) days notice of the meeting;
- iii) a quorum must be present at the meeting;
- iv) at least  $\frac{3}{4}$  of those present in person must vote in favour of the resolution;
- v) in situations where is not possible or practicable for resolution to be passed as described above, are request may be made to the Office of Fair Trading for permission to pass the resolution in some other way.

#### **10. PUBLIC OFFICER**

- a) The Board shall ensure that a person in appointed as Public Officer.
- b) The first Public Officer shall be the person who completed the application for incorporation for the Association.
- c) The Board may at any time remove the Public Officer and appoint a new Public Officer provided the person appointed is 18 year of age or older and a resident of New South Wales.
- d) The Public Officer shall be deemed to have vacated his/her position in the circumstance such as death; resignation; removal by the Board or a general meeting; bankruptcy or financial insolvency; inappropriate behaviour; residency outside New South Wales.
- e) When a vacancy occurs in the position of Public Office the Board shall within fourteen (14) days notify the Office of Fair Trading by the prescribed form and appoint a new Public Officer.
- f) The Public Officer may be an office bearer, Board member, or any other person regarded as suitable for the position by the Board.

#### **11. MISCELLANEOUS**

- a) The Association shall effect and maintain insurance as required under the Associations Incorporation Act together with any other insurance which may be required by law or regards as necessary by the Association.
- b) The funds of the Association shall be derived from the fees of members, donation, grants and other sources approved by the Association.
- c) The Common Seal of the Association shall be kept in the custody of the Public Office outside the principal place of administration of the Association. The Common Seal shall only be affixed to a document with the approval of the Board. The stamping of the Common Seal shall be witnessed by the signatures either of two (2) member of the Board or of one member and the Board and the Service Manager.

d) The Association may at any time pass a special resolution determining how any surplus property is to be distributed in the event that the Association should be wound up.

**12. RESOLUTION OF INTERNAL DISPUTES**

a) Disputes between member (in their capacity as members) of the association, and disputes between member and the association, are to be referred to a community justice centre for mediation in accordance with the *Community Justice Centres Act 1983*.

b) At least seven (7) days before a mediation session is to commence, the parties are to exchange statements of the issues that are in dispute between them and supply copies to the mediator.

Reviewed & Updated:

# Vision/Mission/ Philosophy

*Aged Care Quality Standards 8 – Organisational Governance*

*NDIS Practice Standard 2- Governance & Operational Management*

## **Statement of Purpose**

The purpose of Wellington Multi-Service Centre Inc is to maintain frail aged and young people with disabilities, who are at risk of premature or inappropriate institutionalisation, in their own homes.

## **Philosophy**

Wellington Multi-Service Centre Inc believes in:

- ❖ The right of people to make choices in their own lives.
- ❖ The right of people to dignity, respect, privacy and confidentiality
- ❖ The right of people to be valued as individuals.
- ❖ The right of people to access services on a non-discriminatory basis.
- ❖ The right of the community to accountable and responsive service.

## **Outcomes**

The outcomes pursued by Wellington Multi-Service Centre Inc are:

- ❖ That people who are frail aged or disabled can remain in their own home.
- ❖ That family or other primary caregivers are supported in their role.
- ❖ That the agency operates in an effective, efficient and accountable manner.
- ❖ Continuously improve to meet the NDIS Practice Standards and Aged Care Quality Standards

## **Target Groups**

People who are frail aged, or young people with disabilities who are at risk of premature or inappropriate institutionalisation, and their carers.

Reviewed & Updated:

## Community understanding and engagement

*Aged Care Quality Standard 1- Consumer Dignity and Choice; 2 - Ongoing Assessment and Planning; 8 - Organisational Governance*

*NDIS Practice Standard 3- Provision of Support*

### **Policy Statement**

Wellington Multi Service Centre Inc. will ensure that it engages with the community and that this is reflected in service planning and development.

### **Policy**

Wellington Multi Service Centre Inc. will undertake the following processes which support community understanding and engagement:

- Monitor the profile of the community
- Continue to adapt the service to meet the needs of those with special needs as identified under the Aged Care Act 1997 including:
  - people who identify as Aboriginal and Torres Strait Islander
  - people from culturally and linguistically diverse backgrounds
  - people who live in rural and remote areas
  - people who are financially or socially disadvantaged
  - people who are veterans of the Australian Defence Force or an allied defence force including the spouse, widow or widower of a veteran
  - people who are homeless, or at risk of becoming homeless
  - people who are Gender or Sexually Diverse
  - people who are Care Leavers (which includes Forgotten Australians, Former Child Migrants and Stolen Generations)
  - parents separated from children by forced adoption or removal.

*(Note: this list is not exhaustive, and the Department of Health acknowledges other groups such as people with disability, those with mental health problems or mental illness and people living with cognitive impairment and dementia).*

While not a separate special needs group under the legislation, all Home Care providers should also have policies and practices that address the provision of care for people with dementia.

- Continue to monitor the funding agreement and contractual obligations and notify the department where there may be barriers to services
- Engage participants, and the community, in Annual Planning and service development where possible
- Survey of the community to determine specific needs
- Staff attending interagency and network meetings in the community where possible
- Survey participants on an annual basis.

Wellington Multi Service Centre Inc. will engage in community events, expos and information days where possible to ensure the community is aware of the service available. It will have a presence in the community and will continue to promote and market the service appropriately to ensure access for all.

Reviewed & updated

# Continuous Improvement

*Aged Care Quality Standards 7 - Human Resources; 8 - Organisational Governance*

*NDIS Practice Standard 2- Governance & Operational Management; 3 –Provision of Support*

## **Policy Statement**

Wellington Multi Service Centre Inc. will actively pursue and demonstrate continuous improvement in all aspects of service management and delivery.

Information attained from consumer feedback and complaints will be linked to the Continuous Improvement Plan. Any feedback or complaints or items identified in staff and management committee meetings will be listed on the Continuous Improvement Register and an improvement plan developed.

## **Policy**

Wellington Multi Service Centre Inc. will strive for ongoing improvement in some of the following ways:

- Ongoing consultation with community, staff, participants and volunteers
- Encouraging ongoing feedback from the community, participants, staff and volunteers
- Maintain a Feedback Register
- Maintain a Continuous Improvement Plan and a standing agenda item at bi monthly Management Committee meetings and will
- Regularly discuss areas for improvement and set goals which are achievable at the Annual Planning day
- Carryout regular internal audits to ensure that our service is meeting the Aged Care Quality Standards and the NDIS Practice Standards and Quality Indicators
- When carrying out internal audit, registers are checked for information to be transferred to Continuous Improvement Plan and action taken and reviewed at bi monthly committee meeting or by Executive if the matter is serious
- Maintain registers of complaints, WHS incidents or accidents and areas for improvement.

As well as the above, Wellington Multi Service Centre Inc. will maintain records of achievements, awards, audits and other positive activities undertaken by the service. It will actively engage in Quality Review audits, Food Audits and other audits as necessary and in line with regulatory requirement to ensure improvement is a focus.

\*See Continuous Improvement Register (Appendix)

Reviewed & updated

# Emergency Management

*Aged Care Quality Standard 1- Consumer dignity and choice; 2 Ongoing Assessment and Planning; 8 - Organisational Governance*

*NDIS Practice Standard 2- Governance & Operational Management; Standard 6 – Service Management*

## **Policy Statement**

Wellington Multi Service Centre Inc. will have plans in place to manage the risks associated with a range of emergency or disaster events that may impact the delivery of care and the safety of their participants in the local government area including, but not limited to:

- Extreme weather events such as storms or floods
- Bushfires or major urban fires
- Accidents, toxic spills, or structural collapse leading to road closure or reduced access to local facilities.
- Catastrophic power failure lasting several days
- Pandemics
- Major Bio-hazard events
- Death

## **Policy**

Wellington Multi Service Centre Inc. will work with the Local Emergency Services to identify the local risk for our participants for Disasters and follow Local Disaster Emergency Risk Management Plan for continuity of service delivery in each of the service areas.

Wellington Multi Service Centre Inc. will work with this group and communication before, during and after an emergency event, to ensure that staff is able to:

- Maintain up to date information on the emergency warnings and directives to evacuate
- Identify and forward information about who may need assistance
- Identify and confirm emergency supports that are available, to be able to provide accurate information to participants

Wellington Multi Service Centre Inc., will at the time of assessment ask consumer if they have an **Individual Emergency Plan**. If participants do not have an Emergency Plan, our staff will suggest that participants should discuss this with their family and put one together. Individual Emergency Plans can include:

- Continuity of care in the event of an emergency event
- Challenges for evacuation, including transport
- Maintaining contact with vulnerable consumers before, during and after the emergency event, including loss of phone or mobile contact
- Loss of power leading to difficulties for consumers, staff and service delivery
- Loss of electronic information and data, including contact information
- Consent from the consumer to be placed on a register that will be available for emergency services personnel to be used should an emergency event occur.

Staff and volunteers are instructed to contact the appropriate emergency service e.g. fire brigade, ambulance or police, if necessary, in the event of an emergency. It is imperative that the consumer's carer or emergency contact is notified of the occurrence, should it involve a consumer, as soon as possible. An **Accident, Incident and Hazard Report** form should be completed, the staff's supervisor

notified. Remember to remain calm in the event of an emergency and reassure all other participants and volunteers that the situation is under control.

### **Emergency Evacuation Procedures**

Each Wellington Multi Service Centre Inc. site or facility will have a *Fire Control Plan* prominently displayed, which outlines the procedures to be taken in the event of a fire or other incident requiring evacuation.

Fire Control Plans are developed in consultation with the local Fire Services personnel.

Fire Drills are carried out at least annually to ensure staff are familiar with the evacuation procedures. This is also an opportunity for participants with mobility issues to participate and identify their needs in the event of an evacuation.

### **Out of Town Staff**

Wellington Multi Service Centre is aware that some of their staff live out of town and may become stranded in the case of flooding of the Bell and/or Macquarie Rivers. Staff will access alternate route to get to work. If unable to do so because of flooding over roads, fire or dangerous hazards, staff are to contact the Manager

### **Contingencies Plans**

Wellington Multi Service Centre has contingencies plans in place to support our participants, carers; volunteers and staff during:

#### Death

The process for responding and reporting a death of a participant, carer, volunteer or staff member. Respond with sensitive, observe any cultural or religious beliefs and do the following:

- Call 000
- Notify the Manager
- Wait until ambulance /police and manger arrives
- Manager will assist Police with enquiries.
- An incident report must be completed by the person involved as soon as practical after the incident
- A death is a critical event and debriefing with the manager will be available
- Bereavement support/counselling may be provided for those experiencing grief following the death

#### Personal Accidents

Identify Emergency; Make persons comfortable, without moving them; call "000"; report incident to Manager within 24 hours; complete accident report form as soon as possible,

#### For Fire/Bomb Threat/Explosions

Identify Emergency; Dial "000"; Follow the "Fire Drill" procedures (displayed near doorway in every room)

#### Food Recall

Identify problem - inform supplier or supplier informs Wellington Multi Service Centre

Remove the food from the freezer and pack in bags, labelled clearly: "RECALLED FOOD – DO NOT OPEN"; Food is then stored in a separate freezer until food can be returned to supplier;

Recalled stock is to be replaced as soon as possible, with the least inconvenience to clients orders.

#### Food Breakage or Spillage during Delivery

Wellington Multi Service Centre will cover the cost and replacement of the meal if breakage or spillage occurs at fault of the staff and or volunteer (from vehicle to clients home).

If breakage or spillage occurs during packing or deliver from the supplier to Wellington Multi Service Centre, the supplier is to be notified and negotiate for replacement meals or account adjustment; Cost of the replacement of meals will be negotiated with supplier.

#### Power Outages

In times of long power outages Wellington Multi Service Centre will sources generator to power freezers for the duration of outage through the Dubbo Regional Council or local businesses. Phones will be diverted to staff mobile phone and staff will work from home or another available venue not affected by the outage.

#### Pandemics

Through these events Wellington Multi Service Centre is classed as an **essential service** and will continue to provide service to our clientele even though the way services are delivered may change. Provide clients, carers and volunteers with information about the virus from government services and funding body. Encouraged clients, carers and volunteers to protect themselves the best way they can.

Some changes to the services we delivery maybe (but not limited to):

#### *Meals on Wheels Service*

- Change service provision to minimise contact without stopping services by reducing the number of meals delivering runs by combining run; leaving meals at door, ring doorbell and step back to a safe distance (1.5 metres) but making sure clients come out and gets meals.
- Reduce the number of volunteers out with clients to reduce spread of virus and to protect both our clients and volunteers – use available careworkers (which will help keep them employed)
- Contact meal suppliers and establish continued meal delivery and look at other options if supplier is unable to maintain delivery. For example staff member pickup meals from supplier or use other delivery services or methods.
- Be aware and look at other potential suppliers, if meal supplier (Bathurst MOW) unable to provide enough meals due to limited stock, reduction is their availability to get supplies or staff availability. Look at and talk to hospital, aged care facility or gaol to supply meals for a period of time untill limitations improve .
- Opening service up to other community members who are not normally our clientele by are at risk due to age or disability or no family support to help them.
- WMSC will follow up with wellbeing check to carers and clients and offer other supports such as shopping, telephone buddies from volunteers or careworkers
- In these times, think outside of the box and get creative

#### *Social Support Service*

- Change service provision to minimise contact without stopping services for example shopping, instead of client accompany volunteer- young volunteer or careworker do list shopping for clients and leaving shopping at door and step back to a safe distance (1.5 metres) but making sure clients come out and get shopping.
- Reduce the number of volunteers out with clients to reduce spread of virus and to protect both our clients and volunteers – use available careworkers (which will help keep them employed)
- Opening service up to other community members who are not normally our clientele by are at risk due to age or disability or no family support to help them.



- WMSC will follow up with wellbeing check to carers and clients if service are suspended and offer other supports such as shopping, telephone buddies from careworkers or other carer support group members
- In these times, think outside of the box and get creative.

#### *Respite Service*

- WMSC will following the decision taken by the Carer whether to continue or suspend service
- WMSC will follow up with wellbeing check to carers and clients if service are suspended and offer other supports such as shopping, telephone buddies from careworkers or other carer support group members
- In these times, think outside of the box and get creative.

#### *NDIS Service*

- WMSC will following the decision taken by the Carer whether to continue or suspend service
- WMSC will follow up with wellbeing check to carers and clients if service are suspended and offer other supports such as shopping, telephone buddies or wellness calls from careworkers
- In these times, think outside of the box and get creative.

#### *Governance*

- Monthly Committee Meetings will be suspended due to restrictions on gatherings and social distance.
- Monthly Managers report and financials will send out to all committee members. If committee are required to respond to issues in report they will ring or email their views and/or concerns. Manager will then address the concerns.
- Pressing issues requiring immediate attention, Manager will contact the executive by phone, skype or zoom to discuss issue and get approval
- Payment Authorisations – all payment authorisations will be email to designated signatory for approved authorisation by return email or Chairperson will authorise each week when in office *to pickup meal for delivery.*

#### *Staffing*

- Staff who are classed in the high risk category or live with a family member who are classed in the high risk category are to work from home, if possible or have leave to reduce any risks.
- Manager will look at reducing amount of staff in office premises by requesting some staff to work at home. This will help to maintain healthy staff who could replace any office staff who may get ill and enables services to continue operating
- Changes to careworkers roster to minimise the number of clients they have contact with for example those clients who have multiple careworker go into their home on a weekly basis for supports. One careworker will be assigned to cover all the support to reduce contact and protect the client and staff.

## Risk Management

*Aged Care Quality Standard 8 - Organisational Governance;*

*NDIS Practice Standard 2- Governance & Operational Management*

### Policy Statement

Enterprise Risk Management refers to all the major risk categories (listed below) and includes the co-ordination, integration, monitoring and reporting of strategies that are developed.

Wellington Multi Service Centre Inc. is committed to managing risk and will promote identification and mitigation of risk in all areas of operations, including but not limited to:

- Governance
- Finance
- Management and Administration
- Reputation
- Human Resources and Staff Support
- Work Health Safety
- Legal and Legislation
- Service Delivery.

\*Note: Work Health and Safety Policy compliments this policy

### Policy

The Enterprise Risk Management Plan will underpin the overall operation of Wellington Multi Service Centre Inc. and be regularly reviewed through analysis of identified hazards, reported incidents, and potential liabilities and risks.

The Manager is responsible for developing and maintaining the Enterprise Risk Management Plan and reporting annually to the Management Committee on its effectiveness.

The Enterprise Risk Management Plan will:

- identify risks in each of the categories
  - identify the level of risk according to the risk management matrix (below)
  - include strategies for the mitigation of risk
  - allocate responsibility for the implementation of the strategies
  - define the timeframe within which strategies will be implemented if they are not already in place
- identify the level of risk once the strategies are implemented.

### Significance

	Insignificant	Minor	Moderate	Major	Catastrophic
Almost certain A	Moderate	High	High	Extreme	Extreme
Likely B	Moderate	Moderate	High	High	Extreme
Possible C	Low	Moderate	High	High	High
Unlikely	Low	Low	Moderate	Moderate	High

Likelihood

<b>D</b>					
<b>Rare</b>	Low	Low	Moderate	Moderate	High
<b>E</b>					

\*See Enterprise Risk Management Plan (Appendix)

Reviewed & updated: June 2022

# Fees Policy

*Aged Care Quality Standard 1 Consumer Dignity and Choice; 2 Ongoing Assessment and Planning; 8 Organisational Governance*

*NDIS Practice Standards 1- Rights; 2- Governance & Operational Management*

## **Policy Statement**

Wellington Multi Service Centre Inc. will ensure that it operates in accordance with the National Guide to the Commonwealth Home Support Program Fees Contribution Framework (2015), which reinforces fairness, transparency and consistency in the collection of fees.

Wellington Multi Service Centre Inc. intends to improve the sustainability of the organisation by collecting a target of 15% of the total grant revenue provided by the Australian Government.

Fees for services provided under the National Disability Insurance Standards will be in accordance with the NDIS Price Guide<sup>1</sup>.

This policy will be publicly available to all stakeholders and will be provided to new participants of the organisation (in a format which is relevant to their needs). Revenue from fees will be used to enhance and expand services.

## **Policy**

Fees will be reviewed by Wellington Multi Service Centre Inc. on an annual basis while considering:

- That the cost of providing the service is covered
- Costs are relevant to the community socio-economic status, and affordable for service users generally
- The organisation can develop and expand to meet the needs of the community
- Ongoing increases each year in resources costs
- The Australian Government recommendations on fee frameworks
- For NDIS participants, fees will be based upon the NDIS Price Guide.

Participants will be asked to contribute to the cost of each service in accordance with these guidelines:

- The consumer will be advised of the contribution at the time of intake,
  - If the consumer agrees to the fee, it will be included in the Individual Support Plan (dependent upon service)
  - Participants undergoing financial hardship may request a meeting with the Manager to discuss their situation and negotiate a reduction or waiving of the fee
  - Participants are asked to advise their Manager of any change in their circumstances which will affect their ability to contribute
  - The full cost of service will be charged if service users are receiving, or have received, compensation payments intended to cover the cost of community services
  - Fees do not apply to information, assessment and review services
  - A record of contributions will be maintained and reported to the Australian Government Department of Health as per funding requirements. For delivered meals, the cost of the meal (ingredients) is considered the client contribution.
-

Participants, potential participants and their advocates may lodge an appeal if they are unhappy with the level or extent of fees charged by:

- Contacting the Manager and requesting a review of the fees
- The Manager will respond within seven (7) days to schedule a meeting to discuss the fees
- Staff will advise the consumer, that they may use an advocate to assist them in their negotiations
- If a service is unable to waive the fee, the reasons why will be explained clearly to the consumer and/or their advocate.

If the consumer or their advocate is still not satisfied with the result they may follow the Complaints process.

Reviewed & updated: June 2022

# FINANCIAL HARDSHIP

*Aged Care Quality Standard 8 - Organisational Governance*

*NDIS Practice Standard 2- Governance & Operational Management;*

## POLICY

Wellington Multi Service Centre Inc., is a not for profit organisation and therefore unable able to dismiss any debt. Our service also recognises there are cases of genuine financial hardship requiring respect and compassion in special circumstances. This policy establishes guidelines for assessment of hardship applications applying the principles of fairness, confidentiality. This policy applies to all applications for deferment and alternative payment arrangements.

## POLICY STATEMENT

It is the responsibility of the clients or Carers to inform Wellington Multi Service Centre Inc., if or when they are experiencing financial hardship and not let the debt escalate more than \$150.

### 1. HARDSHIP ASSISTANCE AVAILABLE TO CLIENTS

A client may be eligible for consideration for hardship assistance in the payment of accounts and or fees, where:

- The client is unable to pay accounts or fee when due and payable for reasons beyond the person's control; or payment when due would cause the person hardship.

Wellington Multi Service Centre will consider applications for assistance in accordance with the following principles:

- will individually assess cases of financial hardship;
- will not reduce costs, but will consider alternative available approaches to dealing with cases of financial hardship;
- will consider a scheme of periodical payments in cases of hardship or extenuating circumstance.

Applications for Hardship must be made on the appropriate form, available from our office.

- The applicant must be a current client or carer of our service.
- The applicant must be able to prove, by providing evidence of financial hardship when apply for application (Copy of recent bank statements for all accounts; details of income and expenditure;
- The application for hardship must be accompanied with supporting documentation which may include but is not limited to:- Reasons why the client was unable to pay accounts or fees; letter from a recognised financial counsellor/planner or Justice of the Peace confirming financial hardship; a letter from a medical professional confirming medical conditions causing hardship.

Wellington Multi Service Centre may request the applicant attend an interview to assist the management (committee executive and Manager) in the understanding of the issues causing hardship.

### 2. HARDSHIP ASSISTANCE BY CENTREPAY OR PERIODICAL PAYMENT ARRANGEMENTS

Wellington Multi Service Centre may enter into a formal agreement with a client eligible for alternative periodical or Centrepay payment arrangements for payments due and for arrears.

The following guidelines should be met in determining eligibility:

- Payments must be made on a weekly or fortnightly basis.
- Arranged payments must be of an amount so that all amounts owing are paid in full by 30 June of that financial year.

### **3. GENERAL**

Financial hardship cases will only be discussed in Committee Meetings.

All hardship applicants shall be advised in writing of Wellington Multi Service Centres decision within 30 days of receipt of the application.

Privacy will be maintained in accordance with our Privacy and Confidentiality Policy.

### **4. LATE FEE**

Wellington Multi Service Centre Inc., at committee's discretion may charge a late fee to clients or carers if agreed payments are not met/ late.

Reviewed & updated: July 2021

# Financial Management

*Aged Care Quality Standard 8 - Organisational Governance*

*NDIS Practice Standard 2- Governance & Operational Management; 4 – Provision of Support*

## POLICY STATEMENT

Wellington Multi Service Centre Inc. is required by NSW Department of Health and NSW Fair Trading to keep proper financial records, ensure financial probity by submitting independent annual audit, Acquittal and Annual summary of financial affairs.

Wellington Multi Service Centre Inc. is committed to effective management of the organisation's finances, the prevention of fraud or mismanagement of its funds and accountability to our members for the use of organisational funds and to funding bodies or donors for the funds they have provided.

Wellington Multi Service Centre Inc. will:

- maintain appropriate records of financial transactions and accounts that comply with the Australian Accounting Standards
- implement a system of approvals for financial transactions
- document delegations of authority for approving financial expenditure
- ensure safeguards are in place to prevent fraud and financial mismanagement
- provide staff who are responsible for bookkeeping and financial management with relevant documented financial procedures.

## PROCEDURES

### Bank accounts:

Wellington Multi Service Centre Inc. maintains the following bank accounts:

1. Commonwealth - No: 1 Account – Active Account
2. Commonwealth - No: 2 Account – Equipment Replacement account
3. Commonwealth - Term Deposit Account – Employee Benefits
4. Westpac – Debit Card Account - \$2,000 limit

The Management Committee must approve the opening and closing of any bank account and the investment of funds.

A transfer of funds between any two Wellington Multi Service Centre Inc. accounts will require the approval of bookkeeper.

### Maintaining appropriate records:

Financial records will be kept according to Australian Accounting Standards.

Financial records will be maintained in the following manner:

- Transactions will be recorded electronically using accounting software approved by Bookkeeper and Management Committee
- Electronic entry of transactions will be done by Bookkeeper
- Accounts will reconciled monthly by Bookkeeper
- The Chart of Accounts within the MYOB Accounting package
- Hard copy primary records will be maintained by the bookkeeper
- Financial records will be archived for a period of 7 years.

### Processing transactions



All accounts will be dealt with promptly on a weekly basis.

**Accounts Receivable:** The Bookkeeper will manage all accounts receivable and:

- process payments received and bank deposits
- maintain documentation.

**Accounts Payable:** The Bookkeeper will manage all accounts payable and:

- ensure all purchases have the necessary approval before processing
- process payments to creditors either by cheque or electronic funds transfer (EFT)
- issue a remittance advice to a creditor when an EFT payment is made
- Electronic transfers will be checked by one (1) executive signatory on a weekly basis

### **Approvals and delegations**

All expenditure must be approved by the appropriate delegated person or people. Delegations of authority for expenditure are set by the Management Committee.

Delegation chart for financial matters is attached. A full copy of the Delegation Chart can be found in the Policy manual

### **Preventing fraud and financial mismanagement**

Financial management security is maintained through:

- Procedures for obtaining and documenting approval for expenditure.
- The receipting and reconciling of all money received by the organisation with banking records.
- Monitoring and checking of accounts and bank reconciliations by one of the executive signatories.
- A monthly finance report to the co-ordinator.
- A monthly finance report to Management Committee
- Monitoring of the budget by the co-ordinator/bookkeeper/Treasurer and Management Committee
- Although Manager and Book keeper can be signatories, they cannot sign cheques jointly except under extenuating circumstances – pre approved by the executive

### **Providing documented procedures**

The following procedures will be documented in detail in the Policy manual

- Money handling procedures for staff collecting or processing money (receipting, banking, reconciling).
- Petty cash procedures for all staff using petty cash.

### **Client/Participant Money and other property**

Staff and volunteers are not to give clients/ participants financial advices.

Staff and volunteers are not to give clients/ participants legal or medical advice.

Staff/volunteers are not to use client/participants keycards at any time.

Client/Participant money and other property is only to be used by staff or volunteer with the consent of the Client/Participant and only for the purpose intended by the participant.

If necessary, clients/participants are supported to access and spend their own money as they want.

Clients/participants are to receive a copy and explanations of the Shopping Rules. Staff/volunteer are to complete a shopping Expense form (if client/participant do not accompany them) and both client and volunteer/staff must sign on receiving change and receipts. This will also be included in our Risk Management Plan.

### **Insurance and Asset Management**

Wellington Multi Service Centre Inc. will arrange and ensure that all appropriate insurances are taken out to adequately protect the organisation and staff, participants and volunteers.

Insurances will include:

- Public Liability Insurance with a minimum of \$20,000,000.00 cover for any one occurrence
- Workers' Compensation Insurance as required by law
- Volunteers' Personal Accident Insurance
- Professional Indemnity
- Property (fire), contents (theft and burglary – replacement cost) and all risk insurance to cover the organisation's property and assets
- Vehicle Insurance
- Insurance coverage for students or trainees on placement, except where they are covered by their training institution.

The Manager and staff should ensure that all vehicles belonging to staff and volunteers, if used for Wellington Multi Service Centre Inc. business, are fully insured, including Compulsory Third Party and Comprehensive or Third-Party Property Insurance.

Reviewed & updated: July 2022

## Governance & Regulatory Compliance

*Aged Care Quality Standard 8 - Organisational Governance.*

*NDIS Practice Standard 2- Governance & Operational Management*

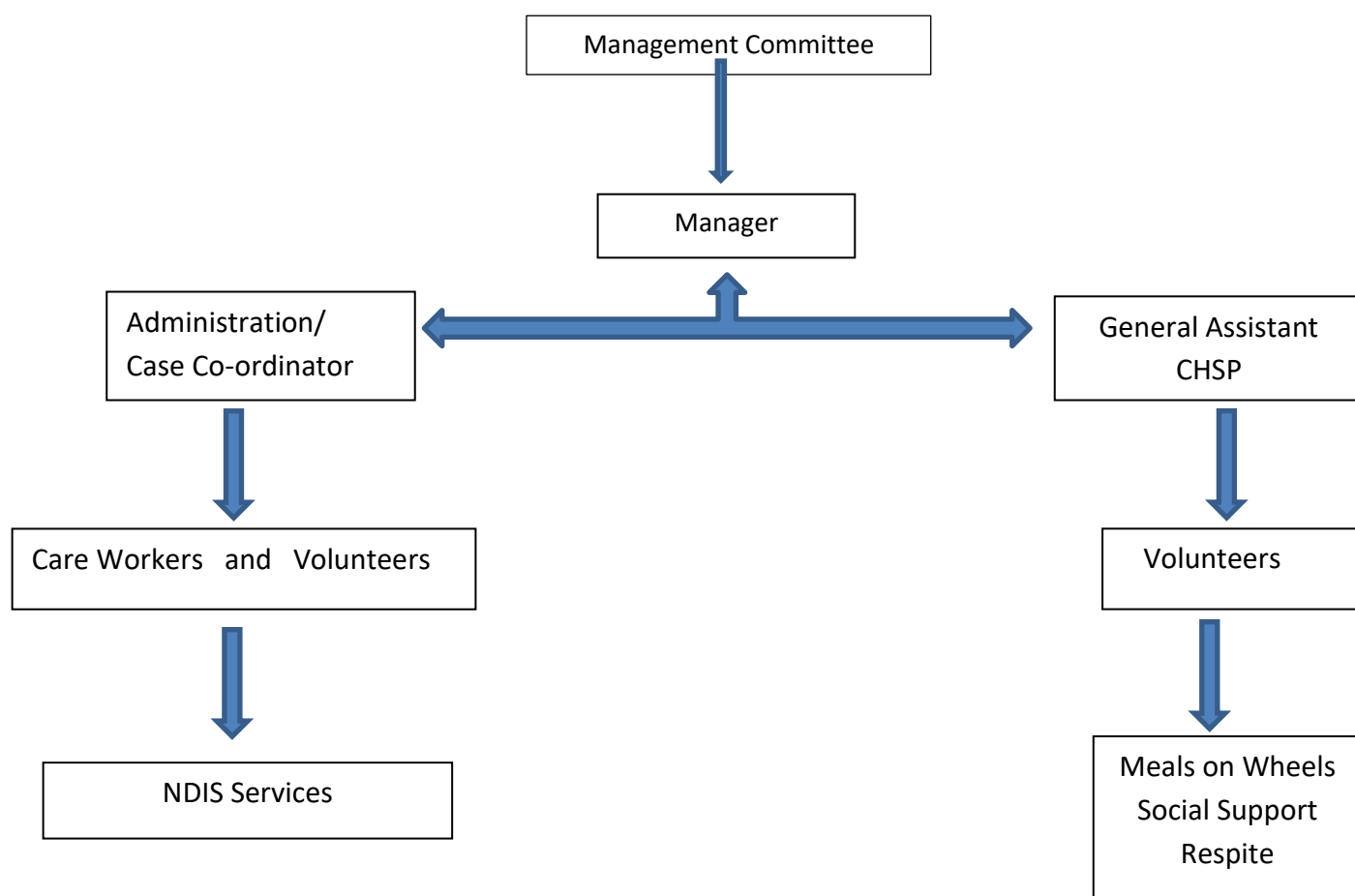
### Policy Statement

Wellington Multi Service Centre Inc. will ensure that its governance processes are transparent and accountable to all stakeholders. This includes ensuring that there is a clear organisational structure, roles and responsibilities, accountability and reporting process, planning processes, financial management and monitoring of compliance to guidelines, standards and regulatory requirements.

### Policy

#### **Organisational Structure**

The following outlines the current structure of Wellington Multi Service Centre Inc. and the lines of reporting



#### **Roles and Responsibilities**

The roles and responsibilities of Management Committee Members are outlined in the organisation's Constitution. The roles and responsibilities of staff and committee are outlined in each member's Position Description. In the absence of Chairperson, the vice chairperson would fill this role. In the event of having an issues to deal with before a planned meeting, manager will contact the executive and get advice and approval to deal with the matter immediately.

During Committee Meetings any conflict of interest with any member must be declared, noted and that member will be asked to leave the room while the issue is dealt with.

### **Planning process**

Wellington Multi Service Centre Inc. is constantly monitoring the service and looking for opportunities to develop and improve. The organisation undertakes annual planning which identifies areas for improvement and potential opportunities. This enables the organisation to set goals for the year ahead and to delegate responsibilities to staff or volunteers. The Annual Plan is documented and provided to all staff, volunteers and relevant stakeholders.

Annual Planning also enables the organisation to identify training needs, orientation requirements, audit requirements and any other areas which require attention. As well as this the organisation has a three year Strategic Plan.

### **Financial Management**

The organisation's Financial Management Policy outlines the organisation's procedures for financial management.

### **Monitoring and Compliance**

Wellington Multi Service Centre Inc. monitors compliance with standards, guidelines, funding and legislative requirements in the following ways:

- Policies are reviewed on a regular basis with a standing agenda at Management Committee monthly meetings under "Requirements". The manager present new policies which is the discussed, changed, accepted and minuted.
- Any changed or new policies are made available through our newsletter for all clients, volunteers and carer to view. Copies are present to staff at next staff meeting and discussed
- All policies have version control and are reviewed in accordance with review date
- Compliance items are reviewed on a regular basis with a standing agenda at Management Committee monthly meetings under "Requirements". The manager present compliance information which is the discussed, changed and minuted.
- Annual independent Audit is carried out
- Acquittals are undertaken each year by the Manager and the Book Keeper, which ensures the organisation is monitoring expenditure and income and reporting to the Department as required
- The Annual reports are completed by the Book Keeper and the Manager and these are provided at the Management Committee meeting, enabling the Committee to see the number of outputs and reviewing the contract with the Department
- Standing agendas for Management Committee include some of the following items:
  - Complaints/Feedback/Complements
  - Work Health and Safety issues
  - Continuous improvement
  - Strategic Planning
  - Accident/injury
  - Compliance
  - Conflict Of Interest.
  - Policy Review

Reviewed & updated

# Donations, Gifts, Benefits and Bequests Policy

*Aged Care Quality Standard 8 - Organisational Governance.*

*NDIS Practice Standard 2- Governance & Operational Management*

## **Policy Statement**

Wellington Multi Service Centre Inc. is committed to implementing measures to maintain the integrity of the reputation of the organisation. To ensure accountability Wellington Multi Service Centre Inc. will ensure the declaration of any donations, gifts, benefits or bequests offered to paid and unpaid workers, and the organisation.

## **Policy**

### **Donations**

Members of the public, participants, friends and family of participants, businesses and others may from time to time donate funds to Wellington Multi Service Centre Inc. Donations may be made without any specific purpose to be used as general revenue. A donation may also be for a specific purpose identified by Wellington Multi Service Centre Inc. or by the donor. Any donations for a specific purpose and accepted by Wellington Multi Service Centre Inc. must be in line with the values and mission of Wellington Multi Service Centre Inc. and cause no perceived or actual conflicts of interest. If a donation is made for a specific purpose, and the purpose accepted and agreed to by Wellington Multi Service Centre Inc., then the wishes of the donor must be adhered to. If the scope or purpose of the donation should change and there are unexpended funds, this should be in consultation with the donor where possible.

Wellington Multi Service Centre Inc. is a registered charity with the Australian Charities and Not-for-Profits Commission (ACNC) and is a registered deductible gift recipient. Wellington Multi Service Centre Inc. records all monetary donations in the financial records and a thank you card is sent to the donor. Where the donation is made for a specific purpose, or as an unspecified donation, this should be publicly recognised by mention in the Wellington Multi Service Centre Inc. Annual Report, on the website, in newsletter and any other appropriate forums.

Any donations received by Wellington Multi Service Centre Inc. must be dealt with according to the Financial Management policy. Australian Tax Law specifies the types of gifts that can be accepted as charitable donations. To be tax deductible, a gift must be of money or property that is covered by one of the following gift types:

1. \$2 or more: cash;
2. property purchased during the 12 months before the gift was made
3. property valued by the Tax Office at more than \$5000;
4. trading stock disposed of outside the ordinary course of business;
5. property under the Cultural Gifts Program; or
6. places listed in the National Heritage List, the Commonwealth Heritage List or the Register of the National Estate.

From time to time Wellington Multi Service Centre Inc. may be offered a donation in a form other than cash or cheque, for example a vehicle or equipment. This type of donation must also be considered as to whether it is in line with the values and mission of organisation and whether there will be financial and / or compliance issues resulting from the acceptance of the donation. This type of donation may require a third-party valuation for tax and insurance purposes.

### **Gifts**

Gifts are unsolicited and meant to demonstrate a feeling of caring or appreciation, without expecting anything in return.

Token gifts, in particular are usually small and insignificant, are insubstantial in value and are easily obtained or replaced.

Wellington Multi Service Centre Inc. acknowledges that staff and volunteers, including members of the Committee of Wellington Multi Service Centre Inc., may be offered gifts by participants, their family, suppliers or potential suppliers, or members of the community arising from their work and association with Wellington Multi Service Centre Inc.

All offers of gifts are to be token gifts such as flowers, plant cuttings, home grown produce (fruit and vegetables), home produced goods (e.g. embroidered face washers, jam), and chocolates. These items must be reported to the Manager and shared among staff.

Under no circumstances should paid and unpaid workers accept offers of money, or items that represent money such as cheques, bonds, casino chips etc. Under no circumstances should items which have the potential to win money be accepted, such as instant scratch cards, lottery tickets, keno tickets or similar items.

Gifts of money to Wellington Multi Service Centre Inc., may be accepted on behalf of organisation by the Manager.

### **Benefits**

Benefits are often intangible and refer to something believed to be of value, or benefit, to the receiver. Preferential treatment, promotions, access to information or services, discounts, and fly buys/frequent flyer points are examples of benefits.

Staff or volunteers must declare any offer or receipt of a benefit to the Manager. Committee Members and other Members of the organisation are also required to declare any offer or receipt of a benefit associated with their Wellington Multi Service Centre Inc., responsibilities to the Chair of the Management Committee.

### **Bequests**

Bequests are an inheritance, that is, a gift of property or money, from a deceased estate.

In some instances, Wellington Multi Service Centre Inc., may be the nominated beneficiary of bequests made by participants, their family or other members of the community. These may be accepted by the Chair of the Management Committee on behalf of the organisation but the Committee must vote to accept or decline the bequest.

If staff or volunteers of Wellington Multi Service Centre Inc., becomes aware that they have become the beneficiary of a bequest made by a consumer they are to advise the Manager immediately, while Committee and organisation Members must notify the Chair of the Management Committee.

While Wellington Multi Service Centre Inc., cannot prevent paid or volunteers from accepting bequests, all parties are requested to consider the implications to the remaining members of the consumer's family and other loved ones. These parties may be subjected to added pressure and further grief, as well as any associated financial costs associated with possibly contesting the will.

Should Wellington Multi Service Centre Inc., become aware that any staff or volunteer has attempted to, or coerced a consumer for personal gain, this person is to have their employment/relationship terminated and the consumer and their family informed of such action.

Further, the staff or volunteers may risk being subject to legal action if it is believed they used their position or relationship with Wellington Multi Service Centre Inc., to influence or coerce the consumer into making a bequest.

Wellington Multi Service Centre Inc., will not assist any staff or volunteers to defend against challenges to such bequests.

## **Who**

This policy applies to all staff and volunteers, including the Committee and Members of Wellington Multi Service Centre Inc.,

### **1. Risk**

Failure to comply with this policy can result in financial and emotional harm to participants, their carers and family, as well as beneficiaries of the estates of former participants. Wellington Multi Service Centre Inc., is also at risk of reputational damage within the community due to the perception of taking undue advantage of participants.

Staff or volunteers who fail to comply with this policy may:

- i. Be at risk of legal proceedings by the families or executors of deceased participants' estates
- ii. Face disciplinary procedures and/or dismissal.

### **2. Key Stakeholders**

- Participants and carers
- Wellington community
- Wellington Multi Service Centre Inc.,
- Staff, Volunteers including the Committee and Members of Wellington Multi Service Centre Inc.

**Reviewed & updated**

# Open Disclosure Policy

*Aged Care Quality Standard 8 - Organisational Governance; NDIS Practice Standard 2- Governance & Operational Management*

## **Policy statement**

Wellington Multi Service Centre Inc, will encourage a culture of open disclosure, where feedback, complaints, errors and/or incidents (near miss or harm) will be openly discussed, an apology offered where necessary and improvements actioned.

## **Policy**

Where there is a complaint, error, incident, near miss or harm involving a consumer or their family the following will occur:

- The service will investigate and document the incident or situation and arrange to meet with the complainant or consumer as soon as possible
- Where the service is at fault, an apology will be offered and the consumer will be involved in discussions around improvements to be made or actions to be taken
- An action will be identified in the services Continuous Improvement Plan and discussed at Committee, staff and volunteer meetings in an open and transparent manner (without breaching client privacy/confidentiality), and brainstorming around improvements will occur
- Staff and volunteers will be provided with training on Open Disclosure and the importance of taking responsibility, owning mistakes and a culture of improvement encouraged
- Errors, incidents or complaints will be registered in a register to identify patterns or trends
- The Complaints Register and Continuous Improvement Register will be discussed at consumer meetings or forums openly, ensuring participants are aware of issues or concerns and have an opportunity to provide suggestions and/or feedback

Reviewed & updated



# Physical Resources

*Aged Care Quality Standard 5 - Organisation's Service Environment*

*NDIS Practice Standard 2- Governance & Operational Management; 4 – Provision of Supports*

## Policy Statement

We are committed to providing and maintaining a safe and healthy working environment for all employees, visitors and members of the public. Hazards to health and safety will be removed or where this is not practicable, they will be managed so as to prevent injury, illnesses and dangerous events.

## Policy

We consider safety and incident prevention to be vital to the ultimate success of the organisation's operations and is an integral part of management's responsibilities.

Management will meet these requirements by:

- Complying with both the spirit and letter of the law for all matters relating to workplace health and safety
- Providing a safe place to work
- Providing safe working conditions and safe operating procedures for all company activities
- Minimising workplace hazards
- Encouraging and respecting contributions by all employees towards the improvement of workplace health and safety
- Providing adequate information, instruction, training and supervision to enable every employee to perform their duties effectively and safely
- Providing sufficient information to contractors and visitors on possible risks to health and safety

Each employee has the responsibility to:

- Follow all safe work practices, procedures, instructions and rules
- Work in a manner which ensures the health and safety of him or herself and others
- Encourage other employees to work in a healthy and safe manner
- Participate in training
- Report or rectify any unsafe conditions that come to their attention.

This policy is an integral part of our total management plan. Our goal is to have zero injuries to employees, contractors, service users and members of the public within our workplace. This can only be achieved through consultation with and cooperation by all.

## Ensuring Safe Service for clients/participants

We ensure safe services for service users through:

- Inviting feedback from service users through direct contact, feedback forms or surveys, on any issues in the delivery of services
- Providing training to staff and volunteers (induction and ongoing) on the need to ensure the safety of service users and themselves
- The staff to record hazards in service users' homes by using the Accident/Incident Form, Risk Assessment for clients homes, outings Risk Form
- Regular maintenance and servicing of equipment and vehicles, as appropriate or recommended by the manufacturers
- All staff, volunteers, clients and carer's are required to inform Wellington Multi Services Centre if they have contracted a "Contagious diseases or illness" that could put others "at risk" as our clients are classed as Vulnerable Persons.
- Strategies we employ to ensure the safety of special needs service users include:
  - Identifying service users with language or other communication needs and making sure staff and volunteers are available who can effectively communicate with them
  - Providing appropriate food textures (modified diets) and eating utensils to meet individual's needs.
  - Using appropriate support and equipment to meet individual's needs.

### **Ensuring the Safety of Special Needs groups**

Strategies we employ to ensure the safety of special needs service users include:

- Identifying service users with language or other communication needs and making sure staff and volunteers are available who can effectively communicate with them
- Providing appropriate food textures (modified diets) and eating utensils to meet individual's needs.

### **Ensuring the Safety of Staff and Volunteers**

We adopt the following strategies to ensure the health and safety of staff and volunteers:

- Making sure the work environment meets regulatory requirements for all services
- Ensuring all areas of the workplace are safe
- Ensuring safe access to service user's homes
- The provision of personal protective equipment (PPE)
- The provision of equipment that minimises the risk of strain or injury and that is maintained in good working order
- All staff, volunteers are required to inform Wellington Multi Services Centre if they have contracted a "Contagious diseases or illness" that could put others "at risk" as our clients are classed as Vulnerable Persons.
- The locating of goods and equipment to minimise the risk of accidents or injury
- Stress management strategies including:
  - Providing good working conditions
  - Clearly defining job responsibilities and accountability structures
  - Establishing support systems for all staff
  - Ensuring work plans and timelines are realistic
  - Managing abusive service user behaviour
- Providing training to staff (orientation and ongoing) on ensuring the safety of service users and themselves

- Ensuring safe access to service user's homes
- Safety inspections of facilities
- Inviting feedback from staff through direct contact, feedback forms or surveys, on any issues in the delivery of services
- Ongoing audits and continuous improvement of workplace processes and procedures
- Regular maintenance and servicing of equipment and vehicles, as appropriate or recommended by the manufacturers
- Regular fire and evacuation training
- Making premises and facilities a smoke free environment.

### **Safety Reviews**

Safety reviews are completed as follows:

- Office and other areas – 6 monthly using the Building Risk Assessment form. This audit is completed by the manager or other staff selected by the manager.

Completed review forms are reviewed by the manager or a delegated staff member for immediate maintenance issues and other improvements.

The process for dealing with the Reports is:

- The report is forwarded to the manager immediately. The Manager assesses the accident or incident and identifies if a Work Health and Safety Act Incident Notification form needs to be completed. In the first instance the Work Cover Authority of New South Wales needs to be telephoned on 13 10 50.

### *Hazards in Service Users' Homes*

If staff become aware of a danger to themselves or the service user whilst delivering a service they complete a Client home Risk Assessment which is provided to the Manager on completion of their round.

The Manager identifies action to remove or control the hazard and consults with the service user. Service users may be required to:

- Secure any dogs prior to the arrival of staff or volunteers
- Make sure access to the front door or inside areas, if necessary, are safe.

### **Accidents and Incidents**

Accidents, however minor and near-miss accidents and other incidents that or could pose a threat to the safety of staff, service users or any other person, are reported on an Accident/incident Form.

The report is forwarded to the manager immediately. The staff/Manager assesses the accident or incident and identifies the following steps to be taken; **Immediate Notification** - death, serious injury, abuse or neglect, unlawful sexual or physical contact, assault or sexual misconduct or a **5 Day Notification** – unauthorised restrictive practice ( theft etc) to the appropriate authorities and peak bodies (Workcover, Work Health & Safety or NDIS Quality and Safeguard Commission)

Accidents/incidents recorded on the register and taken over to the continuous improvement plan for evaluation, review and is discussed at monthly committee meeting.

Wellington Multi Service Centre will abide by the National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018

### **Maintenance and Hazards**

Staff are trained to identify and report health or safety hazards in the service's premises or at the service user's home. These are reported on a Maintenance Request and Hazard Report.

Completed reports are forwarded to the Manager who carries out (or delegates) any immediate action required.

### **Communicable Diseases**

Staff and volunteers use standard precautions and use hygiene and cough etiquette to reduce the risk of contracting or passing on a communicable disease. Staff who have a communicable disease (such as a heavy cold, flu or gastroenteritis) are not permitted to work as our service user group are vulnerable to such infections. Staff must stay off work until the symptoms have passed.

### **Food Incidents and Recalls**

Any incidents related to food, such as appropriate temperatures not maintained, packaging deficits, supplier issues etc are recorded and corrective actions taken.

If we are notified or become aware of a food recall:

- A Food Recall Form is completed
- All stock is inspected and the food affected by the recall is labeled 'Food for Disposal' and stored in the pantry, refrigerator or freezer (as appropriate)
- The supplier is contacted as soon as possible and advised to collect the goods
- Take any other actions necessary.

### **First Aid Kits**

Advice is sought from St John's Ambulance as to an appropriate first aid kit to meet the workplace requirements and the requirements of the Workplace Health and Safety Act. Kits are located in the pantry, in the Kitchen and in our service vehicles and are checked each annually by the designated staff member, who replenishes used or out of date items, when required.

Any time first aid is administered as a result of an accident or incident related to work or the workplace, an report is completed

### **Injury Management**

Staff who sustain an injury at work that prevents them from carrying out their normal duties are supported in a return to work programme that is appropriate to their injury and abilities and meets the needs of the organisation. The manager liaises with the staff person in developing the most appropriate program. The manager is guided by the Medical Practitioner or Health Professional who is overseeing the staff person's recovery. External expert assistance is sought if required.

### **Approved Suppliers and External Contractors/Brokerage Agreements**

To ensure the integrity and reliability of supplies the designated staff member maintains a list of Approved Suppliers including contractors. Approved suppliers are selected and evaluated by the Manager on the following criteria:

- Quality
- Reliability

- Timeliness
- Backup support and service and
- Cost.

External suppliers and contractors provide an ABN number and, if appropriate, evidence of licensing/registration, and current public liability and/or workers' compensation insurance. These details are noted on the Approved Suppliers list that is kept by the Manager. New suppliers are approved by the Manager before goods or services are purchased from them. Preferred suppliers are recorded on the Approved Suppliers list

### **Assets Register**

An assets register is maintained by the Admin staff in Excel. The assets register includes:

- The date of purchase
- A description of the goods, including brand, model and serial number (if appropriate)
- Location
- Purchase cost (including GST)
- Date of disposal
- Reference to original purchase documentation
- Comments.

All equipment purchased with a value in excess of \$500.00 is recorded. If the purchase price is not known, for example if the asset is donated, then it is recorded at the cost of a comparable item at current prices. Purchase costs show installation costs, cabling, transportation and other associated costs incurred to make the asset usable.

The assets register is updated at the start of each financial year.

Where assets are purchased using Commonwealth funding or where assets, including capital infrastructure, were previously purchased under the joint HACC program, their use is governed by the Aged Care Funding Agreement and referred to as 'assets'. If assets are acquired using funds other than Commonwealth funding their use is not governed by the Aged Care Funding Agreement and are referred to as 'other assets' an item is only considered an Asset or Other Asset if that item has a value of \$10,000 or more (including GST).

### **Insurance**

Our organisation arranges its insurance through Community Underwriters, GIO and NRMA.

#### **Insurance Cover**

The following insurances are maintained by Community Underwriters:

- Public liability
- Directors' and Officers' Liability
- Professional indemnity insurance
- Property - fire
- Contents - theft and burglary (replacement cost)
- Volunteer insurance - personal accident and public liability
- Motor Vehicle Liability Insurance

The following insurances are maintained by NRMA:

- Compulsory Motor Vehicle Insurance.
- Comprehensive Motor Vehicle Insurance

The following insurances are maintained by GIO:

- Workers' compensation

The Book keeper ensures that current Certificates of Currency are available for all insurances.

#### Public Liability Insurance

As per the requirements of the *Associations Incorporation Act 2009 (NSW)* the management committee:

- Reviews insurance requirements each year and reports the results at the annual general meeting
- Tells members the risks if no public liability insurance is taken out
- Tells people applying to be members, and nominees for election to the management committee, whether we have public liability insurance and how much coverage we have
- Tells any person or entity we deal with if we do not have public liability insurance.

#### Staff and Volunteer Vehicles

Staff are to use service vehicles for all work related matters. Staff personal vehicles will only be used in situations with authority from the manager. Volunteers vehicles will be cover by Wellington Multi Service Centre Inc. insurance when carrying duties for the services.

Staff and volunteers are required to provide a copy of their drivers licence, car registration and insurance and this is kept in their staff file and recorded in the Checks Register.

### **Maintaining Equipment and Facilities**

#### Equipment Maintenance

Maintenance records are kept and reviewed on an ongoing basis to determine if equipment needs replacing rather than repair.

Vehicle servicing and maintenance is also managed by the Manager as she houses the service vehicles.

#### Maintaining Emergency Equipment

Emergency equipment is checked and serviced every 6 months or as per manufacturers' requirements. This includes:

- Fire extinguishers
- Fire blankets
- Smoke alarms.

#### Maintenance Requests

Staff and volunteers report required maintenance to the General Assistant who arranges required maintenance in discussion with the Manager as required.

### **Pest Control**

The Manager is responsible for ensuring the premises are free from pests with the implementation of a pest control program. Regular inspections for pests are carried out and any infestations treated. These are recorded on the Pest Control Log.

### **Motor Vehicle Policy**

The use of vehicles is detailed in our Motor Vehicle Policy in this section of the policy manual. This also includes the use of private vehicles

### **Fire and Emergency Procedures**

Emergency Procedures and Safety Procedures in the case of fire and other emergencies are displayed throughout the office. The procedures cover:

- Fire procedures
- Threatening telephone calls
- Threatening behavior including hold-ups
- Bomb threats
- Earthquakes/cyclones
- Accidents (not motor vehicle)
- Medical emergencies
- Chemical spills
- Release of toxic, flammable or combustible liquids
- Malfunctions of power, gas or water supplies.

#### **Displaying Emergency Procedures**

A copy of the Emergency Procedures are displayed near the fire extinguishers in the foyer and all offices and The hallway

#### *Emergency Equipment*

The following emergency equipment is available

- Smoke alarms throughout
- Fire extinguishers throughout
- A fire blanket in the kitchen area
- exit signs.

#### **Exits**

Marked exits are kept clear of obstructions at all times.

#### *Staff Responsibilities*

Each individual staff member has a responsibility to familiarise themselves with their work place and to be aware of:

- The emergency procedures as specified in the Emergency Procedures
- The most direct means of exit from the building
- The assembly points for the building
- The location of any portable fire fighting equipment within the building and its application.

In the event of an emergency the manager is notified as soon as possible and will provide direction in the absence of direction provided by emergency personnel.

#### Training in Emergency Procedures

All staff and volunteers are introduced to emergency procedures on commencement of employment through the orientation process and through review of the Emergency Procedures

Annual training in fire and emergency procedures is mandatory for all staff. Mandatory fire drills are also held annually

#### Evacuation Procedure

In the event that an evacuation is required the most senior staff person available or emergency services personnel will direct the evacuation. The evacuation procedure is specified in the Emergency Procedures.

#### Backup Storage for Food Perishables

In the event that power, gas or water supplies malfunction and food perishables are at risk a mutual arrangement has been made with Dubbo Meals on Wheels to store food at their facility and , if necessary and possible, for them to provide meals to service users. If Dubbo Meals on Wheels cannot provide meals, meals are sourced from supermarkets.

#### Working Alone or in Isolation

Working alone or in isolation refers to situations where staff in the course of their duties work alone or are physically isolated from colleagues and without access to immediate assistance.

Wellington Multi Service Centre Inc., will undertake to provide:

- Safe systems of work for working alone or in isolation
- Procedures for employees to identify and minimise risks associated with working in isolation
- To ensure the Health, Safety and Welfare of Council employees
- To ensure compliance with the Work Health & Safety Act 2011
- To ensure the development, assessment and implementation of appropriate safe work systems when employees are required to work alone or in isolation
- To ensure that the Manager is aware, as reasonably practicable, of staff and volunteers movements at any given time

#### Responsibilities of:

**Managers** shall ensure that:

- A risk assessment is carried out prior to employees working alone or in isolation
- Staff and Volunteers under their control are aware of their obligations as detailed in this policy and relevant procedures
- Health and Safety systems appropriate to working in isolation are applied and properly monitored
- Safe systems of work are documented and properly assessed by competent persons prior to any employee working alone or in an isolated or remote location
- The Policy and Procedures to be reviewed annually or when changes occur in the workplace and/or work procedures

#### Staff and Volunteers

- Taking reasonable care not to place themselves/others at risk due to their acts or omissions
- Ensuring regular contact (as agreed) is maintained with their Manager
- Ensuring their Manager is notified when working alone or in an isolated or remote location
- Staff and Volunteers that are working alone or in an isolated or remote location are to notify office staff on their return.

#### Mandatory Building Procedures



## Security of Buildings

Employees must ensure that

- Emergency exits are accessible
- When working alone they are familiar with exits and alarms
- There is access to a telephone and first aid kit
- If there is any indication that the building has been broken into they call for assistance before entering

## Personal Safety

- Violence and threats to personal security are potential hazards to staff and volunteer can occur in the workplace, in transit or at client's home and come in many forms such as:  
Physical and sexual assault, verbal and written abuse, discrimination, intimidation, spitting, stalking, threats with weapons and robbery.
- Staff and volunteers should take all reasonable precautions to ensure their own safety, as they would in any other circumstances
- Staff have panic button on the security app on their phones
- Before working alone, an assessment of the risks involved should be made in conjunction with manager
- Where required, staff and volunteers must ensure that they notify office staff on their return
- Staff and volunteers must inform the Manager or other identified person when they will be working alone, giving accurate details of their location and following an agreed plan to inform that person when the task is completed. This includes occasions when a staff member expects to go home following an external commitment rather than returning to the office.
- Where staff work alone for extended periods and/or on a regular basis, must make provision for regular contact, both to monitor the situation and to counter the effects of working in isolation.
- Staff working away from the office should ensure they have access to a mobile at all times. Staff are responsible for checking that the mobile phone is charged, in working order and has sufficient credit.

## Assessment of Risk

In drawing up and recording an assessment of risk the following issues should be considered, as appropriate to the circumstances:

- The environment – location, security and access
- The context – nature of the task, any special circumstances
- The individuals concerned – indicators of potential or actual risk
- History – any previous incidents in similar situations
- Any other special circumstances
- All available information should be taken into account and checked or updated as necessary. Where there is any reasonable doubt about the safety of a staff member working in isolation in a given situation, consideration should be given to sending a second worker or making other arrangements to complete the task

## Planning

- Staff safety should be considered when choosing locations for courses etc
- Staff should be fully briefed in relation to risk as well as the task itself
- Communication, checking-in and fall-back arrangements must be in place. Staff should ensure someone is always aware of their movements and expected return time
- Manager are responsible for agreeing and facilitating these arrangements

**Practice Guidance – Personal Safety**

“Reasonable precautions” might include:

- Checking directions for the destination
- Ensuring someone know where they are and when expected to return to office
- Text or ring to let other staff know you are at destination and when your leaving and when you arrive home (if out of normal work hours)
- Avoid where possible poorly lit or deserted areas
- Taking care when entering or leaving empty buildings

Any member of staff with a concern regarding working in isolation should ensure that it is discussed with the Manager or with the whole team, as appropriate.

**Monitoring and Evaluating Physical Resources Processes**

Physical resources management processes and systems are regularly audited as part of our audit program and staff, service users and other stakeholders are encouraged to provide ongoing feedback on issues and areas where improvements can be made and recorded on the continuous Improvement plan

Reviewed & Updated:

## Records/document control

*Aged Care Quality Standards 1 -Consumer Dignity and Choice; 2 Ongoing Assessment and Planning; 7 - Human Resources;8 - Organisation Governance .*

*NDIS Practice Standard 1 Rights; 2- Governance & Operational Management*

### **Policy Statement**

Wellington Multi Service Centre Inc., will ensure that it manages all records and documents in a professional, safe and secure manner with full regard to privacy and confidentiality and in line with the *NSW State Records Act 1998*<sup>2</sup>, Privacy Amendment Act 1917 (Notifiable Breach) and the Australian Privacy Principles.

Participants, staff and volunteer's information will only be collected or stored with the consent of the person. Participants, staff and volunteers will be encouraged to read this policy or be aware of how their records are stored, managed and/or disposed of.

### **Policy**

**General files** - Wellington Multi Service Centre Inc., has an electronic records system, locked filing cabinets for secure storage and distribution of documents and correspondence which includes but is not limited to:

- Incoming and outgoing correspondence including electronic mail
- Meeting minutes
- Legal documents, Funding Agreements, acquittals and reports and funding applications
- All documentation which is not consumer or staff or volunteer related will be stored in this record system
- Staff or volunteer files.

Staff and volunteer files will be retained in the organisation's electronic records system for 12 months and will be accessible only to those staff who require access to this information (for example, Manager). Staff and volunteer information may include:

- Letter of Offer
- Position Description
- Supervision notes
- Any disciplinary letters
- Any notification of changed contracts or other materials relating to staff or volunteers
- Criminal record check results.

All consumer files, volunteer files or files containing personal or sensitive information will be maintained securely in a locked filing cabinet and/or in the services, electronic data base (MYOB, DEX, My Aged Care, PRODA and Pharmacy ID). Access to consumer files will be limited to staff who have the correct authority and have signed the Privacy or Confidentiality Agreement. See also [Privacy and Confidentiality](#).

Consumer files include:

- File notes & Assessment
- NDIS Service Agreements
- Support Plan
- Individual Budgets
- Emergency contacts

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<sup>2</sup> <http://www.legislation.nsw.gov.au/#/view/act/1998/17>

- Change in circumstances of the consumer
- Complaints
- Reports or information from other agencies
- Requests from the consumer for any change in service
- Files will be stored in the filing cabinet when not in use or on the consumer data base system.

At no time will files be left open on a desk or removed from the office. Staff computers will be timed to sleep mode after a period 5 minutes and all computers will be password protected.

Clients/participants are informed at assessment that data collection is used for obtaining funding or grants and for purpose of staff recruitment and skill requirements. This is also addressed in the Handbook and client signed service agreements.

Coded (de-identifiable) consumer information will also be uploaded on to the Departments Data Exchange (DEX). Consumer files are archived (and de-identified) if services have ceased and unlikely to be resumed. Archived files are destroyed after seven (7) years, or per the *NSW State Records Act 1998*.

### **New Reporting (Privacy Amendment Act 2017 {Notifiable Data Breaches})**

From February 2018, specific services have a statutory obligation to report a data breach if this occurs (as a Government funded service Meals on Wheels Services must meet this obligation). The best way to prevent a Data breach is to ensure that the service collects, stores, transfers and disposes information in accordance with the *Privacy Policy* and *Record/Document Control Policies*.

A data breach occurs when personal information that an entity holds is subject to unauthorised access or disclosure or is lost.

Personal information is information about an identified individual, or an individual who is reasonably identifiable. Entities should be aware that information that is not about an individual on its own can become personal information when it is combined with other information, if this combination results in an individual becoming 'reasonably identifiable' as a result.

A data breach may be caused by malicious action (by an external or insider party), human error, or a failure in information handling or security systems.

Examples of data breaches include:

- loss or theft of physical devices (such as laptops and storage devices) or paper records that contain personal information
- unauthorised access to personal information by an employee
- inadvertent disclosure of personal information due to 'human error', for example an email sent to the wrong person
- disclosure of an individual's personal information to a scammer, as a result of inadequate identity verification procedures.

Where a data breach is suspected, the service must carry out an assessment within 30 days; notify the individual(s) who the breach has involved; notify the Commissioner (NDIS or Agedcare):

- 1300 363 992
- [enquiries@oaic.gov.au](mailto:enquiries@oaic.gov.au)
- <https://www.oaic.gov.au/privacy-law/privacy-act/notifiable-data-breaches-scheme#how-to-notify>

Reviewed & updated

# Work Health and Safety

*Aged Care Quality Standard 1- Consumer Dignity and Choice; 2 - Ongoing Assessment and Planning; 8 - Organisational Governance*

*NDIS Practice Standards 2 – Governance & Operational Management*

## **Policy Statement**

Wellington Multi Service Centre Inc., will strive to provide and maintain an environment which is safe, secure and in accordance with Work Health and Safety legislation and Work Cover NSW guidelines and requirements.

Wellington Multi Service Centre Inc., seeks to make the workplace as safe as possible for staff, visitors, participants and volunteers by reducing hazards and preventing injury by the implementation of risk management strategies.

The organisation recognises the legislative requirement to comply with the Workplace Injury Management and Workers Compensation Act 1998 and supports strategies to ensure that an injured worker receives early and effective treatment and to enable them to return to work as soon as possible.

Note: Enterprise Risk Management refers to other risks associated with the business such as reputation, financial, environment, staffing etc.

## **Policy**

Wellington Multi Service Centre Inc., staff, Committee members and volunteers accept their responsibilities to:

- Take reasonable care to protect their own health and safety and the health and safety of others
- Co-operate in ensuring that the workplace is safe and healthy by prompt reporting of incidents and hazards
- Follow procedures, directions and training and use the personal protective equipment provided
- Ensure that staff are represented on matters relating to Workplace Health and Safety
- Staff are advised of their rights, responsibilities and obligations under Work Health and Safety legislation, including reporting of incidents and hazards
- Work Health and Safety (WHS) will be part of the orientation program for all new staff and volunteers
- Include a WHS standard item in all staff and committee meetings with regular reviews of policies, procedures, incidents and hazards
- To comply with all legislative requirements as outlined by WorkCover NSW including mandatory notification, Workers Compensation applications, and development of Return to Work plans
- Schedule, carry out, record and evaluate regular fire and emergency drills
- Schedule regular inspection of fire safety equipment and exits
- Involve staff in development, implementation and evaluation of WHS programs, maintenance requirements, strategies for safe work practices and training opportunities or needs
- Ensure safe and secure storage of hazardous materials, including cleaning products and that Material Safety Data Sheets (MSDS) are attached or available on file
- Promote the health of staff with a vaccination program and implementation of Universal Control Procedures when working with participants
- Seek advice from the appropriate Health authority when an outbreak of notifiable or communicable disease occurs or staff are in contact with such diseases
- Maintain building and equipment via regular safety inspections and proactive reporting of hazards and the need for repairs

- Facilitate staff wellbeing through training and the availability of a counselling service for staff.

**Wellington Multi Service Centre Inc., understands its responsibilities to:**

- Acquire and keep up to date knowledge of WHS matters and relevant Codes of Practice (WorkCover NSW), including an understanding of its role as a Person Conducting a Business Undertaking (PCBU) under the Act
- Ensure appropriate resources and processes are provided to enable hazards to be identified and risks to be eliminated or minimised
- Ensure the organisation has, and implements, processes for complying with any legal duty or obligation regarding WHS
- Access the building or office after hours only with prior staff approval and with appropriate entry and exit from the front of the building only
- Perform Electrical Testing and Tagging for all electrical equipment by a qualified person, every 24 months
- Ensure the building is cleaned regularly and pest control carried out to keep it free of vermin
- Provide adequate and safe storage is provided for equipment and documents
- Provide and maintain adequate heating, ventilation and lighting in office and service areas, with natural light enhanced as much as possible
- Designate a smoking area for staff and participants which must not be positioned adjacent to open windows, or on any direct pathway to and from access points to the building

**Procedures are in place for safe driving and long-distance driving**

- Staff should be aware of fatigue and take a break every two hours
- Staff are to drive to the weather conditions and to their competency level
- If a delay is expected, then relevant staff should be notified
- Staff should avoid driving at dawn, dusk or after dark if possible.

**Risk Assessments are carried out for:**

- Venues if a group visit is planned
- Clients Home Safety Risk Assessments are carried at assessment or when visiting for the first time. Manager will speak to clients about fixing issues or will work with client and staff to minimize risk for all This is then noted on the consumer's file and on service delivery sheet for meals etc. and discussed with staff at staff meeting.
- Activities that may be considered hazardous for participants
- If required, when work is undertaken with other providers and services to identify and treat risks, ensure safe environment, prevent injuries and to have clear understanding of everyone's roles and responsibilities.

**Procedures are in place for Home Visiting:**

- Make appointments for home visits, and phone immediately prior to going to the home to ensure it is still appropriate to visit
- Consider information provided by referring agencies regarding risks for participants, if available
- Consider information provided by families in the initial assessment and intake processes
- Where it is suspected that there is domestic violence or abuse occurring in a home, participants will be encouraged to attend the Wellington Multi Service Centre Inc., facility, or schedule the visit at a time when the suspected perpetrator will not be at the home
- Staff are not to visit consumer homes without prior approval from the Manager
- Staff are not to visit consumer homes after hours without prior approval from Manager

- Staff must take a mobile telephone on home visits and have the phone turned on.

**Safety Audits will be carried out including but not limited to:**

- First Aid Kits
- Spill Kit
- Fire Extinguishers ( both vehicle and office)
- Fire blanket
- Building maintenance
- Workstations
- Fire Drill, First Aid Kit location and Evacuation signs in every room

**Return to Work Process for Staff after Injury**

For the protection of all staff, Wellington Multi Service Centre will follow the advice and processes of our Workers Compensation insurance company - iCare

Australian Federal Police Check Certificate and a Working With Children Check (WWCC) is a requirement for all staff employed by Wellington Multi Service Centre.

Reviewed & updated

# Food Safety

*Aged Care Quality Standards 4 - Services and Supports for Daily Living; 8 - Organisational Governance*

## **Policy Statement**

Wellington Multi Service Centre Inc., will ensure that it adheres to Food Standards Australia New Zealand's applicable Standards, when receiving, preparing, storing, delivering and/or disposing of potentially hazardous foods. These standards, which contain health and hygiene obligations for food handlers, aim to lower/or minimise the risk of food borne illness. Legislation and procedures for Meals on Wheel Services will vary depending upon the type of food prepared or delivered (ie frozen, chilled, cooked) and how food is prepared, numbers cooked for and other factors.

There are five national food safety standards that apply in Australia:

- 3.1.1 — Interpretation and Application
- 3.2.1 — Food Safety Programs
- 3.2.2 — Food Safety Practices and General Requirements
- 3.2.3 — Food Premises and Equipment
- 3.3.1 — Food Safety Programs for Food Service to Vulnerable Persons.

These standards provide a risk-based, preventative approach to providing safe and suitable food. They are based on the principle that food safety is best ensured by implementing food hygiene controls at each stage of food handling.

Of the five standards, Standards 3.1.1, 3.2.2 and 3.2.3 apply to all Australian food businesses and establish fundamental requirements for minimising food safety risks. Safe Food Australia provides information to assist with understanding the intent of these three standards.

## **Policy**

Wellington Multi Service Centre Inc., provides frozen meals to the Wellington, Stuart Town, Mumbil and Geurie and other villages with in the Wellington area (former LGA).

Wellington Multi Service Centre Inc., will ensure that each person's individual needs in relation to food likes, dislikes and intolerance is respected. We also understand the severity of allergy and anaphylaxis and will adhere to allergy and anaphylaxis guidelines when/where required <https://allergyfacts.org.au/allergy-anaphylaxis>.

## **Frozen Food Safety Procedures:**

### **Client Orders**

- All clients are given a menu and asked to indicate what their meal preferences are and how many meals per week they would like.
- A four week menu order form is to be completed for all clients.
- The completed menu for each client is recorded on our Meal Packing sheets and original menus filed in clients records.
- All new clients orders are recorded on the Meal Packing sheet to ensure number are correct for ordering

### **Ordering Frozen Meals**

- Frozen meals are ordered from Bathurst Meals on Wheels and all orders must be emailed to them by 12noon on Tuesdays for deliver the following Monday. Minimum number of boxes is 10 per order. Order forms are in the filing cabinet.



- Special Order meals are also available. Staff to contact Bathurst MOW for latest menu when required
- Use the Meal Packing Sheet to order meal choices and numbers
- Approximately 50 -60 extra meals are to be kept in stock for our over the counter clients. Check the number of meals left in freezers. Order a variety of additional meals to ensure this stock is always available.

### **Over the counter**

For clients purchasing frozen meals over the counter:

- Pack the client's selections in a bag
- Update the stock sheet each time you take meals from freezer. This sheet is hanging on notice board in freezer room
- Process and receipt the payment. If paying on account, enter the details on the clients cards.

### **Receiving Frozen Deliveries**

- The delivery truck arrives anywhere from 10.30am to 11.30am on a Mondays (Tuesdays on public holidays).
- Boxes are placed in freezer room and unpacked.
- Check the incoming order matches what was ordered on the order form by marking off the order list before placing food in freezers.
- Check dates on new stock to make sure there is at least three month to go. If any meals have not been date stamped, write the same date on them as those in the same batch and put aside for quality control.
- Check meals are still frozen and not damaged when unpacking. If meals are either they are to be returned to Supplier.
- Adjust the stock sheet straightaway after delivery of the meals to include the new numbers of stock.

### **Packing Meals**

- The frozen food for each client is packed in bags marked with their name and no of bags (i.e. Bag 1 of 3) on the Thursdays or Friday before the delivery on Monday.
- Frozen Meals are delivered by volunteers on Mondays to clients in the town limits. Out of town deliveries are on a fortnightly basis by staff or volunteers.
- For transporting foods, Red Cool bags with ice bricks. The ice bricks are to be placed on the top of the esky, as cold air descend

## **DELIVERY OF MEALS BY VOLUNTEERS**

### **Procedure**

#### **Picking Up Meals**

- Volunteers are to arrive at the office at approximately 9.00am.
- Meal packs will be placed in red cooler bags by staff prior to delivery
- Volunteers are to sign in for their delivery run. Staff will assist with loading the cooler bags into volunteer vehicles, if required. All bags will have the clients name and bag number ( 1 of 3, 2 of 3 etc) if more than one bag per client.
- A Runsheet is provided with clients names, address and instructions for deliver.

#### **Delivering meals**

- Park close to the client's home.
- Remove the appropriate meal pack from the red bags for delivery and take to client's home.
- It is advised that all volunteers' cars are kept locked while you are in with a client; this is for your safety.

- Volunteers can put meals into client's freezer if necessary.
- We do realise all MOW clients enjoy a chat while you are delivering the meal, but please be aware that **temperatures** of the other meals will be increasing and this can lead to food safety problems for the clients waiting.
- If a client is not home, you may return at end of run, if still not home, please return meals to office and inform staff.
- If at any time you are worried about a client's immediate well-being while delivering, please phone 000, or our office (6845 3474). One volunteer is to stay with client, the other to carry on with delivery.
- Meals are to be visually check and if feel or look defrosted they are to be returned to the office
- Due to Confidentiality the Runsheets should not be taken into clients homes with you.

#### After Delivery

- Return the red bags, Runsheets and any payments to the office.
- Inform staff if there were any issues or concerns so staff can follow up, if required.
- Ice blocks are to be placed back in freezers as soon as they are returned to the office.
- After coming back from the delivery, unpack eskies and wipe out with anti-bacterial wipes, receipt money, enter payment on client's card.

#### **Stocktake**

A stocktake is to be done after each pack and/or before ordering food.

#### **FREEZER TEMPERATURES**

Freezer temperatures are taken 3 times per day Morning/Noon/Afternoon and recorded on sheet on freezer door. Temperature devices are randomly check

#### **UPDATING FROZEN MEAL MENUS**

If Bathurst Meals on Wheels are having a new menu they will send out the information on what will change usually via email. They also then will send out a new order form. Save new order form on computer. Then the Meal Count Sheets and freezer stock sheet has to be updated.

#### **FOOD SAFETY CHECK LIST**

A food safety Checklist is randomly completed to check on condition, transport and storage of meals from suppliers

Reviewed & updated

## Conflict of Interest Policy

*Aged Care Quality Standard 2 - Ongoing Assessment and Planning; 8 - Organisational Governance  
NDIS Practice Standards 2 – Governance & Operational Management: 3 - Provision of Supports*

### **Policy Statement**

A conflict of interest occurs when a person's personal interests conflict with their responsibility to act in the best interests of the Wellington Multi Service Centre Inc.

Personal interests include direct interests, as well as those of family, friends, or other organisations a person may be involved with or have an interest in (for example, as a shareholder). The purpose of this policy is to help Committee members, Staff and clients of Wellington Multi Service Centre Inc., to effectively identify, disclose and manage any actual, potential or perceived conflicts of interest in order to protect the above-mentioned groups integrity and to manage or resolve any conflict of interest.

### **Policy**

This policy has been developed to address conflicts of interest affecting Wellington Multi Service Centre Inc., for all Committee, Staff and clients. Conflict of interest are common, and they do not need to present a problem as long as they are openly and effectively managed.

It is the policy of Wellington Multi Service Centre Inc., as well as a responsibility of the board, that ethical, legal, financial or other conflicts of interest be avoided and that any such conflicts (where they do arise) do not conflict with the obligations to Wellington Multi Service Centre Inc.

Wellington Multi Service Centre Inc., will manage conflicts of interest by requiring the following:

- avoid conflicts of interest where possible
- identify and disclose any conflicts of interest
- carefully manage any conflicts of interest, and
- follow this policy and respond to any breaches.

Therefore these situations must be managed accordingly.

### **Responsibility of the Management Committee**

The Management Committee is responsible for:

- establishing a system for identifying, disclosing and managing conflicts of interest across the organisation
- monitoring compliance with this policy, and
- reviewing this policy on an annual basis to ensure that the policy is operating effectively.

Ensure that Committee members are aware of the governance standards of the Aged Care Standards and the NDIS Practice Standards, particularly governance standard and that they disclose any actual or perceived material conflicts of interests as required

### **When a Conflicts of Interest arises**

Once an actual, potential or perceived conflict of interest is identified, it must be entered into the register of Conflict of interests, as well as being raised with the board.

### **Management Committee Meetings**

When a conflict of interest arises in a meeting the conflict must be declared, recorded in the register and the Committee member concerned is asked to remove themselves from the meeting while the issues is discussed. Once the issue is completed the committee member can return to finish the meeting.

#### Staff Members

When a conflict of interest arises with any staff member, the conflict must be declared and recorded in the register. Staff member will not be able to provide any service provision or access files of the family member or close friends who are accessing the service.

In care worker meetings the staff member concerned is asked to remove themselves from the meeting while the issues is discussed. Once the issue is completed the staff member can return to finish the meeting.

#### **Compliance with this policy**

If there is reason to believe that a person subject to the policy has failed to comply with it, it will investigate the circumstances. If it is found that this person has failed to disclose a conflict of interest, the board may take action against them. This may include seeking to terminate their relationship with Wellington Multi Service Centre Inc.

Reviewed & updated

# Motor Vehicle Use Policy

*Aged Care Quality Standard 5 - Organisation's Service Environment*

*NDIS Practice Standard 2- Governance & Operational Management; 4 – Provision of Supports*

## Policy Statement

We are committed to providing and maintaining a safe and healthy working environment for all employees, volunteers and members of the public by maintaining safe usage of the Service Vehicles

## Policy

It is the responsibilities of all employees, volunteers and committee to minimising any risks associated when using the service motor vehicles in work related activities

## Process of Responsibilities:

### ***Driver will ensure:***

- Drivers of the service vehicles must be authorised to do so and must hold a current driver's licence. Note: A Learners Permit is not an acceptable Licence.
- Staff who are on "P" plates must always display them when using service vehicle
- Before commencement with WMSC, all drivers must supply a copy of current drivers license and details. The details submitted should also include impending matters, if any, that might see their licence removed.
- Only authorised Employees, Volunteers and committee can drive the vehicles.
- Drivers are fully responsible for the vehicle while it is in their charge.
- The Driver responsible for any vehicle that is involved or suspected of being involved in any accident is to report the accident to the Manager and complete an Accident Form as soon as possible. (see process under "Motor Vehicle Accident Procedures")
- Staff who have a car accident while driving a service vehicle or their won vehicle while in work hours f are to
- Traffic regulations and bylaws must be always observed.
- All traffic and parking violations are the responsibility of the driver of the vehicle at the time. WMSC will not be liable for any fines or penalties as a result of vehicle use by its employees, volunteers or committee at any time.
- Vehicles must always be driven at safe speeds according to the road conditions and within the speed limit. Every courtesy shall be shown by the driver to other road users and pedestrians. Repeat failure by the driver to obey the road rules will result in disciplinary action.
- Drivers shall utilise safety equipment provided as required.
- Drivers are required to check for obvious defects in the vehicle and report them immediately to the Manager. If the defect is such that it makes the vehicle unsafe to use, the manager is to book vehicle in for repair as soon as possible.
- Smoking in motor vehicle is prohibited at all times whether or not there are passengers on board.
- All members, driving of vehicles must present to each work shift as fit for work and free of fatigue.
- Complete vehicle logbooks at the end of each day.
- Unattended vehicles must be securely locked.
- Vehicles must be always kept clean and drivers are not to leave personal items in vehicle. It is the responsibility of Wton MSC Manager to wash, vacuum and garage the vehicle as per Lease Agreement.

**Wellington Multi Service Centre Inc. will ensure:**

- Responsibility for the management of Service vehicles by keeping vehicles comprehensively insured, registered and have road service assistance coverage.
- Service vehicles are serviced at the manufacturer's recommended intervals and maintained in a roadworthy condition.
- Service vehicle will be traded at 40,000 km or 2 years, (whichever comes first) depending on service's financial position.
- The service vehicles will contain a first aid kit, spill kit and fire extinguisher. Staff who use their own cars are also given first aid kits and spill kits to keep in their vehicles
- uses a variety of motor vehicles in the delivery of services. This includes privately owned vehicles (eg provision of services in the client's home). Employees using their own vehicles for provision of WMSC services must maintain the vehicle in good working condition, including regular servicing. The vehicle must be registered and be covered by insurance. Roadside assistance coverage must also be current. All motor vehicles shall always be kept clean.
- The driver of the service vehicle must be an employee, volunteer or committee and person stated on Lease Back Agreement. Drivers must be licenced to drive the classification of the vehicle. In certain circumstances it may be permissible for other people to drive the service vehicle must be approved by the committee. A copy of the person driver's current licence is to be provided to WMSC.
- If a driver is unfit to drive because of health issues, suspensions or cancellation of licence, the driver must advise Management as soon as possible. Note: WMSC reserves the right to dismiss an employee, volunteer who loses their licence if the job required the use of a vehicle and no other arrangements are reasonably practicable.

**Motor Vehicle Accident Procedures**

Staff who have a car accident while driving a service vehicle follow the procedures outlined below:

- Stop at once
- As much as possible, ensure that the vehicle is not posing a further traffic hazard
- Offer assistance to anyone who might be injured
- Get the names and addresses of all witnesses to the accident
- Report the accident to the police.

If another vehicle is involved make sure you obtain and keep a record of the following information:

- The owner's name, address and telephone number
- The driver's name, address and driving license number or other identification
- The name of the owner's insurance company
- The make, type and registration number of the car.

Identify yourself to the other driver, together with your name, address and registration number.

If the police attend, make sure you:

- Provide the police with all relevant information about yourself and the other driver
- Obtain and keep a record of the attending police officer's name, rank, number and station.
- As much as possible try to recall and commit to memory (or write down) the details of the accident while they are still fresh in your mind. Report to the Manager and our insurance company representative.

If personal injury or serious property damage is involved:

- Phone the Manager and the insurance company will be contacted as soon as possible and Complete an Accident form and give it to the Manager as soon as possible after the accident.

### ***Alcohol and Other Drugs***

- WMSC vehicles must not be used by any driver who is affected by drugs, prescribed or social, or alcohol. Employee, volunteer or committee are not permitted to drive a Services vehicle with a blood alcohol level above the prescribed limit or be under the influence of medication and/or social drugs which may impair performance.
- No support will be provided for any Driver who suffers any consequences as a result of being in control of a service vehicle whilst under the influence of alcohol or drugs.
- An employee who is found to have driven under the influence of drugs or alcohol may be dismissed.

### ***Smoking***

- Smoking is not permitted in any vehicle owned or operated by WMSC or in privately owned vehicles during work hours.

### ***Mobile Phones***

- It is a traffic offence and a risk to safety to initiate or receive calls without a hands free phone connection i.e. Bluetooth phone tethering to the motor vehicles communication system. Drivers must always comply with this law.

### ***Logbooks***

- Motor vehicle logbooks are to be kept on service vehicle at the end of each day. Private usage of kms are also to be logged by the person leasing back the car. Old logbooks are to be kept in the office.

### ***Non Compliance***

- Any employee, volunteer who does not abide by this policy will receive a verbal or written warning on the first occasion or may be dismissed. Immediate dismissal could result if a Driver is found to be in control of the service vehicle, or driving their own vehicle for Wellington Multi Service Centre Inc whilst under the influence of alcohol or drugs
- Failure to comply with the above policies may result in the removal of vehicle usage privileges and/or disciplinary action including termination of employment in serious circumstances.

### ***Lease Back Agreement***

The Manager will lease back the Service Vehicle for private usage as part of their position. See Lease Back Agreement for terms and conditions.

### ***Service Vehicle Changeover procedures***

- Service vehicle will be traded at 40,000 km or 2 years, (whichever comes first) depending on service's financial position.
- Service vehicle must be suitable for service delivery and client access
- Quotes for purchase of new vehicle must be presented to committee meeting for discussion
- Once decision on vehicle is made, manager to contact dealer and start the order process
- Manager is responsible for make sure all paperwork is in order and completed correctly.
- Once trading of cars are complete the dealer is to supply WMSC Inc with invoice and payment will be completed by EFT or cheque
- Registration and CTP insurance will be organised by the dealer before vehicles are exchanged.

# Service Delivery

## Meal on Wheels Service

*Aged Care Quality Standard 4 – Services and Supports for Daily Living*

### **Policy Statement**

Wellington Multi Service Centre Inc., will provide a variety of high quality meals to participants. The quantity of meals will align with the National Meal Guidelines and will be considerate of individual needs of participants.

Meals services will be delivered at home in line with the CHSP guidelines service description and the funding agreement with the Department of Health.

### **Policy**

Meals on Wheels services recognise the importance of good nutrition for all people. NSW Meals on Wheels has developed the National Meal Guidelines (2017) to support meal providers in the preparation and delivery of meals to participants. It also provides advice for participants on healthy eating and how to be well nourished and achieve optimum health and nutrition. Meal services undertake some of the following procedures in meal service delivery (not limited to):

- Ensure meals are delivered in a safe and appropriate manner to the consumer in their home with due regard to safety of volunteers, staff and participants
- Ensure meal delivery rosters are well planned and there is adequate back-up where volunteers cannot deliver a meal
- Allergies, likes and dislikes of participants are catered for and determined upon intake and at each review
- The cultural needs of participants are considered and catered for wherever possible
- Equipment is provided for participants where they need support with meal preparation or consumption
- Participants who have specific needs will be referred to a dietician for specialist support (where a dietician is available)
- Have systems and processes in place for monitoring the quality and quantity of food
- Work within the Food Safety Standards and adhere to the Food Safety Policy (see Food Safety Policy)
- Review menus with dieticians wherever possible to ensure that there is enough variety, adequate nutrition and portion size etc
- Keep records of consumer's needs, preferences, history etc in their file
- Ensure participants have opportunities to provide regular informal and formal feedback on the meals they are receiving
- Make referrals to other services where necessary if needs cannot be met within service provision
- Provide information to participants around good nutrition and how to supplement a meal service in the home
- Work to continuously improve
- Provide training to volunteers and staff on Food Safety, Food Handling and other topics of interest.

Reviewed & updated



## Social Support Service

*Aged Care Quality Standard 4 – Services and Supports for Daily Living*

### **Policy Statement**

Wellington Multi Service Centre Inc., will provide a variety of high quality Social Support services to participants. These services will be considerate of individual needs of participants. Social Support services will be delivered at home in line with the CHSP guidelines service description and the funding agreement with the Department of Health.

### **Policy**

Social Support services understands the importance of maintaining independence for all participants and provide supporting services for participants to live independently in their own homes in the community

Services provided under Social Support are (not limited to):

- Laundry Service: Washing is done on a fortnightly basis and is picked up and returned within a few days (weather permitting)
- Tele Aid: A friendly phone call each day between 8am and 9am to check on clients well-being.
- Assisted Shopping Service: This service is for people who are vision impaired, housebound, or use aids that may make shopping difficult and need assistance with shopping.
- Cemetery Visitation: A fortnightly service on each Monday of pension week. Clients are picked up and returned home. Pickup time is 10.30am and return by 11.30am.
- Times on Wheels: This service is the local newspaper on CD for vision impaired.
- Hospital Visiting: Visiting clients in hospital and doing small errands eg: pay bill, personal shopping etc.
- Information & Referrals: We can provide brochures and contact details or make referrals for other service providers on your behalf
- Individual Assistance: Help with letter writing, filling out forms, doctors appointments etc.
- Ensure meals are delivered in a safe and appropriate manner to the consumer in their home with due regard to safety of volunteers, staff and participants
- Have systems and processes in place for monitoring the quality of service
- Keep records of consumer's needs, preferences, history etc in their file
- Ensure participants have opportunities to provide regular informal and formal feedback on the meals they are receiving
- Work to continuously improve

Provide training to volunteers and staff on relevant topics of interest

Reviewed & updated

## In Home Respite Service

*Aged Care Quality Standard 4 – Services and Supports for Daily Living*

### **Policy Statement**

Wellington Multi-Service Centre Inc., provides a flexible Respite Service, integrating a range of basic maintenance and support services that responds to the needs of the clients. This Service is available in the Wellington, Gilgandra and Dubbo areas.

In Home Respite service will be delivered at home in line with the CHSP guidelines service description and the funding agreement with the Department of Health.

### **Policy**

Assists carers/ family member who care for someone who is Aged, Frail or Disabled person by giving them a break from their role by providing a caring and stimulating environment.

The aims of the Respite Service are:

- Support people who are Aged, Frail and Disabled, achieve increased independence and community participation.
- Assist carers/ families who provide care and support for their family member who is aged, frail or have disability.
- Strengthen and maintain the primary care relationships between a aged, frail person or a younger person with a disability and their carers/ family members.
  
- Will endeavour to ensure that the respite activities are age appropriate and have positive benefits and outcomes for the clients and carers.
- Promote the integration and participation of people with a disability within their communities.
- Ensure that Respite is delivered in a safe and appropriate manner to the consumer in their home with due regard to safety of volunteers, staff and participants
- The cultural needs of participants are considered and catered for wherever possible
- Have systems and processes in place for monitoring the quality and quantity of Respite delivered
- Keep records of consumer's needs, preferences, history etc in their file
- Ensure participants have opportunities to provide regular informal and formal feedback on the meals they are receiving
- Make referrals to other services where necessary if needs cannot be met within service provision
- Work to continuously improve

Provide training to volunteers and staff on related topics of interest

Reviewed & updated

# Nation Disability Insurance Scheme (NDIS)

*NDIS Practice Standard 1 – Rights; 3 – Provision of Support;*

## **Policy Statement**

Wellington Multi Service Centre Inc., will provide a variety of high quality supports to participants. The quantity of service will align with the National Disability Insurance Scheme Guidelines. Services will be delivered at home in line with the service descriptions within the participants NDIS Plan and will be considerate of individual needs of participants.

## **Policy**

Ensure services are delivered in a safe, transparent environment and in an appropriate manner requested by participants in their home as described in the participants NDIS Plan.

Core Supports offered are as follows:

Assistance with Daily Personal Activities: Assist with and or supervising personal tasks of daily life to enable the participant to live as autonomously as possible.

Assistance with Travel/ Transport Arrangement: Enables participants to access disability supports outside their home, and to pay for transport that helps them to achieve their planned goals.

Household Tasks: Assist with household tasks enables the participant to maintain their home environment. This may involve undertaking essential tasks that the participant is not able to undertake.

Participation in Community, Social and Civic Activities: This enable the participant to pursue recreational activities and engage in the community.

## **Wellington Multi Service Centre will:**

Clearly communicate to participants and others present at assessment the criteria for commencing or leaving the service under our 4 core supports above

Will provide a client centred service with safe and transparent supports to participants

Keep records of participant's needs, preferences, history etc, in their file

Complete a signed Service Agreement, Care Plan and individual budget for and with each participant in a format which is appropriate to each participant (such as easyread or large print)

Ensure participants have opportunities to provide regular informal and formal feedback on the supports they are receiving

Make referrals to other services where necessary if needs cannot be met within service provision

Support participants to engage with family, friend and the chosen community groups as desired by the participants

Wellington Multi Service Centre will not replace any in-kind supports delivered by friends, family or community unless requested by the participant

Assist and support the participant's right to exercise control and choice when using services and supports and promote their right to dignity of risk.

Promote participants right to freedom of expression, self-determination and decision making and actively prevent abuse, neglect, violence and to be free from discrimination or harm.

Promote, assist and support the cultural connection for all participants

Will explain to participant and family, if a service is not available and will provide information and will assist participants to access other providers

Work with the participant to monitor services, address any potential barriers and to continuously improve all aspect of service provisions through reviews of policies and service practices.

Will not withdraw access to supports or denied service on the basis of dignity of risk or choice

Maintain good relationships with other organisation and community groups that participants are involved with and establish a referral network

Provide training to staff on supports required for participants to meet their needs, goals and other related topics of interest.

Service Agreements will include:

- Parties involved in the Agreement
- Schedules of Supports
- Service Provider Responsibilities
- Participants Responsibilities
- Changing the Agreement
- Ending the Agreement
- Cancellations
- Fees
- Payments
- Feedback, Complaint and Disputes
- Contact Details
- Agreement Signatures
- Table of services

Care Plans will include:

- Participants Details
- Care plan Details
- Contacts
- Emergency Plan
- Aids and Equipment
- Clinical Needs
- Medical Summary
- Functional Summary
- Goals
- Living Arrangement
- Social Profile

Individual Budget will include:

- Costs of services

At assessment each Participant will be given a Handbook containing relevant service information such as code of conduct; advocacy; complaints etc. Staff will also complete Assessment Checklist

Reviewed & updated

## Accessing Services Policy

*Aged Care Quality Standard 1 - Consumer Dignity and Choice; 2 - Ongoing Assessment and Planning*

*NDIS Practice Standards 1- Rights; Provision of supports 3 & 4*

Participants are referred to Wellington Multi Service Centre Inc, by the My AgeCare Portal. Service users and carers are not excluded from access to the service on the grounds of their gender, marital status, religious or cultural beliefs, political affiliation, disability, ethnic background, age, sexual preference, geographical location or circumstances of the carer.

### Service User Involvement

Service users (and/or their representatives) are consulted about the service provision requested. Eligibility is determined in the first instance by My AgedCare and then further discussions are held with the Manager regarding special requirements and availability.

### Referrals to Other Agencies

All services are monitored on an ongoing basis to ensure that it is meeting the needs of the individual. Once a year each service user is reviewed to identify any changes in their service requirements. If service users provide feedback to volunteers or the staff, their service plan is updated. Where necessary, or if unable to meet clients need service users are referred to other providers. This process is described in the Consumer, Dignity, Autonomy and Choice Policy(3<sup>rd</sup> last dot point)

We provide information regarding other local community services to service users if requested.

### Safe Environment

The organisation, staff and volunteers of Wellington Multi Service Centre ensure that all services are provided in a safe environment in line with Work Health and Safety requirements and our duty of care to service users, staff and volunteers. Sometimes in the service user's home this is difficult to achieve. In these cases staff and volunteers are made aware of the need to ensure the safety of the service user and themselves. This is also mentioned in the Physical Resource Policy

## **Eligibility and Access to Services**

### Eligibility Criteria

The Commonwealth Home Support Program (CHSP) is a major provider of essential community care services to aged people and their carers. The Commonwealth Home Support Program (CHSP) main objective is to promote and enhance the independence of people by providing a comprehensive, coordinated and integrated range of basic maintenance and support services for older people and their carers. Under the CHSP, Wellington Multi Service Centre provides Meals on Wheels, Social Support and Respite for service users and carers within the Orana Far West.

Under the Nation Disability Insurance Scheme (NDIS) participants must have a current Support Plan listing the following Core Supports:

Assistance with Daily Personal Activities: Assist with and or supervising personal tasks of daily life to enable the participant to live as autonomously as possible.

Assistance with Travel/ Transport Arrangement: Enables participants to access disability supports outside their home, and to pay for transport that helps them to achieve their planned goals.

Household Tasks: Assist with household tasks enables the participant to maintain their home environment. This may involve undertaking essential tasks that the participant is not able to undertake.

Participation in Community, Social and Civic Activities: This enable the participant to pursue recreational activities and engage in the community.

Wellington Multi Service Centre Inc, supports our participants to be independent at home and in community, thereby enhancing their quality of life and provide flexible, timely services that respond to the needs of consumers.

#### Assessing Eligibility

An eligibility screen is completed by a home visits, to discuss with service user their needs for service provision. This process is further described in our Assessment and Re assessment Policy.

#### Recording a Waitlist

A list is maintained of service users who are waitlisted for any service. The manager is responsible for maintaining the list. Service users are advised of their position on the waitlist every three months by telephone by the manager.

#### **Service Users with Special Needs**

We endeavour to provide Aboriginal and Torres Strait Islander service users with an appropriate services. We work closely with local agencies including the Aboriginal Support Worker at the hospital and the local Aboriginal Health Service (WACHS) to ensure that the services provided are appropriate. The staff are to ensure that the information regarding the assessment, review and Care plans are clearly explained and understood by the service user and their family.

If a person does not speak English an interpreter is used. If the person has a family member with them, they are used as the interpreter if this is acceptable to the service user. Other options for interpreter services include a staff person or the Telephone Interpreter Service.

In cases where the service user does not read or write, the staff makes sure that the information in the brochure, and information regarding the assessment, reviews and service plan is clearly explained by using easyread method.

The staff are to ensure that the information regarding the assessment, review and Care plans are clearly explained and understood by the service user and their family.

When necessary, the staff identifies the need for support for service users with dementia or other special needs groups, such as those with disability or specific care needs. We provide information for volunteers in how to work with people with dementia or people with disability or specific needs. We make every effort to make sure that services are delivered in an appropriate and sensitive way to all people, and in particular, to people with dementia and other special needs.

A full list of definitions of special needs is included in Community Understanding and Engagement Policy.

#### **Team Communication**

Committee member and Manager may discuss service issues including service user needs and also ad hoc discussions regarding service users at monthly committee meetings, as required. Meetings are minuted and provide staff with an opportunity to discuss service delivery, service users changing needs and provide staff development.

#### **Case Closure**

Service users can choose to cease services at any time. We always offer information on alternative services and will make a referral if they wish us to do so.

### **Termination, Withdrawal or Change of Services**

Services may be terminated, withdrawn or changed in the following circumstances:

Work health and safety risk to staff/volunteers that can't be rectified - A work health and safety risk can include dangerous access to a person's house or dangers inside the house or home environment. These are identified through discussion with the service user during assessment or when a volunteer visits the home and identifies a risk. Examples of these WHS risk issues could include; dangerous steps, verandahs, internal flooring, dangerous roofs/ceilings, dangerous dogs and smoking in the immediate vicinity of staff.

Where a WHS risk is identified, the staff works with the service user to remove or reduce the risk to an acceptable level. If this cannot be achieved through reasonable means the Manager can decide to cease the provision of services to the service user where Volunteers/staff are at risk. All consultation, discussions and actions are documented in the service user record.

Inappropriate client behaviour - Inappropriate client behaviour includes any behaviour that causes staff or volunteers to feel that their safety is threatened. This can include direct physical actions or threats, sexual suggestions, wilful exposure and foul language. If inappropriate service user behaviour occurs staff/volunteers immediately leave the service user's home and report the behaviour to the staff verbally and document in clients progress notes. Manager is to contact client by writing or face to face and discuss issues and to come to a resolution either Termination of service or a Code of Behaviour Agreement. If, clients behaviour continues after the agreement is signed, the Manager can decide to cease the service/s.

Change in participants circumstances that influence eligibility - Where clients circumstances or condition changes to the point that services are no longer required the Manager can decide to change or cease the provision of services to the service user. Any changes required are discussed fully with the service user, and their carer if appropriate, and are fully documented on the assessment form and in the service user progress notes.

The agency ceases to deliver services - If we cease to deliver services, service users are given maximum notice that the services are ceasing and they are provided with support to access other services, including referral processes.

No current NDIS plan- this may occur when one plan is completed and not replace with another plan.

### **Process for Termination, Withdrawal or Change of Services**

If any service is terminated, withdrawn or changed the following process applies:

1. Give the service user as much notice as possible with a minimum of 1 (one) month
2. Explain face to face to the service user, and their carer/family if appropriate, why the services are being ceased or changed and any arrangements required for the service user
3. Provide written notice if appropriate
4. Attempt to find another agency to provide the meals service without any break
5. If no other agencies are available identify other options in consultation with the service user
6. Advise the service user that they can appeal to the Manager, the decision to terminate, withdraw or change their services
7. Assist the service user in appealing if necessary
8. Record all relevant information in the service user records.

**Service Continuity**

Our organisation complies with the CHSP Funding Agreement provisions that relate to ensuring continuity of service. As part of our risk management processes, we have developed Activity Continuity Plans which cover:

- Transition out of services – for example, to transition services to another service provider where the Aged Care Funding Agreement has expired or is terminated; and
- Management of serious incidents, particularly management of natural disasters – for example, to continue delivery of services if a fire or flood occurs.

**Monitoring and Evaluating Service Access Processes**

Service access processes and systems are regularly audited as part of our audit program and staff, service users and other stakeholders are encouraged to provide ongoing feedback on issues and areas where improvements can be made. (see Feedback & Complaints Policy and Continuous Improvement Policy).

Reviewed & updated



# CLIENT CENTRED APPROACH

*Aged Care Quality Standard 1 - Consumer Dignity and Choice; 2 - Ongoing Assessment and Planning*

*NDIS Practice Standards 1- Rights;*

## Purpose

This policy governs the use of a person-centred approach. A person-centred approach ensures clients are at the centre of planning and decision making. This approach works with clients to identify their needs, aspirations and strengths and to develop plans with each person to achieve what is important to them now and into the future.

## Scope

Wellington Multi Service Centre Inc., is committed to the aim of a person centred approach and to understand what each individual person wants and needs to live their own, personally defined, good life.

## Policy Statement

A person centred process involves listening, thinking together, coaching, sharing ideas and seeking feedback. This process is ongoing to make sure we're always supporting each person towards their personal goals, even as they evolve and change.

## Guiding Principles

The following principles govern Wellington Multi Service Centre Inc. person-centred approach.

1. **Person is at the centre:** The client will be present and at the centre of decision making and planning that assists them to achieve their preferred lifestyle.
2. **Personal Priorities and Strengths:** Support will be provided to ensure services are responsive and personalised to each client needs, wants, aspirations and such supports build upon their strengths.
3. **Partnerships:** Family, friends, significant others and other service providers, who have a commitment to a better life for the client, will be actively involved in the development and implementation of the person's plan, according to the wishes of the client. If the client is unable to make these decision then the designated substitute decision maker may take on this role.
4. **Support and Development of Staff:** Wellington Multi Service Centre Inc., will provide ongoing support and development to staff to ensure consistent quality outcomes are achieved for each client.
5. **Sustainable:** The ongoing sustainability of a person-centred approach will be supported through continuous review and improvement, professional development, and exploring individual options for each person.

## Objectives

1. Each person will be provided with the opportunity to communicate and achieve their personal goals and aspirations.
2. Wellington Multi Service Centre Inc., will establish clear procedures on how a person-centred approach will be embedded within the services.
3. Wellington Multi Service Centre Inc., will engage and empower staff to implement person-centred service delivery and support.

4. Each client will have a plan developed to guide the achievement of their needs, aspirations and wishes for their future, and this plan will build upon the strengths of the individual.
5. Staff will be supported to understand and align with the values and behaviours of a person-centred approach.
6. Support participants to engage with family, friend and the chosen community groups as desired by the participants
7. Wellington Multi Service Centre will not replace any inkind supports delivered by friends, family or community unless requested by the participant
8. Support participants in promoting and upholding their human rights

### **Decision Making**

All clients have the right to make their own decisions regard their life and whom they want to be their substitute decision maker in the event that medical treatments and/or intervention becomes necessary, clients are to notify staff of their decision and document this on the “client consent form”.

Reviewed & updated

## **Abuse (CLIENTS,CARERS, VOLUNTEERS AND STAFF)**

*Aged Care Quality Standard 1 - Consumer Dignity and Choice; 2 - Ongoing Assessment and Planning*

*NDIS Practice Standards 1- Rights;*

### **Purpose**

The purpose of this policy is to guide commitment of all staff of Wellington Multi Service Centre Inc., in preventing and responding appropriately to the abuse of clients, volunteers and staff. In addition, Wellington Multi Service Centre Inc. will act in the best interests of our clients, volunteers and staff who has been abused by upholding their rights and ensuring that the dignity and respect of all people accessing services is upheld at all times.

That staff are protected and supported by the Wellington Multi Service Centre Inc. policy governing the management of suspected or actual cases of abuse of client, volunteer or co-worker, particularly staff who may be unwilling to report abuse for fear about their own safety, should the perpetrator of the abuse become aware.

### **Key principles of working with people**

Abuse of people is a human rights issue. The Wellington Multi Service Centre Inc., recognises that abuse of people does exist in the community and supports the NSW Government in promoting the general principle that people have the right to:

- be treated with dignity and respect.
- make their own decisions and choices.
- live in a safe environment.
- access the protections available to other adults in the community.

Wellington Multi Service Centre Inc., also recognises that in the course of its work, staff may encounter potential, suspected and alleged abuse situations involving people and sometimes carers.

The following principles guide Wellington Multi Service Centre Inc., in responding to the abuse of people living in community settings:

- The views of the person are taken into account even when they cannot make their own decisions.
- Information is provided about all relevant options available to them, including services trained to support and empower them and equipped to help them end abuse when it occurs.
- Respect is demonstrated by encouraging and assisting decision making by offering choices, including respecting the decision not to act and refuse services if they are competent to make that decision.
- Responses will be in the interests of the person at risk or who has been abused and focussed on ensuring safety and ongoing protection from violence and abuse.
- Many forms of abuse of people are crimes. Legal remedies and protections are available for older people who have experienced: violence, sexual assault, physical assault, domestic violence, abuse, threats, fraud, neglect, stalking, intimidation and harassment.
- Responses to the abuse of people will be consistent with the NSW Charter of Victims Rights (Refer to Appendix 5) which is accompanied by the NSW Code of Practice for the Charter of Victims Rights.
- Responses to the abuse of people will as far as possible take account of the needs of the older person in relation to Aboriginality, culture, disability, language, religion, gender and sexuality.

- The needs of the person at risk of abuse or who has been abused and the abuser must be kept separate at all times. This is particularly important in situations where the abuser has been the victim's carer or has complex needs of their own.
- When the safety of others is involved, confidentiality cannot be offered unconditionally. In situations where a report to NSW Police is required, such as criminal activity, the consent of the person involved is not necessary.
- Any person should be able to report abuse of people without fear of retaliation or retribution and in a supportive environment.

### **Commitment**

Wellington Multi Service Centre Inc., is committed to dealing effectively with the abuse of clients, volunteers and staff and is committed to:

- Creating a climate of trust, where staff are encouraged, comfortable and confident about identifying and responding to the abuse of clients, volunteer and co-workers
- Protecting staff from any adverse action when making a report.
- Developing a process to deal with reports thoroughly and taking appropriate action to address the reported abuse and prevent it from re occurring.
- Providing resources and training for staff about how to identify and respond to the abuse of clients, volunteer and co-workers.
- Properly managing any workplace issues that the allegations identify or that result from a report or any other identified problem (e.g. staff safety).
- Working collaboratively within the agency and across agencies to achieve the best outcome for the for clients, volunteers and co-workers and prevent abuse from reoccurring
- Reassessing / reviewing the policy periodically to ensure it is relevant and effective.

### **Identifying abuse**

All staff, volunteers play an important role in identifying suspected abuse and protecting people by responding to suspected cases of abuse. Wellington Multi Service Centre Inc., recognises five (5) forms of abuse: financial abuse, psychological abuse (including social isolation), neglect, physical abuse and sexual abuse. This policy embodies the view that social isolation is a key risk factor and that people experiencing abuse often lack social connection. The policy also recognises that:

- More than one abuse type can coexist.
- The presence of one or more indicators does not mean that abuse has occurred, but does require staff to be observant and hold knowledge about abuse types, signs and indicators.
- Indicators of abuse are not always obvious and can vary, but the relationship between staff/volunteer and the client means they are best placed to recognise behavioural changes that may be a sign that a client is being abused.
- Staff have a duty of care to report incidents, suspected incidents and/or changes in well-being to their manager.

### ***Abuse types and indicators financial abuse***

Financial abuse is the illegal or improper use of a person's property or finances. This includes misuse of a power of attorney, forcing or coercing a person to change their will, sign documents, taking control of a person's finances against their wishes and denying them access to their own money, stealing goods and money.

**Indicators of financial abuse may include:**

- Unexplained or sudden inability to pay bills, significant bank withdrawals, and significant changes to wills, unexplained disappearance of possessions, for sale sign on the street, lack of funds for food or clothing, disparity between living conditions and money, recent addition of a signature on a bank account, stockpiling of unpaid bills, carer making excuses for not providing receipts from an ATM.

### ***Neglect***

Neglect is a term used to describe the failure of a carer or responsible person to provide the necessities of life to a person. Necessities of life are usually considered to be adequate food, shelter, clothing, medical or dental care. Neglect may also involve the refusal to permit others to provide appropriate care for an person.

Indicators of neglect may include:

- Dehydration, poor skin integrity, malnutrition, inappropriate clothing, poor hygiene, unkempt appearance, under/over medication, unattended medical or dental needs, exposure to danger or lack of supervision, absence of required aids, exposure to unsafe, unhealthy, unsanitary conditions, an overly attentive carer in the company of others.

### ***Psychological abuse (including social isolation)***

Psychological abuse is the infliction of mental stress involving actions and threats such as verbal abuse, threats, bullying, intimidation and harassment, social isolation, fear of violence, deprivation and feelings of shame and powerlessness. Examples include treating a person as if they are a child, engaging in emotional blackmail and preventing contact with family and friends and/or access to services and community activities, religious (spiritual) and cultural events.

Indicators of psychological abuse may include:

- Depression, demoralisation, feelings of helplessness, disrupted appetite or sleeping patterns, tearfulness, excessive fear, confusion, agitation, resignation, unexplained paranoia, cancelling of services by a live in carer.

### ***Physical abuse***

Physical abuse involves the infliction of physical pain or injury, or physical coercion. Physical abuse can also include physical acts such as hitting, beating, biting, scratching, shaking, arm twisting, scalding, slapping, pushing, punching, kicking, burning, restraining such as tying a person to a chair or bed, locking an older person in a room and overuse or misuse of medications.

**Indicators of physical abuse may include:**

- Internal and external injuries such as bruises on different areas of the body, lacerations particularly to mouth, lips, gums, eyes or ears; abrasions; scratches; choke marks and welts; burns inflicted by cigarettes, matches, iron, rope; immersion in hot water; sprains, dislocations and fractures; evidence of healing bones, hair loss (perhaps from pulling); missing teeth; eye injuries, scalding through immersion, pressure sores through the use of physical restraint.

### ***Sexual abuse***

Sexual abuse is a broad term used to describe a range of sexual acts where the victim's consent has not been obtained or where consent has been obtained through coercion. Examples can include non-consensual sexual contact such as rape, digital rape, indecent assault including inappropriate sexual

handling or touching, exposure to pornography against their will, forced nudity, cleaning or treating the older person's genital area roughly or inappropriately.

**Indicators of sexual abuse may include:**

- Trauma around genitals, rectum or mouth; injury to face, neck, chest, breasts, abdomen, thighs or buttocks; presence of sexually transmitted infections; human bite marks and bruising, anxiety around the perpetrator and other psychological symptoms, torn or bloody underclothing or bedding, difficulty walking or sitting, or discomfort when bathed or toileted.

***Risk factors***

Some people may be at heightened risk of abuse. Vulnerability/risk factors can be present for both the person at risk of abuse and the alleged abuser. Understanding the local demographic will help identify any interagency responses in terms of preventative action.

Generally people are at risk where the following factors are present:

- Socially isolated from neighbours, family and/or community.
- Confused about their property, belongings and/or surroundings.
- Vulnerable to other persons taking advantage of them because of deteriorating health, cognitive decline, dementia and capacity issues
- Physically or verbally violent/aggressive because of progressively worsening conditions such as dementia.
- A history of family dysfunction and abuse.
- Insecure accommodation.
- Substance abuse and gambling.
- Financial difficulties.
- Personality and/or behaviour changes due to illness and some other progressively worsening condition.
- Relative powerlessness because of diminished ability to advocate effectively for themselves or to modify their environment.
- A history of domestic violence where often women are the victims and have failed to report, for many years.
- Cultural issues and dependency.

Carers and family members play a crucial role in caring for people but may become abusive in certain situations such as the stress of the carer role. Stress factors can include, but not be limited to concerns from:

- Financial, emotional and physical situations.
- Sleep deprivation.
- Challenging behaviours from the person being cared for.
- Lack of support from family, community and the service system.
- Substance abuse and gambling.
- Cognitive decline of the carer.
- Cultural issues.
- Lack of skill in the caring role.

**Key considerations in responding to the abuse**

***Duty of Care***

When the abuse of a person is recognised, disclosed or suspected, staff have a duty of care to take reasonable action to ensure others are not harmed in the course of their work and to prevent abuse

from reoccurring. In responding to abuse the priority is to provide an appropriate, adequate and timely response, with a focus on the immediate safety of the person, the carer (if applicable) and the staff member. Staff should only provide advice which is within their competence and position responsibilities.

### **Information sharing**

Privacy and confidentiality refers to protecting the information provided to a staff member by a client in the context of a professional relationship.

Under federal and NSW state privacy legislation privacy principles relate to collection, usage, disclosure and storage of personal information. In the case of managing suspected or actual abuse of people, staff have an obligation to gain the persons consent in sharing information. The person has the right to decide what personal information is to be revealed to someone else outside the agency.

There are some exceptions where the requirement of confidentiality can be lawfully overridden and complete confidentiality cannot always be guaranteed to any person who raises a concern about the abuse of a person. These situations include where the agency believes, on reasonable grounds that the use and disclosure is necessary to prevent or lessen a serious and imminent threat to the life or health of the individual concerned of another person. This includes the older person themselves, a relative, a fellow worker or a member of the public.

#### **Situations include:**

- There is an obligation to report a crime which may require a criminal investigation by the NSW Police.
- Disclosure may be required when in the person's interest:
  - The person is believed to lack capacity or insight to make an informed choice.
  - Where the person is suicidal and/or there is a concern for the safety and wellbeing of the person and others, such as staff/volunteer.
  - There may be a duty to warn a third party who is in danger and/or a wider public interest.

### **Emergency response**

Many forms of abuse are crimes. Given the exemptions listed under privacy legislation, there are situations where a report to Police or other emergency service should be actioned without delay.

Many forms of the abuse of people constitute domestic and family violence. Domestic violence involves violent, abusive or intimidating behaviour carried out by a partner, carer or family member to control, dominate or instil fear. It includes physical, emotional, psychological, financial, sexual or other types of abuse.

The current definition of domestic violence, under Section 5 of the *Crimes (Domestic and Personal Violence) Act 2007*, includes relationships involving those dependent on the ongoing paid or unpaid care of the other person, as well as family members, partners, those living in the same household, and those in an intimate relationship.

Regardless of the victim's views, agencies must ensure workers report to Police any instances where:

- The abusive situation results in serious injury inflicted on the victim.
- The perpetrator has access to a gun and is threatening to cause physical injury to any person.
- The perpetrator is using or carrying a weapon (including guns, knives or any other weapon capable of injuring a person) in a manner likely to cause physical injury to any person or likely to cause a reasonable person to fear for their safety.
- An immediate serious risk to individual/s or public safety exists.
- Workers are threatened.
- Protecting evidence for a Police Investigation.

### ***Mental Capacity and Consent***

In NSW there is a legal presumption that all adults have the mental (cognitive) capacity and ability to make their own decisions until proven otherwise. Mental capacity is the ability to understand an act or a decision and its consequences. Impaired mental capacity can make an older person susceptible to abuse.

Part of the response to abuse of a person is an assessment of the person's needs and will require consultation with the person, other relatives/carers or external agencies (such as service providers) who deliver services to the person in their home.

Staff within Wellington Multi Service Centre Inc., are to be aware that capacity to make informed decisions is critical and will consider issues of mental capacity, undue influence and consent when determining the most appropriate response to reports of actual, potential and suspected abuse.

A person lacking capacity to act or make decisions may need a guardian or financial manager if they have not appointed an enduring power of attorney or enduring guardian while they are capable. (See section 8 about staff roles).

### ***Cultural Considerations in working with people***

Wellington Multi Service Centre Inc., recognises the diversity of our community and respects the cultural norms that influence how families function and the place of the person within the family context. Culture, language, ethnicity or religion can impact on a person's freedom to make decisions. Cultural factors also influence how all forms of abuse are viewed, and specific strategies and responses to abuse of people should address such differences.

## **Managers and Staff roles and responsibilities**

### **General Procedure**

Managers play a lead role in identifying and responding to the abuse of people in accordance with policies and protocols. Consideration of safety, protection, consent, confidentiality and duty of care issues. In an emergency situation, contacting the NSW Police and/or other emergency services and protect evidence.

In a situation of witnessed, suspected or disclosed abuse that **does not** require an emergency response:

- The staff member or volunteer who identifies the situation will tell the person of their responsibility to report concerns about consumer well-being to their supervisor
- The staff member or volunteer will:
  - Pass on all relevant information to their supervisor including what happened, what was seen, said and done
  - Complete an Accident, Incident and Hazard report
  - Participate in debriefing

The Manager will decide the most appropriate action based on the nature and extent of the abuse and the urgency and risk of the situation. This may include:

- Follow up to collect information about the situation and the mental capacity and wishes of the victim
- Seeking advice from a specialist agency on the best way to respond
- Adjusting service provision to suit the needs of the situation
- Immediate referral to Police, Ambulance or Mental Health team.



The Manager will ensure that documentation is completed and updated so that debriefing can be made available.

**More information regarding Abuse:**

NSW Elder Abuse Helpline and Resource unit – 1800 628 221 or  
<http://elderabusehelpline.com.au/for-everyone/what-is-elder-abuse>

The Aged Care Rights Service (TARS) - 02 9281 3600 or <http://www.agedrights.asn.au/nsw/>

Older Persons Advocacy Network (OPAN) – 1800 700 600 (131 450 Interpreter service) or  
<http://www.opan.com.au/>

Seniors Rights Service - 1800 424 079  
<http://seniorsrightsservice.org.au/>

The Aged Care Quality and Safety Commission - 1800 951 822  
 Email: [Agedcarequality.gov.au](mailto:Agedcarequality.gov.au)

Disability Information Advocacy Service (DIAS) - 6332 2100

National Disability Insurance Scheme (NDIS) – 1800 800 110 or 1800 035 544

**Reviewed & updated**

## Advocacy

*Aged Care Quality Standards 1 - Consumer Dignity and Choice; 2 - Ongoing Assessment and Planning; 4 - Services and Supports for Daily Living; 6 - Feedback and Complaints*

*NDIS Practice Standards 1 Rights*

### **Policy Statement**

An advocate is a person who, with the authority of the consumer, represents the participants' interests. Participants may use an advocate of their choice to negotiate on their behalf. This may be a family member, friend or advocacy service.

Wellington Multi Service Centre Inc., will ensure that all participants are made aware that they can have an advocate to assist them in understanding or managing services provided. An advocate could be used during assessments, reviews, in making a complaint or in other communication with Wellington Multi Service Centre Inc.,

### **Policy**

Participants wishing to use an advocate should inform Wellington Multi Service Centre Inc., at intake, assessment or reviews, if they would like to nominate an advocate. This must be documented on the Advocate form. Participants have the right to change their advocate at any time and should inform Wellington Multi Service Centre Inc., if they wish to change their advocate.

Staff should make sure participants are aware of their right to use an advocate, and should regularly remind participants of this option. This information is available in the Consumer Handbook and should be explained at formal assessments and reviews and through informal discussion.

Information around formal advocacy can be attained from the following external sources:

- The Aged Care Rights Service (TARS) - 02 9281 3600 or <http://www.agedrights.asn.au/nsw/>
- Seniors Rights Service - 1800 424 079  
<http://seniorsrightsservice.org.au/>
- Older Persons Advocacy Network – 1800 700 600  
<http://www.opan.com.au/>
- Disability Information Advocacy Service (DIAS) - 6332 2100
- National Disability Insurance Scheme (NDIS) – 1800 800 110 or 1800 035 544

Reviewed & updated

# Support Planning Policy

*Aged Care Quality Standards 1 - Consumer Dignity and Choice; 2 - Ongoing Assessment and Planning; 4 - Services and Supports for Daily Living*

*NDIS Practice Standards 1 Rights; 3- Provision of Support*

## **Policy Statement**

Wellington Multi Service Centre Inc., will abide by the Aged Care Quality Standards and NDIS Practice Standards, that recognise each client of our organisation has unique interests, preferences, personal goals and support needs. The policy has been framed around meeting individuals' needs. The Support Plan/care plan will be developed with the consumer (and their advocate where nominated) and will ensure a focus on wellness and reablement.

## **Policy**

Aged clients are referred by the My Aged Care with basic information. Wellington Multi Service Centre Inc., will develop a care plan with the clients at the initial assessment of consumer, and their advocate where nominated. Plans for NDIS participant are developed with the participant and a NDIS representative. Support Plan and Service Agreement will be in a format that is meaningful to the person and represents their goals.

Both the care plans and support plans will include the consumer/participants preferences and will be:

- Goal orientated and outcomes based
- Recognise and address the requirements of people with complex care needs
- Promote social independence and quality of life
- Client Risk Assessment
- Considerate of special needs groups
- Centred on a consumer's wellness and reablement.
- The type of service
- The duration and frequency of service
- Number of services
- Who will deliver the service (for example volunteers, staff member)
- Cost of the service is explained at assessment depending on consumers status (ie, pensioner/ self-funded retiree or NDIS participant
- Continuity of support can remain in place when a participant has a change in circumstances or chooses to move to another provider.
- The circumstances under which a service may be suspended or withdrawn.

Client Risk Assessment are carried out with each participant/client as part of the Service assessment and the NDIS Service agreements. Reassessment will be carried out annually or whenever a participant plan is changed. The client risk assessment can also take place if clients move house or health declines or needs change. New client risk assessments will be completed with each new assessment or service agreement showing progress of old risks and any new risks are planned and implemented. If a risk is found to be significant or hinders service provision regular 6 months reviews will be conducted with the client

Each person's Support/Care Plan will be discussed annually with the consumer/participants or as needs/goals or circumstances change or as a request is made. When annually reviewing Support/Care Plans and Assessment/ Service Agreements, the participant's progress notes, activity sheets, any feedback or complaints are discussed and joint resolution is made and support/care plan is updated to reflect any changes.

Reviews can be conducted through more informal discussion, or phone contact, if this suits the participant/family. The agreed outcomes of the discussion will be documented as a partial or full review.

As well as including the above information Wellington Multi Service Centre Inc., will expand Support Plans to document the consumer's preference and agreed procedure should they not respond to a scheduled visit

Reviewed & updated

## Carers Policy

*Aged Care Quality Standards 1 - Consumer Dignity and Choice; 2 - Ongoing Assessment and Planning  
NDIS Practice Standards 1 – Rights*

### **Policy Statement**

The Carer Gateway<sup>3</sup> is the new national entry point for carers of those who have a disability, chronic illness, dementia, mental illness, an addiction or are frail aged. Wellington Multi Service Centre Inc., will ensure that carers are supported to access information and assistance via the gateway and to access services where eligible.

### **Policy**

Carers can be family members or friends, they can be parents, children, siblings, grandparents or neighbours. Some carers look after another person 24 hours a day and help with daily living activities, while other carers look after people who are predominantly independent but need help with some everyday tasks.

Carers make a significant contribution to the lives of the people they care for and an important economic contribution to the community. The CHSP & NDIS reflects priorities and principles identified within the National Carer Recognition Framework and *The Carer Recognition Act (Commonwealth) 2010*.

Wellington Multi Service Centre Inc., service provision embodies the principles incorporated in the *Statement for Australia's Carers* under the *Carer Recognition Act 2010*, including the following:

1. All carers should have the same rights, choices and opportunities as other Australians, regardless of age, race, sex, disability, sexuality, religious or political beliefs, Aboriginal or Torres Strait Islander heritage, cultural or linguistic differences, socio-economic status or locality.
2. Children and young people who are carers should have the same rights as all children and young people and should be supported to reach their full potential.
3. Carers should be acknowledged as individuals with their own needs within and beyond the caring role.
4. The relationship between carers and the persons for whom they care should be recognised and respected.
5. Carers should be considered as partners with other care providers in the provision of care, acknowledging the unique knowledge and experience of carers.
6. Carers should be treated with dignity and respect.
7. Carers should be supported to achieve greater economic wellbeing and sustainability and, where appropriate, should have opportunities to participate in employment and education.
8. Support for carers should be timely, responsive, appropriate and accessible. All CHSP service providers are to take all practicable measures to ensure that:
  - (a) their officers, employees and agents have an awareness and understanding of the *Statement for Australia's Carers*; and

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<sup>3</sup> <https://www.carergateway.gov.au/about-us>

(b) they, and their officers, employees and agents, take action to reflect the principles of the Statement in developing, implementing, providing or evaluating care supports.

Carers can call the Carer Gateway on **1800 422 737** by phone Monday – Friday between 8am and 6pm.

Reviewed & updated

## Community engagement

*Aged Care Quality Standards 1 - Consumer Dignity and Choice; 2 - Ongoing Assessment and Planning; 4 - Services and Supports for Daily Living. NDIS Practice Standards 1 – Rights*

### Policy Statement

Wellington Multi Service Centre Inc., will ensure that it engages with the community on an ongoing basis. Community connections and ongoing networking is important and encourages transfer of information and shared working relationships.

### Policy

Wellington Multi Service Centre Inc., will work on their commitment to community engagement in the following ways:

- Community events will be advertised or promoted in organisational newsletters/information to inform participants of what is happening in their community and ensure they have an opportunity to participate
- Wellington Multi Service Centre Inc., will attend expos and information days and other events where appropriate, to inform the community of what is available
- Wellington Multi Service Centre Inc., will regularly promote the services available in local media (radio, newspaper, social media) where possible and where appropriate to inform the community of what is available
- Wellington Multi Service Centre Inc., will participate in community events where appropriate (for example, representation at expos etc)
- Wellington Multi Service Centre Inc., staff will attend network or interagency meetings in the community to ensure they have an opportunity to engage with other businesses or services
- Wellington Multi Service Centre Inc., staff will attend community forums, consultation meetings and other events where appropriate
- Wellington Multi Service Centre Inc., will respond to community surveys and consultation where appropriate
- Wellington Multi Service Centre Inc., will encourage people of all ages to volunteer for the service where appropriate
- Wellington Multi Service Centre Inc., will work collaboratively with other community service organisations, businesses, clubs, groups and council to provide information and share information and resources and knowledge where appropriate.

Reviewed & updated

# Consumer rights

*Aged Care Quality Standard 1 - Consumer Dignity and Choice*

*NDIS Practice Standards 1 - Rights*

## **Policy Statement**

Wellington Multi Service Centre Inc., will ensure that each consumer of the service understands their rights and responsibilities and feels comfortable to speak honestly and openly to their service provider.

Wellington Multi Service Centre Inc., will treat each consumer with respect and seek to understand different needs, values, beliefs and characteristics. Wellington Multi Service Centre Inc., understands that there will be varied social, cultural, linguistic, spiritual, psychological and medical needs which influence each consumer's care needs and will aim to spend time speaking with, and documenting, specific personal circumstances and needs. The organisation also recognises that the following groups have experienced exclusion and discrimination and will make every effort to cater for specific needs of these groups identified under the Aged Care Act 1997:

- people who identify as Aboriginal and Torres Strait Islander
- people from culturally and linguistically diverse backgrounds
- people who live in rural and remote areas
- people who are financially or socially disadvantaged
- people who are veterans of the Australian Defence Force or an allied defence force including the spouse, widow or widower of a veteran
- people who are homeless, or at risk of becoming homeless
- people who are Gender or Sexually Diverse
- people who are Care Leavers (which includes Forgotten Australians, Former Child Migrants and Stolen Generations)
- parents separated from children by forced adoption or removal.

*(NB: The Department of Health acknowledges that this list is not exhaustive and other groups include people with disability; people with a mental problem or mental illness; people with a cognitive impairment and people with dementia).*

Each consumer will be encouraged to access an advocate (see Advocacy Policy) where required and to provide feedback about the services they receive. All feedback and complaints will be dealt with fairly and in a transparent and open manner and will prompt ongoing improvements.

## **Policy**

Wellington Multi Service Centre Inc., will encourage consumer choice and engagement in some of the following ways:

- Each consumer will have a Care Plan developed with them (and/or their representative/advocate where requested) which is person-centred and meets their individual personal needs
- The Support Plan will identify how a consumer wishes to be treated and outlines any specific diversity or cultural needs
- Diversity and Cultural training will be provided to staff and volunteers of the service to ensure that there is an increased awareness of varied needs. A record of staff completing training will be reordered in our Training Register along with method of training.
- Participants will be involved in the development of training and informal and formal feedback will inform training
- Wellington Multi Service Centre Inc., will address any discriminatory practices which adversely affect a consumer's confidence or self-worth and encourage a culture of inclusion and diversity.

As well as the above, Wellington Multi Service Centre Inc., will ensure that the Charter of Rights and Responsibilities – Home Care is provided to each consumer in a manner appropriate to their

cultural/communication needs, displayed at the facility and included in newsletters/websites and other forms of communication.

Each consumer will be provided with a copy of the Charter of Rights and Responsibilities – Home Care, upon entry to the service. As well as this, the service will display the Charter of Rights and Responsibilities- Home Care at the facility and in the Consumer Handbook.

The following Charter of Rights and Responsibilities – Home Care was provided by the Department of Health website<sup>4</sup>.

## **1 Care recipients' rights - Home Care**

### *General*

(1) Each care recipient has the following rights:

- (a) to be treated and accepted as an individual, and to have his or her individual preferences respected
- (b) to be treated with dignity, with his or her privacy respected
- (c) to receive care that is respectful of him or her, and his or her family and home
- (d) to receive care without being obliged to feel grateful to those providing the care
- (e) to full and effective use of all human, legal and consumer rights, including the right to freedom of speech regarding his or her care
- (f) to have access to advocates and other avenues of redress
- (g) to be treated without exploitation, abuse, discrimination, harassment or neglect.

## **2 Care recipients' responsibilities - Home Care**

### *General*

(1) Each care recipient has the following responsibilities:

- (a) to respect the rights of care workers to their human, legal and workplace rights including the right to work in a safe environment
- (b) to treat care workers without exploitation, abuse, discrimination or harassment.

### *Care and services*

(2) Each care recipient has the following responsibilities:

- (a) to abide by the terms of the written Home Care agreement
- (b) to acknowledge that his or her needs may change and to negotiate modifications of care and service if his or her care needs change
- (c) to accept responsibility for his or her own actions and choices even though some actions and choices may involve an element of risk.

### *Communication*

(3) Each care recipient has the following responsibilities:

- (a) to give enough information to assist the approved provider to develop, deliver and review a Care Plan
- (b) to tell the approved provider and their staff about any problems with the care and services
- (c) before the care recipient changes approved providers, to tell the approved provider and their staff of the day the care recipient intends to cease to receive home care services from the approved provider.

### *Access*

(4) Each care recipient has the following responsibilities:

- (a) to allow safe and reasonable access for care workers at the times specified in his or her Support Plan or otherwise by agreement

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<sup>4</sup> [Charter of Rights](#)



(b) to provide reasonable notice if he or she does not require home care to be provided on a particular day.

#### *Fees*

(5) Each care recipient has the responsibility to pay any fees as specified in the agreement or to negotiate an alternative arrangement with the provider if any changes occur in his or her financial circumstances.

#### **NDIS Participants Rights**

Each participant accesses support that promote, uphold and respect their legal and human right and is enabled to exercise informed choice and control. The provision of supports promotes, upholds and respects individual right to freedom of expression, self-determination and decision-making, by:

- Person Centre Support
- Individual values and beliefs
- Privacy and Dignity
- Independence and informed choice
- Free from Violence, Abuse, Neglect, Exploitation and Discrimination

Reviewed & Updated:

# Consumer Dignity, Autonomy and Choice

*Aged Care Quality Standard 1- Consumer Dignity and Choice*

*NDIS Practice Standards 1 Rights*

## **Policy Statement**

Wellington Multi Service Centre Inc., will ensure that all participants are treated with dignity and respect and are free to make choices about the care and services provided and the way in which they live their life.

Where participants choose to take risks, they will be informed about risk and the consequences and encouraged to be independent and empowered to make choices.

Information provided to participants will be current, accurate and communicated in a way which supports understanding.

The organisation is committed to a culture of inclusion, acceptance and respect and will support participants to exercise choice and control.

## **Policy**

In order to ensure that participants dignity, autonomy and choice is upheld, Wellington Multi Service Centre Inc., will undertake the following:

- Ensure each consumer has a Support Plan developed with them which is based on their needs, strengths and abilities
- Ensure the consumer Support Plan is reviewed as a minimum on an annual basis and that the goals are achievable and realistic and continue to meet the needs of the consumer
- Provide training for staff and volunteers on choice, risk and the importance of people being able to make their own decisions and to remain independent and enabled
- Encourage participants to do things for themselves wherever possible and foster a culture of doing 'with' rather than 'for' a consumer
- Encourage staff and volunteers not to 'take over' or treat participants in a paternal or protective manner
- Recognise strengths and abilities and encourage people to maintain their independence
- Support participants to meet their personal goals where possible, including by provision of aids to assist where necessary
- Communicate respectfully and in a way which supports consumer independence/choice
- Respect consumer's privacy and confidentiality
- Support participants right to maintain relationships
- Support participants to participate in, and be included and valued in, their community
- Deliver services that are culturally appropriate
- Consult and respect participant choice and requirement when matching up with care works/volunteers (eg culture, gender, skill etc)
- Deliver services that are LGBTI responsive, inclusive and sensitive
- Respect an individual's culture, diversity, religion, spirituality, sexuality, gender, language, ethnicity and including these in the participants assessment and care /support plan
- Respect an individual's right to practice their culture and beliefs as they wish, without any retribution
- Support participants to engage with family, friend and the chosen community groups as desired by the participants
- Wellington Multi Service Centre will not replace any inkind supports delivered by friends, family or community unless requested by the participant

- Support consumer to make choices in the way that services are provided and the way they live their life and actively support the decision the participant chooses
- Guidance on inappropriate and appropriate touching of clients and staff. Staff will ask permission to perform and will explain procedures that are involved in physical touching or invading personal space
- To use appropriate verbal and non verbal language
- To encourage participants to live a better quality of life and to set goals and make personal gains in their life
- Assist participants to understand the associated risks and consequences of their choices
- Provide information in a range of formats to enable participants to make informed choices, this includes ensuring information is current, accurate and in a format which supports each consumer understanding.
- Access to supports will not be withdrawn or denied on the basis of dignity of risk or choices made by participant
- If a participant wishes to transfer to or from another provider, a Referral to Another Agency Form is completed with participant and a planned transition is carried out with both the participant and the new provider. The transition will be carried out with minimal inconvenience to the participant and their family and all communication will be documented in clients file.
- When transitioning participants and the families to or from another provider all risks associated should be explored, discussed and documented.
- The processes used for transitioning participant and their families will be reviewed and amended through our continuous improvement and/or our risk assessment plans to make transition smooth.

Reviewed & Updated:

## Delivering Lifestyle Services and Supports

*Aged Care Quality Standards 1 - Consumer Dignity and Choice; 4 Services and Supports for Daily Living*

*NDIS Practice Standards 1 Rights; 3 – Provision of Support*

### **Policy Statement**

Wellington Multi Service Centre Inc., will encourage participants' access to the services and supports that will enhance their quality of life and wellbeing.

### **Policy**

In order to encourage a consumer to have an optimum quality of life and wellbeing, Wellington Multi Service Centre Inc., will undertake the following:

- Work together with participants to lead and make decisions about their life and how our service can support them to do so.
- Focus on optimising the consumer's wellbeing and quality of life
- Support participants to participate in their chosen community and activities
- Support participants to make their own decision and respect their choices
- Provide participants with pros and cons for risky decisions or choices
- Support participants to engage with family, friend and the chosen community groups as desired by the participants
- Wellington Multi Service Centre will not replace any in-kind supports delivered by friends, family or community unless requested by the participant
- Support participants in promoting and upholding their human rights
- Service provision, planning and reviews will be used to build on the participants strengths to help meet their goals
- Support and encourage participants to undertake activities which interest them
- A participant's diversity (disability, age, gender, culture, heritage, language, faith, sexual identity) will be included when compiling participants service agreements, careplan and delivery of supports.
- Consult and respect participant choice and requirement when matching up with care works/volunteers (eg culture, gender, skill etc)
- Where consent is granted, share information about a consumer's likes, dislikes and interests with staff and volunteers where relevant and other service providers (where a number of services may work with a consumer).
- If required, when work is undertaken with other providers and services to identify and treat risks, ensure safe environment, prevent injuries and to have clear understanding of everyone's role and responsibilities.
- will not withdraw access to supports or denied on the basis of dignity of risk or choices made by participant
- contact participants as soon as possible regarding changes in staff scheduled roster due to illness etc., participant then has option to: accept new staff member; reschedule or cancel service for that day

Reviewed & Updated:

## Exit Policy

*Aged Care Quality Standards 1- Consumer Dignity and Choice; 2 - Ongoing Assessment and Planning  
NDIS Practice Standards 1 - Rights and 3 - Provisions*

### **Policy Statement**

Wellington Multi Service Centre Inc., will ensure that the process for a consumer to exit the service is fair and equitable and participants are not discriminated against.

### **Policy**

A consumer may exit Wellington Multi Service Centre Inc., in the following circumstances:

- At the consumer's request
- Where the consumer's level of need exceeds the services resources
- Where the consumer's needs increase or become more complex and a service provider is unable to provide the level of care required
- When a consumer moves outside the CHSP target group or the Service's delivery area
- Changes in Participants NDIS plan is suspended or replaces with a new plan or participants stops being with NDIS
- Ending participants NDIS Agreement, 2 weeks' notice is required by either. If breached by either party the notice period is waived.
- Where continuing the service may pose a WHS risk, after exploring every avenue to minimise the risk.

Where a consumer requires services outside of what Wellington Multi Service Centre Inc., can provide, a referral will be made to My Aged Care or NDIS on the consumer's behalf (where requested or required).

If a participant wishes to transfer to or from another provider, a Referral to Another Agency Form is completed with participant and a planned transition is carried out with both the participant and the new provider. The transition will be carried out with minimal inconvenience to the participant and their family and all communication will be documented in clients file.

When transitioning participants and the families to or from another provider all risks associated should be explored, discussed and documented.

The processes used for transitioning participant and their families will be reviewed and amended through our continuous improvement and/or our risk assessment plans to made transition smooth.

When a consumer is exited, the reasons for exiting the service is to be documented on the Exit Interview Report Form and placed in the consumer's file and the archived as per the Records Management procedures.

Reviewed & Updated:

## Feedback & Complaints

*Aged Care Quality Standard 6 - Feedback and Complaints*

*NDIS Practice Standards 2 – Governance & Operational Management*

### Policy Statement

Wellington Multi Service Centre Inc., encourages clients/participants to express their complaints/feedback to enable us to improve the quality of our services. Feedback and complaints are the best way of identifying problems with service delivery and will be dealt with in a positive and transparent manner and will be linked to the organisations' Continuous Improvement Plan

Wellington Multi Service Centre will abide by the National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018

### Policy

In dealing with complaints:

- Client/participant are made aware, through the Handbook, of their right to complain without fear of retribution, the complaints process and their right to use an advocate in making a complaint. This information is explained to client/participant at the time of assessment and review.
- Client/participant have a right to complain and will be supported in making their complaint without fear of retribution and can expect complaints to be dealt with fairly and promptly in a manner which is non-threatening.
- Client/participant can expect staff to take steps to ensure that they feel comfortable to continue accessing the service after making a complaint.
- Client/participant are also advised that they can nominate a complaint contact person and where possible, this person will be allocated the complaint.
- Client/participant are informed of how the complaint will be dealt with, and whether it needs to be managed in a particular way, either because the person making a complaint has specific rights of review or because the complaint includes allegations that must be reported to an external body. For example, criminal allegations should be reported to the police.
- All complaints and the details of the complaint will be kept confidential, and information relative to the complaint will only be shared with others who are directly concerned with the resolution of the complaint. To maintain confidentiality all records and documentation are securely stored
- All feedback from the complaint will be linked to our continuous improve plan our service delivery and forms part of our continuous improvement processes which underpin all of our services and operations. Our complaints handling approach reflects our vision, objectives and philosophy.

### **Process for Managing Complaints**

Step	Timeline
9. A complaint is received via a Volunteer or directly from a service user/representative via letter, email, face to face or telephone	On day complaint is received
10. A Complaint Form is created by the person receiving the complaint and the complaint is reported to the Coordinator	
11. The complaint is reviewed by the Manager and relevant information and proposed action is recorded	Within 2 working days of receipt of complaint

Step	Timeline
<b>12.</b> The Manager contacts (by telephone or letter) the service user to advise: <ul style="list-style-type: none"> <li>○ the complaint is being assessed</li> <li>○ the process that is followed including confidentiality</li> <li>○ the timeline</li> <li>○ their right to an advocate and advocacy agency support (see Section 17: Advocacy)</li> <li>○ who their contact person is and details on how to contact them and</li> <li>○ when they will be contacted again.</li> </ul>	Within 4 working days of receipt of complaint
<b>13.</b> The Manager reviews the complaint and decides the action to be taken and who takes it and a plan for resolution	Within 10 working days of receipt of complaint
<b>14.</b> Action is carried out. Person/s affected by the complaint are fully informed of all facts and given the opportunity to provide further information and contribute to the solutions. Investigation principles include: impartiality, confidentiality, transparency and timeliness.	
<b>15.</b> The client/participant is advised of the actions taken to address the issues raised and the outcome of the complaint in a letter. The service user is provided with an apology if appropriate.	Within 15 working days of receipt of complaint
<b>16.</b> If the client/participant is not satisfied with the outcome they are advised of the complaints appeal process (see Section 17: Advocacy)	
<b>17.</b> If the client/participant wishes to appeal, the complaint is reviewed by the Manager, whose decision is final	Within 25 working days of receipt of complaint.
<b>18.</b> The client/participant is advised of the Manager's decision and of their option to go to an advocacy agency	
<b>19.</b> When the complaint is finalised the Manager rings the complainant to make sure that the client/participant feels comfortable to continue accessing the service and to obtain feedback on the complaints procedure. The complaint is then closed out.	

### Review of Complaints

The Management Committee is provided with information on the type and number of complaints at each Board meeting and information on trends when adequate information is available: The Board ensures:

- Appropriate corrective and/or remedial action is considered, agreed and implemented.
- Decisions reached as a result of the complaint review process are documented and records of implementation and follow up are maintained
- The implications of the complaints are considered in service planning.

### External Complaints

If a client/participant chooses to complain to an external agency they are free to do so and we will support them as required. Agencies that client/participant can lodge a complaint with are detailed at the end of this policy.

### **Client/Participant Feedback**

Feedback can be positive and negative. Negative feedback is defined as minor dissatisfaction or a minor issue that can be easily resolved and/or the service user does not want to make a formal complaint. For example, feedback on an occasion of late service provision or dissatisfaction with a provided meal. Positive feedback is a compliment or praise regarding service delivery, staff or the organisation. Feedback can be formal or informal.

### **Formal Feedback**

Formal feedback is given in writing with the intention of providing feedback such as a client/participant specifically informing a staff person about their dissatisfaction with the quality of their service. When feedback is not written the staff person receiving it completes will document it in the front desk book and informs the Manager and attaches any documentation.

### **Informal Feedback**

Informal feedback is made in the course of interaction, for example, a client/participant commenting to the volunteer that recent requested changes to their service delivery have not been implemented. Informal feedback is recorded by the staff

### **Disputes between Client/participant and Staff/Volunteers**

Our staff or volunteers are required to report immediately to the Manager any dispute with client/participants, regardless of how small. Disputes are reported verbally in the first instance. The Manager then decides:

- Whether the client/participant should be contacted
- If a written report is required
- The format of the report
- Any other action to resolve the dispute as early as possible.

The Manager may offer the service user the opportunity to make a formal complaint. If the client/participant accepts this offer the Manager completes a Complaint Form with them and the complaints process is followed.

### **Use of an Advocate**

Client/participant are advised that they can use an advocate at any point in the feedback or complaints process or if they feel their feedback or complaint was not satisfactorily resolved. They are also advised of relevant agencies as described in our Advocacy Policy.

### **People with Cultural Consideration**

Where client/participant may have special needs, such as people from culturally and linguistically diverse (CALD) backgrounds or Aboriginal and Torres Strait Islander people, the staff ensure that any cultural aspects are considered when reviewing a complaint or dispute and ensures the person feels comfortable in discussing a dispute. The presence of a family member or friend or the support of an interpreter may be required.

The staff also ensures that any actions, interventions or referrals are appropriate to people from cultural groups. This may require the involvement of organisations with expertise in this groups either in providing advice or assisting in actions.

### **Confidentiality of Complaints and Disputes**

As far as possible, the fact that a client/participant has lodged a complaint and the details of that complaint are kept confidential amongst staff directly concerned with its resolution. The client/participant permission is obtained prior to any information being given to other parties that it may be desirable to involve in order to satisfactorily resolve the complaint or dispute.



### **Monitoring and Evaluating the Complaints and Service User Feedback Process**

Complaints and client/participant feedback processes and systems are regularly audited as part of our audit program and staff, client/participant and other stakeholders are encouraged to provide ongoing feedback on issues and areas where improvements can be made (see Continuous Improvement).

Agencies that client/participant can lodge a complaint with

- Aged care complaints can be made to the Aged Care Quality and Safety Commission on 18009510822
- For more information on aged care complaints, Translator and Interpreter services go to <https://www.agedcarecomplaints.gov.au>
- Complaints may also be made through the NSW Ombudsman using the Online Complaint Form [www.ombo.nsw.gov.au](http://www.ombo.nsw.gov.au) Phone: 02 9286 1000 Toll free (outside Sydney metro): 1800 451 524
- If you are a non-English speaking person, the Ombudsman can help through the Translating and Interpreter Service (TIS) on 131 450.
- If you are hearing impaired or have a speech impairment, contact the Ombudsman through the National Relay Service.
- NDIS Commission on 1800 035 544
- National Disability Insurance Scheme (NDIS) on 1800 800 110

Reviewed & Updated:

## Assessment and Reassessment

*Aged Care Quality Standard 2 – Ongoing Assessment and Planning*

*NDIS Practice Standards 1- Rights; 3- Provision of Supports*

### **Policy Statement**

Wellington Multi Service Centre Inc., will ensure that each consumer receives an adequate assessment which identifies consumer needs and preferences and is undertaken in a fair and equitable manner. Where multiple services are delivered by a variety of service providers, the organisation will work collaboratively (with consent) ensuring the consumer's needs are met in the most effective manner.

Wellington Multi Service Centre Inc., will complete an initial assessment within 5 working days of receiving the My Aged Care referral. Annually reassessments are conducted to determine if the service provided is adequate for the clients needs, or if needs have changed.

### **Policy**

While eligibility for CHSP services is determined by My Aged Care (MAC) and an assessment undertaken by the Regional Assessment Teams, it will be necessary to complement this with additional information obtained by the Wellington Multi Service Centre Inc., Manager or designated staff member.

Similarly, eligibility for disability services will be determined by the NDIS and a Plan developed by the Local Area Co-ordinator or Planners. It will be necessary to complement this with a specific assessment to determine individual needs and expected outcomes.

Initial interviews will generally be carried out in the person's home, or at Wellington Multi Service Centre Inc. or neutral place agreed upon by all.

All assessments will consider each person's:

- Individual goals, lifestyle and personal preferences
- In consultation with participants/clients, match them with support workers/volunteers
- Wellness and reablement goals
- Strengths and abilities
- Physical, social and emotional needs
- Cultural, spiritual, psychological, social, medical and religious needs
- Socio-economic needs
- Communication preferences and/or ability to understand the process for assessment and planning
- Cognitive function
- Access and mobility issues
- Informal and community supports.

An assessment and Support Plan/ Service Agreement will be used to gather the information and define the agreed services with their frequency, times and location, fees, and consumer's goals. The Care Plan will be developed with the consumer (and/or their advocate where necessary) and it will be person centred, focused around wellness and reablement and support the consumer preferences/needs. A signed copy of the Support Plan/Service Agreement will be provided to each consumer.

Reassessments will be carried out annually, or when there is significant change to the consumer's needs or circumstances. Reassessment/review information will be recorded by staff in the data base case notes and the Plan/Assessment form amended where necessary or changes have occurred. A referral back through MAC may be required, particularly if there is an increase in the complexity or level of service required.

Wellington Multi Service Centre Inc., may refuse access to potential participants if it is determined that the organisation cannot adequately and appropriately meet the needs within the resources available or do not have an active NDIS plan. Wellington Multi Service Centre Inc., must be notified of any changes to participants NDIS Plan immediately.

Where this occurs, the reasons will be clearly explained to the person and referral back to My Aged Care or to the NDIS planner

Wellington Multi Service Centre Inc., may refuse service to people who are assessed as posing a risk to the safety or wellbeing of other service users, team members or members of the public. Where this occurs, this will be explained to the person and a referral will be made back to My Aged Care.

Reviewed & Updated:

## Client Non-response Policy

*Aged Care Quality Standard - 2 – Ongoing Assessment and Planning*

*NDIS Practice Standards 3- Rights; 2 – Governance & Operational Management*

### **Policy Statement**

Wellington Multi Service Centre Inc., will ensure that our Non Response Policy is explained and discussed with each participant at the time of assessment. Participants consent or input to the process is recorded on the Assessment Form. This will also be identified on the participants Support Plan and will ensure that staff and volunteers understand and follow participant wishes.

### **Policy**

Wellington Multi Service Centre Inc., will ensure that each participant is able to clearly outline their wishes, should they not respond to a scheduled service visit from staff or volunteer of the organisation. The following procedure will occur:

- Participants will be asked to nominate their wishes for non-response to a planned service visit in the completion of their Support Plan (upon initial assessment)
- Where a participant has consented to our Non Response Policy. The process to be conducted is to check with neighbours and/or family contact, hospital, doctors, other known service providers and finally emergency services to enter clients home.
- Where a participant has not consented to our Non Response Policy. The process to be conducted is to refer to the Support Plan and follow the instructions of the participants wishes.
- Volunteers who note a participant does not respond to a planned service visit will contact the Manager who will refer to the Support Plan and make contact with the nominated contact person
- At no time, will staff or volunteers enter a home to find a participant
- Where staff or volunteers can see or view a participant in distress in their home (for example, they may have fallen and be unable to get up), they must ring Emergency Services on 000 immediately, followed by the Wellington Multi Service Centre Inc., office for further instructions.
- Staff or volunteers must not at any time, move or attempt to move a participant if they have fallen. Staff or volunteers can attempt to make the participant comfortable where they are but make contact with Emergency Services who will attend to the health and safety of the participant.<sup>5</sup>
- The Support Plan will be reviewed on a regular basis to ensure that the participant's wishes are documented

Reviewed & Updated:

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<sup>5</sup> [DOH Guide for non response to scheduled visit](#)

# Privacy and Confidentiality

*Aged Care Quality Standard 1 – Participant Dignity and Choice*

*NDIS Practice Standard 1- Rights*

## **Policy Statement**

Wellington Multi Service Centre Inc., will respect each participant's right to privacy, dignity and confidentiality. All personal information will be collected, stored and shared **only** with consent and in accordance with the Privacy Act 1988<sup>6</sup>, Privacy Amendment Act 2017 (Notifiable Breaches) and the 13 Australian Privacy Principles.

A participant's rights to privacy and confidentiality will be communicated in a way which supports their understanding.

## **Policy**

Wellington Multi Service Centre Inc., collects personal information from participants to enable the safe and appropriate delivery of agreed services. Staff and Volunteers should note that privacy and confidentiality apply:

- In the workplace
- At home and in the community
- When talking with other volunteers
- When dealing with people of other agencies
- In social environments
- When dealing with other participants
- Participants and other client/participant who obtain information about participants.

Key principles for collection, storage and sharing of personal information:

- Consent is obtained from participants for the collection, storage, transfer and disposal of their personal information
- Information about privacy and confidentiality is communicated in a variety of ways which support participant understanding (plain English, verbal, pictorial)
- Participants will understand where their information is stored, how and why
- Participant files, whether hard or electronic files, are kept in a secure location with authorised access only
- Services will ensure that they adhere to Privacy Amendment Act 2017 (Notifiable Breaches) and follow due process where a breach occurs
- Participants have the right to access their information at any time
- Participants are encouraged to provide updated information if their circumstances change
- Wellington Multi Service Centre Inc., staff will update information when they become aware of changes to participant circumstances, and/or when a review is carried out, to ensure that the information is current and accurate
- All information relating to participants is confidential and will not be disclosed to any other person or organisation without the consent of the participant or in a situation where there seems to be a serious threat or required by law.
- Statistical data submitted to funding bodies is de-identified. The information that is stored in a participant-level unit record will not include the participant's name or pseudonym, and street-level address

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<sup>6</sup> <https://www.oaic.gov.au/privacy-law/privacy-act/>

- Only information necessary for delivering effective services will be collected. Clients/participants are informed at assessment that data collection is used for obtaining funding or grants and for purpose of staff recruitment and skill requirements. This is also addressed in the Handbook and service agreements and Record Document Policy
- Photographs or electronic recordings will not be taken without permission
- Each participant will be offered the right to choose whether to participate in any research or auditing process
- All staff and volunteers will receive training regarding confidentiality and privacy
- The intake/assessment and review of participants will take place in the participant's home or a location that facilitates privacy and confidentiality.

Please refer to the [Records/Document Control Policy](#) for further information on collection, storage and disposal of personal information.

### Breaching Process

If Privacy and confidentiality is breached the following steps are to be taken:

- Manager/Supervisor to complete a complaints form
- Contact and discuss breach with staff member if minor breach
- If serious breach a meeting is schedule with staff member and a Staff Complaint Interview is conducted and Staff Complaint Interview sheet is completed (this includes reason for warning; repercussions; Staff members response to issue and action to be taken; discuss responses to prevent breaches in the future.
- Copy of Staff Complaint Interview Sheet is signed and agreed upon and copy placed in staff member file.

Copy of Staff Complaint Interview Sheet under "Forms" in Manual

Reviewed & Updated:

## Wellness and Reablement

*Aged Care Quality Standards 1Participant Dignity and Choice;2 – Ongoing Assessment and Planning*

*NDIS Practice Standards 1 - Rights*

### **Policy Statement**

Wellington Multi Service Centre Inc., will support wellness, reablement and restorative approaches in service delivery. Wellington Multi Service Centre Inc., understands that each person has the potential and the right to make personal improvements, to be independent and to make choices which improve their quality of life.

In line with the Australian Governments *Living Well at Home – CHSP Good Practice Guide*, Wellington Multi Service Centre Inc., will ensure that it encourages people to have a better quality of life by 'doing with', rather than 'doing for' them.

### **Policy**

In order to ensure that consumers have more opportunities for wellness and reablement, Wellington Multi Service Centre Inc., will undertake the following process:

- Provide training for staff on wellness and reablement
- Consider the way that we speak to, about and with, participants
- Do 'with' participants, rather than 'for'
- Ensure each participant is treated with respect and dignity and that their social, psychological, cultural, linguistic and medical needs are considered when developing a Support Plan with each participant
- Consider our language with participants and in documentation (for example Day Centre may be demeaning or childlike?)
- Consider equipment or aids to help people do things themselves and work with Occupational Therapist (if required)
- Support wellness, reablement and restorative approaches by discussing nutrition options that meet the specific needs of individual participants and ensuring that nutritional screening has been offered should it be required
- Referral to more appropriate services if they are unable to undertake the services we are providing.

As well as ensuring the above, Wellington Multi Service Centre Inc., will ensure that participants are able to actively participate in the development of their Support Plan goals and to make decisions about their services. Participant's Support Plan will include working with relevant professional to help maintain physical and mental ability. Support Plans will be reviewed regularly to see if they are meeting goals and service will only continue while it is needed.

Reviewed & Updated:

# Medication Management

*Aged Care Quality Standards 3 – Personal & Clinical Care*

*NDIS Practice Standards 4 – Provision of support*

## **Policy Statement**

Medication management can be provided to clients by the Registered Nurse or certified Support Workers. The Registered Nurse is bound to follow professional guidelines in the delivery of medications. Support Workers can only provide medication management if they have been deemed competent to do so. Clients are encouraged to remain independent in the management of their medications.

## **Policy**

This Policy is developed in line with the Policy Framework and Guidelines endorsed by the Home and Community Care Programme and the Office of the Chief Nursing Officer (Department of Health).

The legislation guiding medication management is the Poisons Act 1964 and the Poisons Regulations 1965; however, this legislation does not define the roles of support workers in medication management.

### Definitions

**Medication Support** is prompting or assisting the client with self-medication. It involves reminding or prompting the client to take medication, assisting with opening medication containers (such as blister packs) for clients and other assistance not involving medication administration.

**Medication Administration** is the actual giving of medications and involves the storing of medicines, opening of the container, removing the prescribed dosage (from approved container), giving the medication as per instructions and ensuring that the medication has been taken.

The main difference between medication support and medication administration is who is taking responsibility for ensuring that medications are taken; with medication support the client is self-medicating with support and with medication administration, the Support Worker or Registered Nurse is taking steps and responsibility to ensure that the medication is taken.

## **Registered Nurse Responsibilities**

*Registered Nurses are able to administer medications (prescribed and non-prescribed) as per their scope of practice and in line with the requirements of the Poisons Act 1964 and Poisons Regulations 1965. The Registered Nurse is responsible for supporting clients associated with clinical care related home care packages with their medications in the following ways:*

- *Ensuring their own competency to provide medication support*
- *Assessing the need for medication support for clinical care associated client*
- *Identifying the type of medications currently taken by the client*
- *Liaising with the doctor and/or pharmacist as required*
- *Developing a medication plan for the client and identifying who will provide the medication support [this may include medication support by the Support Workers (blister packed medications and those Support Workers are competent to support the client with) or the Registered Nurse (other medications such as suppositories, insulin injections etc)]*
- *Reviewing medication support associated with clinical care home care packages during reassessment*



- *Ensuring the competency of Support Workers to provide medication support by providing medication support training and competency assessment.*

*The Registered Nurse is responsible to our organisation in relation to medication support in the following ways:*

- *Providing clinical advice and input into policies and procedures as requested by the Case Coordinator*
- *Participating in the review of Medication Error Reports as requested by the Case Coordinator.*

### **Support Worker Responsibilities**

The Support Workers are responsible for medication support by:

- Never being involved in the management and/or administration of client medication, beyond their skills and training
- Ensuring that they are competent to provide medication support and refresh their competency every 12 months
- Being adequately trained by attending organisation endorsed medication training, assessed as competent by the Registered Nurse and feeling confident in performing the client medication assistance required of them
- Being adequately trained to identify potential adverse effects medication may have on the client
- Providing medication support as per the medication plan
- Reporting any medication errors using a *Medication Error Report*
- NEVER providing medication advice or information to clients/representatives.

### **Client Medication Assessment**

*Where an assessment is needed to determine a client's capacity to participate in the management of his or her own medication we use the following procedures:*

- A General Practitioner, Registered Nurse or Pharmacist, completes an assessment of the client's ability and
- A client Medication Consent Form is completed.

### **Overview of Medication Support Provided**

If clients require the Support Workers to support them in taking their medications, Wellington Multi Service Centre Inc., ensures that:

- Client oral tablet medication is only dispensed if stored in a medication aid (such as a blister pack dispensed by a pharmacist), as they are considered to minimise potential errors
- Where medication is not suitable for a medication aid (eg liquid, eye drops eardrops, ointment, cream etc) the Support Workers provide support as defined in the medication type competency documents:
  - Oral medications
  - Applying a topical preparation
  - Eye drops/ointments
  - Inhaled medications
  - Nebulised medications

- Transdermal patches

*Support Workers will receive medication management training and are required to demonstrate their competency in administering each medication regularly.*

- A current client Medication Plan detailing the medication management requirements is accessible to the Support Worker at all times.

### **Requirements for medication support**

If the client is having medication support, that is, the client is being prompted to take their medications or assisted with packaging the following is required:

- An assessment of their ability to self-medicate is completed by a health professional
- A Medication Consent Form is completed that outlines the type of medication assistance is to be provided (such as prompting for time of day or assistance with medication packaging)
- A Medication Plan that describes the type of medication, assistance to be provided by the Support Workers including type, time, dose, and route of medication for the client is completed by the Care Coordinator/Registered Nurse.

### **Requirements for medication administration**

*If the client is having their medications administered, that is, the client is being assisted in all aspects of their medication and the Support Worker/Registered Nurse is responsible for ensuring the client has taken their medication, the following is required:*

- *An assessment of their ability to self-medicate is completed by a health professional*
- *A Medication Consent Form is completed that outlines the type of medication assistance is to be provided (such as prompting for time of day or assistance with medication packaging)*
- *A Medication Order that outlines the doctor's prescription (which may be a patient medication summary, blister pack sheet provided by the pharmacist or a Medication Order form)*
- *A Medication Plan is completed by the Care Coordinator that describes the type of medication, assistance to be provided by the Support Workers including type, time, dose, and route of medication for the client*
- *A Medication Record Sheet or signing sheet (provided by the Pharmacist) for Support Workers to sign for the medications they have administered.*

*The client Medication Plan includes the following:*

- *Client's name*
- *Medication to be given*
- *Dose to be administered*
- *Specific route*
- *Time/s to be given*
- *Specific instructions regarding the medication, e.g. to be taken with food*
- *Commencement date of medication*
- *Cessation or review date of the medication.*

The Support Worker is to:

- Conduct all of the necessary checks to ensure that the client and their medication are identified including the six rights of medication administration ensuring the:
  - right person
  - right medication
  - right dose
  - right time
  - right route
  - right documentation
- Ensure the client is assisted with medication in line with their individual requirements
- Observe and supervise the client to ensure ingestion or completion is confirmed
- Record medication completion as appropriate
- Stay and observe the client until they are sure that the medication has been taken
- Discard waste products appropriately
- Notify office/supervisor of any difficulty experienced (such as client refusal, incomplete ingestion or missing doses)
- Observe the client for any adverse effects
- Report any adverse effects to the Nurse/Care Coordinator

Support Workers are not placed in a position where they have to make discretionary judgements concerning a client's health status when the client needs assistance from expert health professionals.

Examples of times when discretionary judgement may be required include:

- A client that needs to be monitored because of unstable health (unstable health is when a person's health is inconsistent and requires some intervention and changing of medication on a regular or ongoing basis).
- A client that consistently displays inappropriate behaviour, e.g. takes too much medication, refuses to take medication, takes incorrect doses or misuses medication on a regular basis.
- Professional medication instructions are unclear, out of date, omitted or open to interpretation.

In these situations, the Support Worker informs the office/supervisor who contacts the client's doctor or Family for advice and ensure that the client is appropriately reviewed. The Registered Nurse can provide medication management services to complex clients.

### **Limits to Medication Management Practices**

The following limits to medication management practices are in place. The Registered Nurse and/or Support Workers will not:

- Receive verbal orders or act on verbal orders from a doctor or other health professional
- Give PRN (when required) medications
- Give any medications that are not authorised by a doctor and included in the Medication Plan

- Give medications outside of the scope of their skill and competence.

### Medication Errors

In the event of an error in medication management, including an error in dosage, time, frequency or type of medication administered to or taken by a client, the Support Worker/Registered Nurse is to:

- Remain calm
- Acknowledge that an error has occurred
- Identify the nature of the error
- Inform the office/supervisor who informs the General Practitioner or Pharmacist or Poisons Information Line (13 11 26) for instructions
- Follow advice provided by the General Practitioner or Pharmacist or Poisons Information Line (get this advice confirmed in writing as soon as possible after the event and include it as part of the Medication Error Report)
- In accordance with the General Practitioner or Pharmacist or Poisons Information Line instructions, observe the client for changes in behaviour or well-being as a result of the error and report these to the General Practitioner as advised
- Call an ambulance if the client is in distress or showing signs as described by the *General Practitioner or Pharmacist or Poisons Information Line requiring hospitalisation*
- *Record the incident on a Medication Error Report and provide this to the Care Coordinator/Manager.*
- *The Medication Error Report is processed as per 5.2.6 Medication Error Report.*

This policy is reviewed by the Care Coordinator at least every twelve months to identify any required improvements and implements any improvements to the process. The Registered Nurse and other relevant health professionals are consulted to assist in policy review as required. This policy reviews contributes to our clinical governance oversight of organisational practices.

### Categories of Medication

Medications are classified as either first category or second category medications. Support Workers may assist clients with second category medications as specified in this Table below

<b>First Category Medication</b>	<b>Second Category Medication</b>
<i>(Health Professionals only) Support Workers are not to provide support to clients with this medication. The Registered Nurse can give medicines in this category that she is competent to give.</i>	<i>(Special skills/training required) Support Workers may assist clients with this medication after receiving approved competency based training and competency assessment that is updated on an annual basis.</i>
	<i>Scheduled 8 medications if in medication aid.</i>
	<i>Tablets, Patches and Wafers.</i>
	<i>Eye drops; Ear drops; Nose drops and Sprays.</i>
	<i>Topical, rectal and vaginal preparations (eg creams and ointments)</i>
	<i>Enemas, pessaries and suppositories</i>

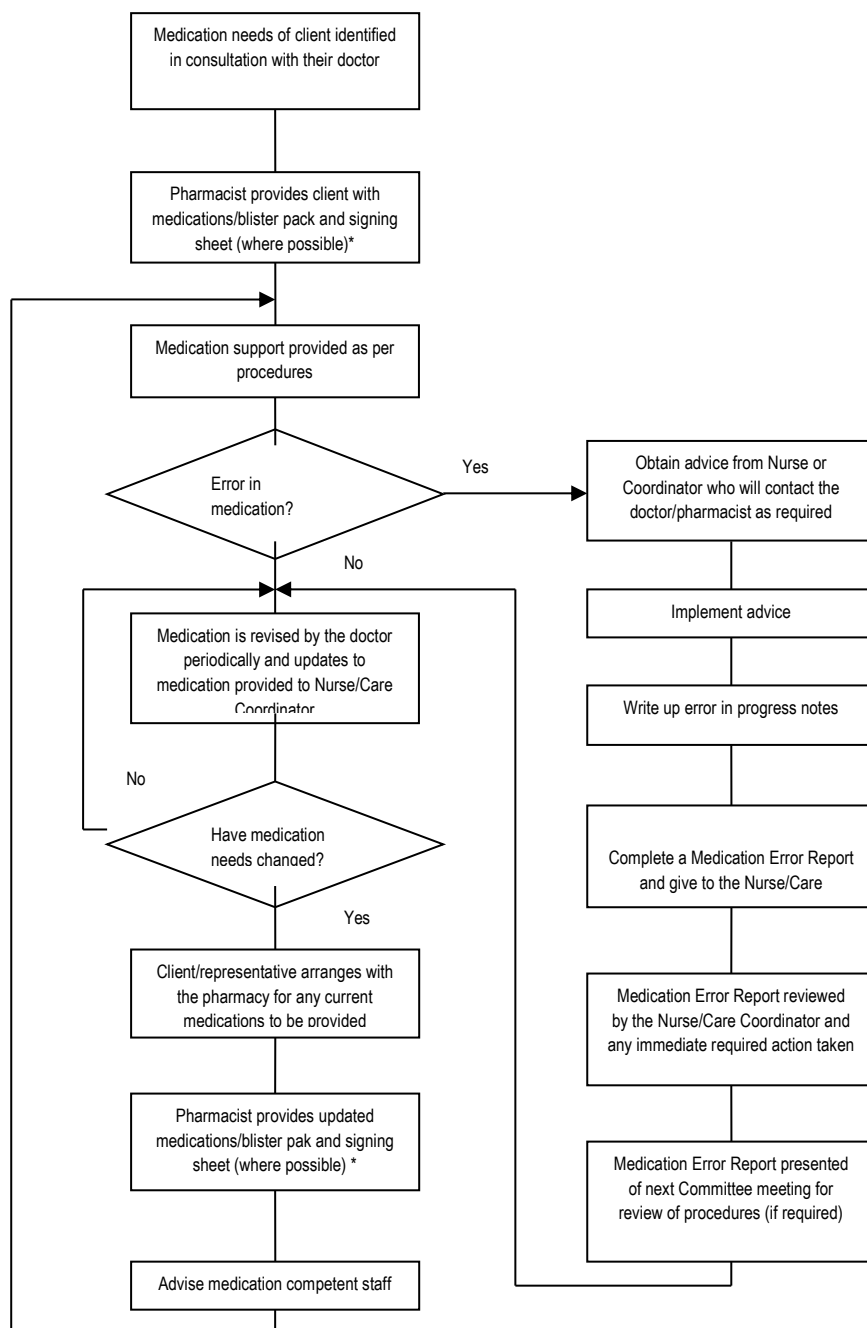
<b>First Category Medication</b>	<b>Second Category Medication</b>
<i>Any medications that are to be nebulised that have not been dispensed and prepared by a pharmacist into unit doses.</i>	<i>Any medications that are to be nebulised that have been dispensed and prepared by a pharmacist into unit doses. Metered dose inhalers that have been dispensed by a pharmacist.</i>
<i>Medicines given via feeding tubes (eg gastrostomy, jejunostomy) that have not been dispensed and prepared by a pharmacist into unit doses.</i>	<i>Medicines given via feeding tubes (eg gastrostomy, jejunostomy) that have been dispensed and prepared by a pharmacist into unit doses.</i>
<p><i>Medications given by the following routes:</i></p> <p><i>Medical Practitioner Only:</i></p> <ul style="list-style-type: none"> <li>• <i>Intrathecal (into the spinal cord area)</i></li> <li>• <i>Intraperitoneal (into peritoneum/ abdominal cavity)</i></li> <li>• <i>Intraventricular (into ventricles of brain)</i></li> <li>• <i>Epidural</i></li> </ul> <p><i>Registered Nurse:</i></p> <ul style="list-style-type: none"> <li>• <i>Intravenous</i></li> <li>• <i>Intramuscular</i></li> <li>• <i>Subcutaneous</i></li> </ul>	
<i>All medications that are administered by the nasogastric route.</i>	
<i>Emergency situations: In an emergency situation Support Workers are not to practice outside of the scope of their ability and knowledge and are always to call for assistance (ambulance, Nurse/Care Coordinator/Manager, General Practitioner, Pharmacist) if an emergency situation arises.</i>	

### **Staff Training For Medication Support**

Support Workers are trained in the supervision, prompting and delivery of medications including medication awareness training and competency. The Registered Nurse assesses the competence of Support Workers in the management and administration of medications including assessing the competence of each Support Worker in the administration of approved category two medications. A range of competency forms are completed by the Registered Nurse and filed in the Support Worker's personnel file. Competency is assessed twice for the first assessment and once annually thereafter.

## Medication Management Flow Chart

**OUTCOME: Clients medication is managed safely and correctly**



*\* If possible, a signing sheet is requested from the Pharmacist as this provides details of the prescribed medications, administration times and an area for staff to sign. If not available a Medication Record Sheet is used.*

Reviewed & Updated:

# Infection Control & Waste Management

*Aged Care Quality Standards 3 – Personal & Clinical Care*

*NDIS Practice Standards 4 – Provision of Support*

## **Policy Statement**

Policies and procedures outlined in this section are based on the information contained in the NHMRC Guidelines. Infection control processes are implemented to ensure the safety and wellbeing of clients, our staff and the community as a whole. Our organisation seeks input and advice from an Infection Control Consultant and/or the local government environmental officer if required (eg if there is an outbreak at day centre or a food-borne infection risk identified).

## **Policy**

### **Infection Prevention and Control Overview**

Healthcare-associated infections (HAIs) can occur in any healthcare setting, including community care. The basic principles of infection prevention and control can be applied in all settings.

Standard and transmission-based precautions are used to prevent and control infections and provide protection for clients, staff and the community at large. Infectious agents (also called pathogens) are biological agents that cause disease or illness to their hosts. Infection requires three main elements—a source of the infectious agent, a mode of transmission and a susceptible host.

Clients and healthcare workers are most likely to be sources of infectious agents and are also the most common susceptible hosts. Other people visiting and working in health care may also be at risk of both infection and transmission. In healthcare settings, the main modes for transmission of infectious agents are contact (including blood borne), droplet and airborne. Clients are informed of the precautions our staff are required to take to prevent and control infections.

### **Standard precautions**

Standard precautions are applied to all; irrespective of whether it is known the person has an infection, to provide a basic level of infection prevention and control.

Standard precautions include:

- Hand hygiene
- Use of personal protective equipment (PPE)
- Waste management including the appropriate handling and disposal of sharps and linen
- Environmental controls such as cleaning and management of spills
- Appropriate cleaning of reusable equipment and the use of single-use only instruments
- Practicing respiratory hygiene and cough etiquette
- The use of aseptic non-touch techniques when appropriate (such as the insertion of catheters by a Registered Nurse)

These are further discussed below.

### **Transmission-based precautions**

Transmission-based precautions are used in addition to standard precautions where the use of standard precautions may not prevent transmission of an infection. These precautions are tailored to the specific infectious agent and we seek the input of the Infection Control Consultant to assist if they are advised that transmission-based precautions are necessary (such as in the event of an outbreak of gastroenteritis in the day centre). Some transmission-based precautions can include:

- Wearing specific PPE

- Providing equipment to one particular client
- Using specific disinfectants
- Restricting the movement of the client and/or support staff.
- Limit volunteer contact by replace with paid /drained staff
- When transporting clients, wipe seats, doors etc and air out car between clients. If possible seat client in back seat and wear mask (if required)
- Staff to work from home or reduce office hours to limit face to face contact

### **Routine Hand Hygiene**

Hand hygiene must be completed:

- Before and after every contact with a client
- Before and after eating or drinking
- When hands are visibly soiled
- After using the toilet
- After removing gloves
- After handling waste, linen or equipment
- After blowing/wiping/touching your nose or mouth
- After blood or body fluid contamination.

### **Hand hygiene solutions**

- Soap (liquid or bar soap)
  - Soap does not have to be antibacterial or antiseptic, soap helps to lift soil or organisms from the skin and the water washes them away.
  - If liquid soap is dispensed from reusable containers, they must be cleaned when empty and dried prior to refilling with fresh soap.
  - Bar soap can be used if liquid soap is not available; use running water and rinse hands well after use.
- Alcohol based product
  - Only used if hands are not visibly soiled (alcohol based products are inactivated by any soiling).
  - Alcohol based products kill organisms on the surface of the skin.

### **Procedure for hand hygiene using soap and water (total time 45-60 seconds)**

20. Wet hands including wrists under warm running water
21. Apply soap to either palm and lather hands including wrists for at least 15 seconds
22. Rinse well under running water
23. Pat hands dry with paper towel or clean dry cloth
24. If elbow operated taps are not available, paper towels should be used to turn off taps
25. Place used paper towel in bin.



### Procedure for hand hygiene using alcohol based products (total time 15 seconds)

26. Hands must be visibly clean
27. Apply recommended amount (about 3 ml) of alcohol based product to either palm
28. Spread over all surfaces of both hands and wrists
29. Allow to dry without wiping off
30. There is no maximum amount of times that alcohol gel can be applied.

### Hand and nail care

The hands of care workers must be cleaned repeatedly during the course of their work; caring for your hands prevents breakdown of the skin as a natural defence against infection.

- **Nails:** Must be kept, clean and well-manicured. If staff have nail polish or artificial nails/extendors they must wear gloves when providing care. Nail brushes should not be used.
- **Jewellery:** Staff is encouraged to apply a risk assessment approach when determining what jewellery is appropriate to be worn during work hours based on the tasks being completed. Jewellery including wrist watches, bangles, bracelets, rings with stones or intricate detail must not be worn during direct client care if there is a risk of client skin integrity injury, during wound care or procedures requiring aseptic technique or during food preparation. Plain wedding bands can be worn in these situations.
- **Skin integrity:** must be checked prior to commencement of work. Visually check skin for broken areas, alcohol based hand products may be used to check skin integrity (slight stinging may occur). All broken skin (cuts and abrasions) must be covered with a waterproof, occlusive dressing. Gloves may be worn to protect larger lesions. Staff who handle food must cover broken skin with a waterproof, occlusive dressing, and gloves worn to prevent the dressing coming off. Staff are required to report any skin conditions on the hands to their supervisor such as dermatitis, exudative lesions, exfoliative skin conditions and glove sensitivity (latex and non-latex).
- **Moisturising:** the use of aqueous-based hand cream helps to prevent skin dehydration which may lead to breaches to the integrity of the skin.

### Use of Personal Protective Equipment (PPE)

Staff are to collect PPE from the office as they require it; gloves, plastic aprons, masks, hand sanitiser and protective eyewear are available.

Masks are to be changed regularly. Disposable masks are preferred and are to be changed for each client. Cloth masks can be worn in replace if don't have any disposable ones. A supply of masks are at the office for all staff

### Use of gloves

- Disposable gloves are provided to all direct support staff to minimise the risk of transmission of infection between staff and clients and must be removed after each task and hands washed or decontaminated with alcohol rub.
- Disposable gloves must be used when:
  - there is a risk of exposure to blood or body fluids
  - when handling chemicals eg when cleaning client's home
  - meal prep, cooking and handling ready to eat foods, such as sandwiches and salads
  - the client has suspected or confirmed infection with an organism transmitted via contact.
  - During a pandemic to reduce transmission to or from clients

Staff with latex allergies can notify the Manager and latex-free, non-powdered gloves will be provided.

### **Other personal protective equipment**

Care workers are provided with other personal protective equipment relevant to their roles as required. This can include goggles or face shields, aprons (if showering poses a risk of wetting the support worker's clothing), or any other personal protective equipment deemed necessary. If staff believe that additional personal protective equipment is necessary they can talk with the Manager or complete a [Hazard Report](#).

## **Waste Management**

### **General waste**

This includes food and household waste, incontinence pads, equipment and plastics that do not have sharps, general wound dressing waste (that is not overly contaminated with blood) and office waste. This can be discarded into the normal household waste. We recycle as much of our office waste (paper, aluminium cans, glass and plastics) as possible by using the recycling bins provided by the local council. Staff also encourage recycling of waste in client's homes.

### **Clinical waste**

Clinical waste is waste that has the potential to cause disease, sharps injury or public offence. Our organisation does not generate this waste except for sharps. If a client requires sharps (eg uses disposable needles for insulin injections) they must provide a sharps container marked with biohazard symbol in their home and they are responsible for disposing of it.

### **Pharmaceutical waste**

Clients are required to take any pharmaceutical waste (out of date medications etc) to their local pharmacy for destruction.

### **Linen**

Soiled linen and clothes must be handled with gloves. Paper towels are used to remove solid matter and flushed down the toilet. Personal protective equipment (gloves and aprons) are provided to staff who are providing support to clients who may require this linen management.

### **Environmental Controls**

#### General cleaning principles

- Regular cleaning of work areas is important for ensuring infection control precautions. Deposits of dust, soil and microbes on surfaces can transmit infection. Routine cleaning and maintenance is necessary to maintain a safe environment for staff, clients, volunteers and visitors.
- Cleaning equipment used is fit for its purpose, clean and well maintained.
- All cleaning staff are to ensure they have the knowledge to carry out their duties effectively:
  - cleaning practices
  - equipment use
  - chemical handling and
  - regulatory, infection control and OSH requirements.
- Supervision is in the form of identifying cleaning deficits and bringing these to the attention of the cleaning staff.
- Cleaning of cars that are used to transport clients, wipe down passenger seats and air vehicles between clients.

### Cleaning practices

- Standard Precautions are implemented when cleaning surfaces and facilities. Staff are required to wear suitable gloves and other protective clothing appropriate to the task.
- Hand hygiene is completed prior to cleaning tasks.
- Gloves are worn when handling solutions of detergent and disinfectant products and when cleaning wet areas.
- Other protective clothing (e.g. aprons) are worn wherever soiling is anticipated.
- Protective eyewear is worn where splashing is likely to occur.
- Surfaces are cleaned on a regular basis using only cleaning procedures which minimise dispersal of dust, soil (micro-organisms) and aerosols into the air.
- Safety Data Sheets (SDS's) for all cleaning agents used in the office are readily available together with instructions for products' storage and use.

### Cleaning agents

- Chemicals used for routine cleaning may be hazardous if used incorrectly.
- A neutral, low irritant detergent and warm water is used for all routine cleaning. No bleach or corrosives are used in the home; clients are advised that staff are unable to use these products.
- Where surface disinfection is required, the manufacturer's instructions are followed.
- All chemicals are stored and used according to the manufacturer's directions which are contained in the SDS
- Cleaning agents are purchased in small volume disposable containers wherever possible and discarded when empty. Where specified, containers may need to be re-used, they shall be washed and dried before refilling. Decanted solutions must never be returned to original containers or "topped up".
- All storage and in-use containers must be clearly and correctly labeled with labels prepared only by the manufacturer.
- Incidents or errors associated with chemical handling or use must be reported immediately to the office. A Staff Incident/Accident Form must be completed by the end of the shift
- A register of hazardous chemicals used in the workplace is kept and maintained.

### Horizontal surface – work surfaces, ledges and floors

- Clean work surfaces, ledges and floors thoroughly as often as needed depending on the frequency of use. A general purpose neutral detergent is used, following manufacturers' instructions.
- Separate cleaning of clean and dirty areas (eg hand basins and toilets).
- Work from clean to dirty, high to low.
- Damp mopping or damp dusting is the preferred method for cleaning surfaces.
- Change cleaning solution when cleaning floors on a regular basis and launder mop head when soiled (if removable mop head). If mop head is fixed, clean mop with detergent and warm water and allow to air dry, standing head end up.
- Carpets/floors are vacuumed according to use.

### Cleaning equipment

- Cleaning equipment (including solutions, water, buckets, cleaning cloths and mop heads) are changed periodically.
- Equipment is changed immediately following the cleaning of blood and body substance spills.
- Equipment is washed/cleaned in detergent and warm water and stored dry between uses.
- Mops with detachable heads and reusable cleaning cloths are laundered between uses.
- It is the client right to have pets live in the home but staff are not to clean any animal waste.

### Pest control (offices)

- The Manager is responsible for ensuring the premises are free from pests with the implementation of a pest control program. Regular inspections for pests are carried out and any infestations treated.
- It is the responsibility of the client to manage pests in their home. Staff can assist with baiting/spraying with store bought products

### Procedure for decontamination of blood and body fluid substance spills

Prompt removal and cleaning of the contaminated area following spots or spills of blood and body fluids is sound infection control practice using the following method:

### Spill kit equipment

- Gloves non-sterile examination gloves or household rubber gloves
- Protective eyewear if the risk of splashing exists
- Plastic apron
- Disposable paper towels
- Disposable cleaning cloth/sponge
- Neutral detergent
- Container for rubbish
- Complete Safe Work Procedure form

### Procedure

1. Apply personal protective clothing
2. Pick up any broken glass or other sharps using forceps or scoop onto strong cardboard material and dispose of into a sharps carefully.
3. Absorb spillage into paper towels and place in leak proof plastic bag for disposal.
4. Clean area thoroughly with detergent, warm water to remove all visible contamination.
5. Dispose of cleaning cloth.
6. Remove and dispose of personal protective equipment.
7. Perform hand hygiene using soap and water or an alcohol based gel.

### ***Cleaning of Equipment/Single Use Equipment***

Equipment (such as hoists, shower chairs etc) that belongs to clients is cleaned following use with a neutral detergent and warm water and dried. Hoist slings are used and laundered in hot water. All other medical equipment (such as wound dressings and needles) are single use only.

### ***Hygiene and Cough***

Anyone with signs and symptoms of a respiratory infection, regardless of the cause, should follow the respiratory hygiene and cough etiquette as follows:

- Cover the nose/mouth with disposable single-use tissues when coughing, sneezing, wiping and blowing noses
- Use tissues to contain respiratory secretions
- Dispose of tissues in the nearest bin after use
- If no tissues are available, cough or sneeze into the inner elbow rather than the hand
- Practice hand hygiene after contact with respiratory secretions and contaminated objects/materials
- Keep contaminated hands away from the mucous membranes of the eyes and nose.

**Communicable Diseases**

Staff use standard precautions and use hygiene and cough etiquette to reduce the risk of contracting or passing on a communicable disease. Staff who have a communicable disease (such as a heavy cold, flu or gastroenteritis) are not permitted to work as our client group are vulnerable to such infections. Staff must stay off work until the symptoms have passed.

Reviewed & Updated:

# Human Resources

## Code of Conduct for Staff and Volunteers

*Aged Care Quality Standards 7- Human Resources; 8 – Organisational Governance*

*NDIS Practice Standards 2 – Governance & Operational Management*

### Staff/volunteers agree to:

- Abide by the NDIS Practice Standards, The Charter of Aged care rights and the philosophy of Wellington Multi Service Center Inc.
- Respect the dignity, culture, sexual orientation, values and beliefs of all individuals. Their right to freedom of expression and self-determination and decision making
- Respect all clients privacy and do not discuss confidential issues of Wellington Multi Service Center Inc. clients with people outside the organisation, regard all information provided to them by a service user as confidential and never disclose personal information to a service user
- Not alienate participants from their family
- Identify and respond to incidents of violence, abuse, neglect, ex exploitation and report these in accordance with the Wellington Multi Service Centre Inc Abuse policy and procedure.
- Act on complaints or concerns about matters that impact the health, safety and quality of all service/supports provided to clients of Wellington Multi Service Centre Inc., and provide services to the best of their ability.
- Will not abuse, in any form, participants, other staff or members of Wellington Multi Service Center Inc. Take all reasonable steps to prevent and response to all forms of violence, exploitation, neglect and abuse of any clients.
- Not give advice to service users or diagnose the condition of a service user's health. If requested by the family as to your thoughts regarding the condition of a service user – refer them to their GP or hospital
- Not harass in any form service users, other staff or members of Wellington Multi Service Center Inc.
- Work in a safe and competent manner with care and skill in accordance with the policies and procedures of Wellington Multi Service Center Inc. Wear suitable clothing and shoes, clean and discrete shirt and trousers (or shorts)
- Take all reasonable steps to prevent and respond to sexual misconduct. Staff/volunteers are not to have sexual relationships with service users or take them to their (staff) homes or engage in a relationship with service users outside of a professional relationship.
- Not take illegal drugs or consume alcohol when on duty or on the premises
- Not accept gifts or purchase any items from service users (except home garden produce)
- Represent Wellington Multi Service Center Inc. in a positive way. Always act with integrity, honesty and transparency
- Adhere to all the accounting procedures of Wellington Multi Service Center Inc.

- Observe all the rules of Wellington Multi Service Center Inc. including those specified in the constitution and any others determined by the Board
- Follow any grievance procedures set down by the Board to try to resolve any conflicts with other staff or members of Wellington Multi Service Center Inc.

**Failure to abide by the above rules may lead to dismissal from Wellington Multi Service Centre Inc.**

**Signed:** \_\_\_\_\_  
(Employee/Volunteer) (Date)

Reviewed & Updated: 19/5/22

## Community Services Leave Policy

*Aged Care Quality Standard 8 - Organisational Governance. Standard 7- Human Resources*

*NDIS Practice Standards 2 – Governance & Operational Management*

### **Policy Statement**

Wellington Multi Service Centre Inc., recognises the vital role that volunteers make to emergency services within NSW. It also recognises the requirement of some staff to attend to Jury Duty from time to time.

### **Policy**

Wellington Multi Service Centre Inc., will support emergency services voluntary work and Jury Duty by allocating Community Services leave to employees who volunteer for these duties.

Wellington Multi Service Centre Inc., will provide staff with normal rostered weekly payment to attend to:

- legitimate emergencies
- training exercises within emergency services
- or Jury Duty.

The following process will occur where Community Services leave is taken:

- The employee must be a member of an emergency services organisation
- The employee must undertake their community service work on a voluntary basis
- Community Services leave must be requested in writing (either before leave required where possible, or after it is taken where there is an emergency) and approved by the supervisor
- Community Services leave could be taken in one block or as separate days
- Where Community Services leave exceeds one week, the employee must speak with their manager regarding further leave to be taken
- Wellington Multi Service Centre Inc., may request evidence that they are entitled to community services leave (this may include a note/letter from the emergency service, photocopy of jury duty letter etc)
- Employees required to attend Jury Duty are entitled to 'make up pay' for the first 10 days of Jury Duty.
- Staff are not to leave the workplace unattended to participate in emergency service duties

Staff who are involved in Emergency Services must inform Wellington Multi Service Inc. of this at time of employment or of intent to join an emergency service

Reviewed & Update 19/5/22



## Police & Working With Children Checks (WWCC) Policy

*Aged Care Quality Standards 1 Participant Dignity and Choice, 2 – Ongoing Assessment and Planning, 7- Human Resources; 8 – Organisational Governance*

*NDIS Practice Standards 2 – Governance & Operational Management*

### **Policy Statement**

Wellington Multi Service Centre Inc., understands their obligation to ensuring all staff, volunteers and executive decision makers of the organisation have, and maintain, a current National Police Check. Wellington Multi Service Centre requires all staff to have Working With Children Check (WWCC). The process for a police check will be transparent and fair and in line with Privacy Act 1988<sup>7</sup> and the State Records Act 1997<sup>8</sup>. The Working With Children Checks are completed by Services NSW. This is a requirement of the Australian Government and is necessary to minimise risk to participants.

Police check & WWCC screening will complement robust recruitment and screening processes to ensure that those working with older people and people with disabilities are suitable for the positions they undertake.

A criminal record check conducted before 1 July 2018 and within the last three years that showed that you do not have a conviction for a prescribed criminal offence, or a criminal record check is conducted between 1 July 2018 and 30 June 2019 and within the last two years that showed that you do not have a conviction for a prescribed criminal offence, or a current New South Wales Working with Children Check clearance for those providing services to children in the NDIS.

### **Policy**

Wellington Multi Service Centre Inc., will ensure that staff, volunteers and executive decision makers who work with the organisation have a current National Police Check. The following process will be undertaken with Police Check screening:

- Police checks and Working With Children Checks will be paid for by Wellington Multi Service Centre Inc.,
- A person may start supervised work prior to obtaining a police certificate if:
  - the care or other service to be provided by the person is essential
  - an application for a police certificate has been made before the date on which the person first becomes a staff member or volunteer
  - until the police certificate is obtained, the person will be subject to appropriate supervision during periods when the person interacts with clients
  - the person makes a statutory declaration stating either that they have never, in Australia or another country, been convicted of an offence or, if they have been convicted of an offence, setting out the details of that offence.
- Statutory declarations<sup>9</sup> will be required in addition to police checks in two instances:
  - For essential new staff, volunteers and executive decision makers who have applied for, but not yet received, a police certificate
  - For any staff, volunteers or executive decision makers who have been a citizen or permanent resident of a country other than Australia after the age of 16

<sup>7</sup> <https://www.legislation.gov.au/Series/C2004A03712>

<sup>8</sup> [http://www.austlii.edu.au/au/legis/sa/consol\\_act/sra1997156/](http://www.austlii.edu.au/au/legis/sa/consol_act/sra1997156/)

<sup>9</sup> <https://www.ag.gov.au/Publications/Statutory-declarations/Documents/CommonwealthStatutorydeclarationform.pdf>

- In these two instances, a staff member, volunteer or executive decision maker can sign a statutory declaration stating either that they have never, in Australia or another country, been convicted of an offence or, if they have been convicted of an offence, setting out the details of that offence. **Note** that a person is entitled to sign a statutory declaration stating that they have not been convicted of an offence if they have been convicted of an offence, but the conviction is a 'spent' conviction.
- Staff are not allowed to work supervised or unsupervised with out a WWCC being approved prior.
- Staff or volunteers will be precluded from working for the organisation if their police check returns the following disclosable outcome:
  - A conviction for murder, sexual assault or child abuse of any kind
  - A conviction and sentence to imprisonment for any other form of assault
  - A conviction for an indictable offence within the past 10 years.
- If a conviction has been 'spent' the person is not required to disclose the conviction. The aim of the scheme is to prevent discrimination on the basis of old minor convictions, once a waiting period (usually 10 years) has passed and provided the individual has not re-offended during this period. Where a person's conviction is considered 'spent' legal advice may be sought. The decision to employ someone with a spent conviction will be 'rigorous, defensible and transparent' in order to minimise the risk of harm to participants.
- If Wellington Multi Service Centre Inc., refuses or terminates employment on the basis of a person's conviction for an offence, the conviction must be considered relevant to the inherent requirements of the position. If in any doubt, Wellington Multi Service Centre Inc, will seek legal advice regarding the refusal or termination of employment on the basis of a criminal record.
- Under the *Fair Work Act 2009* there are provisions relating to unfair dismissal and unlawful termination by employers. More information about the *Fair Work Act 2009* is available at: Fair Work Commission<sup>10</sup>. In addition, under the *Human Rights and Equal Opportunity Act 1986*, the Australian Human Rights Commission has the power to inquire into discrimination in employment on the grounds of criminal record.
- Police Check forms undertaken by staff and volunteers will be securely stored by the organisation for a period of no longer than three (3) months and then shredded to prevent identity theft
- A Police Check register will be retained (electronic data base) by the organisation with the names of staff or volunteers, police check date, police check code/number and renew date
- Renew dates for Police Checks and WWCC will be maintained while under our employment. Police Checks will be completed by the organisation prior to expiry and WWCC will also be completed prior to expiry by staff through Services NSW.
- Staff and volunteers must notify Wellington Multi Service Centre Inc., if they have committed a crime (after a Police Check & WWCC has been undertaken)
- The Chairperson and Manager will make a decision about the ongoing employment of that volunteer or staff member (depending upon the crime committed).

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<sup>10</sup> [Fair Work Commission](#)

## Safe Home Visiting

*Aged Care Quality Standards 1 – Participant Dignity and Choice; 2 – Ongoing Assessment and Planning; 7 – Human Resources*

*NDIS Practice Standards 1 – Rights; 2 – Governance & Operational Management; 3- Provision of Support;*

### **Policy Statement**

Wellington Multi Service Centre Inc., will ensure that staff and volunteers of the organisation are safe in their roles and that they understand the risk associated with home visiting and minimise these risks where possible.

### **Policy**

The following procedures provide a guide for safe home visiting:

- When visiting a new participant, staff must check for information. This may be done through My Aged Care, Plan Managers, Support Co-ordinators etc., to ensure that there are no known risks of visiting that participant at home. Staff must contact a fellow staff member if visit has run longer than planned and they are returning after office hours. Once back home staff are to send text to fellow staff member confirming they are home and safe.
- If there is no documentation regarding risks, make contact with the participant via phone to arrange the visit and check with the participant if there are any dogs, or other risks which you should be aware of when visiting
- Where risks are evident, arrange for the participant to meet with staff at the facility or service for initial assessments or have two people attend assessments.
- The Manager or staff member must undertake a home visit safety checklist to determine risks at the home for staff or volunteers and aim to minimise risks to staff or volunteers
- In some rare cases, Wellington Multi Service Centre Inc., may not be able to visit the participant at all due to the level of risks. Where possible, the service may be delivered elsewhere (for example, if meals are required, these could be arranged to be picked up from somewhere else, or at the facility, or it might be necessary for a family member or friend to pick up the meals from the facility)
- Participants will be asked to restrain dogs when home visiting occurs
- Participants will be asked not to smoke when staff or volunteers are present
- Risks which are obvious must be identified and discussed with staff and/or volunteers to determine best way to minimise harm (for example, if there are paths which are uneven this should be identified on Care Plan and staff and participants advised of this risk)
- At all times in your role as staff or volunteer ensure that your supervisor or fellow colleague knows your whereabouts or planned return time. It should be documented either in a work diary, by texting or other form of communications so the staff member can be located if necessary
- Staff and volunteers must have access to a means of communication should an emergency arise
- Staff and volunteers must take note of exit and entry to the home when they visit and ensure that they are able to exit quickly should the need arise
- Staff and volunteers must only visit a participant's home during work hours and respect the individual preferences and lifestyles of each person they visit
- Where staff or volunteers notice aspects of the home which are concerning (for example, declining hygiene or fall hazards) they must notify the Co-ordinator as soon as possible
- Staff and volunteers must respect the privacy and confidentiality of participants and not disclose information relating to a participant or their home/lifestyle to anyone other than their supervisor
- Where a participant appears distressed or aggressive
  - Attempt to identify why the participant is upset, distressed or aggressive

- Remain calm. Speak to the person in a soothing, calm manner empathetic manner and offer support or solutions to them
- Do not to place yourself or others at risk by challenging the participant
- Maintain your distance from the participant
- If the participant is physically aggressive, remove yourself from immediate danger, but try to remain in the participant's line of sight and identify a safe point of exit
- Allow for exit from the area and do not allow the participant to block point of exit
- Exit and report the situation by mobile phone to your supervisor or manager as soon as possible and request assistance
- After the event, and as soon as practical, the person who was present must complete an Incident Report Form, detailing the situation that occurred and any follow up action required with the participant or themselves
- Arrange for critical incident debriefing and arrange any counselling as required
- Devise proactive strategies to prevent further occurrences
- Where a critical incident occurs (for example, death of a participant), staff and volunteers will make contact with emergency services immediately and notify their Manager (for more information, see Safe Home Visiting DVD provided by NSW Meals on Wheels Incorporated, which can be found in the bookshelf in the back office.
- Debriefing or counselling will be provided to staff or volunteers who have witnessed or been part of a critical incident.

Reviewed & Updated:

# Social Media Policy

Aged Care Quality Standard 8 – Organisational Governance.

*NDIS Practice Standards 2 – Governance & Operational Management*

## **Policy Statement**

Wellington Multi Service Centre Inc., recognises social media as an effective communication tool that can assist with community engagement and the sharing of information. Social media content is subject to the same policies and procedures as other forms of communication.

## **Policy**

When using social media, employees and volunteers are to:

- Ensure personal use of social media is undertaken in personal time (during lunch or before and after work)
- WMSC realises that there may be times to use social media in work hours for work related purposes. It is expected that employees will maintain the high standard of professionalism when on social media during work time
- Not engage in behaviour that is harassing, bullying, illegal or in breach of the organisation's Code of Conduct, whether using an official or private social media account
- WMSC Staff are not to accept personal "friend requests" from clients or volunteer, as this would be breaking the boundaries of keep work and private lives separate
- WMSC volunteers are not to accept personal "friend requests" from clients, as this would be breaking the boundaries of keep work and private lives separate.
- WMSC realises that some staff and/or volunteers may already have social media relationship with clients or volunteers before their employment with WMSC. We do then require staff or volunteers to not discuss WMSC business with clients, other volunteers and other staff members through their social media.
- Represent the organisation professionally when publishing content in an official capacity
- Adhere to the Code of Conduct when making public comment (posting on Wellington Multi Service Centre Inc., behalf or as an individual)
- Ensure all official content has been approved by the Manager or Chair prior to being posted
- Not disclose information or make commitments on behalf of Wellington Multi Service Centre Inc., unless authorised to do so.

Reviewed & Updated:

## Staff employment

*Aged Care Quality Standard 7 – Human Resources*

*NDIS Practice Standards 2 – Governance & Operational Management*

### **Policy Statement**

Wellington Multi Service Centre Inc., will ensure that it recruits staff fairly and transparently and in line with Equal Employment Opportunity principles. Wellington Multi Service Centre Inc., will also ensure that employment of staff is in line with the current Social Community and Disability Award (SCADS).

### **Policy**

#### **Recruitment**

Vacant positions will be advertised, and staff will be employed under the Equal Employment Opportunity Act 1987. All Vacant positions will be advertised with the wording “we are an Equal Employment Opportunity organisation.”

The following steps will be taken to ensure that applicants with disability or special needs are met:

- Potential employees will be encouraged to seek the support of a job agency to complete their resume, address selection criteria and practice for interview process
- The organisation will ask each potential interviewee if there is anything that can be provided at interview to ensure their needs are met.
- Where necessary or required the organisation will provide specific equipment required for people with special needs (for example, hearing loop, interpreter, sign language expert, wheelchair etc)
- Access to the interview area will be considered carefully and ensure that people with mobility needs are catered for and that people in a wheelchair or other aids are able to easily access the facility
- The interview panel will include wherever possible a person with special needs (i.e., Person with disability, Aboriginal, CALD).

#### **Employment**

Pre-employment/Reference checks will be carried out by the Manager prior to employment of staff. Staff will be provided with a Contract upon commencement of work and will be provided with a copy of the Award or pointed to where the current Award can be accessed online. Staff will be encouraged to ask questions about their Award and conditions at any time.

Staff will also be provided with a Job/Position Description which outlines the tasks involved and their responsibilities in the position. Job/Position Descriptions will be reviewed and updated when a staff member leaves and/or during the staff appraisal process to ensure that they are appropriate.

All staff will undergo an Orientation process upon commencement which outlines:

- Requirements of the position
- Code of Conduct
- Work Health and Safety processes
- Introduction to staff and volunteers
- Policy Manual and any other relevant documentation.
- All the above must be completed within one month of employment

Once a person with special needs is employed:

- Discuss specific needs with the employee to determine specific equipment, aids or other requirements within the workplace
- Provide workplace training for other staff or volunteers on working with people with special needs (ensuring that the person with special needs has input into this training)

- Provide support wherever possible to ensure that the employee is able to work to the best of their ability within the environment
- Wellington Multi Service Centre will make reasonable adjustments to make sure workers with disabilities, or physical or mental health conditions aren't substantially disadvantaged when doing their job.
- Undertake ongoing performance support as with other employees, to identify any issues, concerns or ways where the employee can set and meet personal or professional goals.

Staff will be provided with regular supervision and support in their role and will be provided with an opportunity to advance, where possible, or to increase in grades or levels where possible (as per relevant Award).

All office staff are required to hold a current driver's licence to carry out their duties as per their job description. Loss of licence that stops office staff carrying out their duties to the capacity of their job description may lead to dismissal.

Where staff are not performing as expected, they will be given an opportunity to make improvements. Where it is considered that improvements are not possible, and staff may not be performing to expectations, or meeting the requirements of the position, industrial advice will be sought to ensure that the process for disciplinary action is fair and aligns with current Award requirements and/or National Employment Standards (NES).

### **Uniforms/Dress**

All staff are required to wear a uniform consisting of shirt with logo. Pants (long or ¾ pants) shorts or skirts and enclosed shoes. Clothes must be clean and tidy with no rips or holes. No tights, short shorts, thongs, sandals or ugg boots are to be worn.

Wellington Multi Service Centre Inc. will supply staff with 2 Shirts with logo on commencement of employment and will replace as needed for the duration of staff employment. All uniforms and equipment (eg: folder, first aid kits etc) given to staff throughout employment **must be returned** to the office on ending of employment with our organisation.

### **Training**

Staff will be provided with opportunities to develop and to meet personal career goals where possible, this includes attendance at training. Training will be identified by staff, Management, Staff Appraisals and during the Annual Planning process. The Management Committee will approve training where there is the financial capacity to do so and it is budgeted for.

### **Staff Performance Appraisal**

We are committed to supporting staff to improve their efficiency and effectiveness. Staff are expected to perform their duties to the best of their ability and to show a high level of personal commitment to providing a quality, professional service always.

Performance Appraisals are conducted bi- annually in consultation with the staff person and the Manager using the Staff Performance Appraisal form. Performance development reviews are based on the position descriptions. The aims of the review are:

- To allow free and confidential discussions about work between the employee and management
- To discuss the employee's job performance in the context of their position/job description
- To discuss any work problems and search for solutions
- To discuss means of improving work performance including identification of training and development needs or changes to work practices.

Performance issues are not left to the performance development review but are dealt with as they occur. These issues may, however, be raised in the review as part of the overall assessment of the employee's performance.

On completion of the performance appraisal both the employee and the supervisor sign the review form. The staff person and the manager are responsible for implementing any agreed actions (respectively). The Performance Development Review cannot be closed out until all agreed actions have been implemented.

### **Staff Supervision and Support**

Supervision and support are important for ensuring that staff and volunteers are supported in their work and that their work is carried out effectively. Additionally, supervision sessions provide an opportunity to follow up on staff development issues noted in staff development reviews.

The small number of staff working in our organisation means that ongoing supervision and support is continuously provided informally.

To ensure that staff have an opportunity to formally address problems or issues they are provided with an annual performance review. Volunteers are also provided with support and supervision on an ongoing basis and receive additional guidance through volunteer meetings which are held as required.

### **Leave and Conditions**

Staff will be provided in accordance with the relevant Award. Staff will be required to request leave in advance, with a minimum of four weeks' notice where possible (unless an emergency).

Wellington Multi Service Centre Inc., will adhere to the relevant Award and employment conditions always for all staff. This includes seeking further information or advice about industrial issues as required.

### **Time In Lieu Policy (TIL)**

TIL is defined as time a staff member is required to work over and above the normal contracted hours which has been approved by the Executive member or Manager. TIL is a privilege not a right. If staff need to work more hours than contracted on a regular basis the Executive will investigate the cause of this i.e., Workload too high, time management training required etc.

No employee will work additional hours and then claim that time as TIL unless the additional hours have been approved in advance, in the manner documented below. Claims for TIL that have not been approved in advance using the correct process will be rejected. Any TIL accrued or redeemed is recorded on the time sheet.

### **How to Accrue TIL**

Any staff member, that needs to work extra time per day, for any reason, requests approval from the Manager, and prior to working the hours. This approval can be via email or verbally. Claims to accrue TIL not pre-approved will be rejected. Record the additional time worked on the time sheet.

Staff may accrue TIL to a maximum of 7 hours within a 4-week period and accrued at a minimum of 30 minutes lots. TIL can be claimed for travel to conferences, workshops or to catch up with paperwork after attending home visits etc. The Manager is responsible for checking timesheets. Each hour accrue as TIL is calculated as time and a half (eg 1 hour worked is equal to 1.5 hrs in TIL)

### **To redeem Time in Lieu**

Where possible TIL will be taken within the month of the pay period, and at the mutual convenience of the employee and manager. The Manager will approve the redemption of TIL. In exceptional circumstances, TIL will be approved for carrying over and beyond the month; however, it is the intent for the TIL to be cleared as soon as possible and practicable.

Full time staff, depending on individual circumstances, can be out of the office for up to an hour (for personal appointments, family business etc) at any time during the day, without the need to complete Redeem TIL Form. The Manager must be informed prior to this occurring by email or verbally. The



needs of the organisation must come first. Staff that work part time should make personal appointment on days, or times when they do not normally work.

The Manager will approve TIL after considering the needs of the organisation. The Manager has the right to refuse TIL. For TIL greater than an hour a request must be in writing (using TIL Redemption Form) 7 days prior to date of wanting to take TIL and on most occasions will only be approved for a maximum of one day.

The TIL Redemption Form is to be attached to the employee's completed timesheet at the end of each payroll period, by the administrative person.

### **Mobil Phone Usage**

Wellington Multi Service Centre understands the need for staff and volunteers to carry and use mobile phones, when working. Wellington Multi service Centre recommends the following procedures be taken to minimise potential risks which may be associated with using a mobile phone.

All staff and volunteers should apply the following guidelines with regards to use of their mobile phones.

#### Safety purposes:

- Staff and volunteer should carry a mobile phone whenever undertaking tasks outside the office.
- When travelling long distances and vehicle breakdowns.
- For use in an emergencies

#### In vehicles:

- All staff and volunteers are not to use mobile phones when driving a vehicle.
- Drivers are to pull over and stop vehicle before carrying out making or receiving a call.
- Any fines incurred related to mobile phone will be the responsibility of the driver.
- Phones may be recharged in the car, while driving, if the appropriate attachments are suitable.

#### Personal:

- All private calls are to be brief and kept to a minimum.
- Advise caller you are at work and inform them that you will call later.
- In case of family illness/ hospitalisation etc. Staff are to inform the manager of their situation and their need to have their mobile accessible during that time.

### **Alcohol, Drugs and Smoking in the workplace**

Wellington Multi Service Centre Inc. aims to be a responsible employer with regard to the effects of alcohol, drugs and tobacco in the workplace which includes participants home and areas around their property or while caring in the community or at work functions held elsewhere; to meet its obligations under Workplace Health and Safety requirements and ensure that it is not subject to vicarious liability in the case of intoxicated staff, Management Committee members or other guests leaving an Wellington Multi Service Centre Inc. function.

#### **Alcohol:**

- Any staff member presenting for work under the influence of alcohol may be sent home on sick leave by their manager. Repeat offenses will be dealt with under the Wellington Multi Service Centre Inc Discipline Procedures.
- The Wellington Multi Service Centre Inc workplace will be alcohol free.
- At any Wellington Multi Service Centre Inc function alcohol is not provide by the service. It is the responsibility of the volunteers or clients if they wish to purchase alcohol.
- Staff are not allowed to consume alcohol in work hours.

- Volunteers and Clients will be asked to leave any Wellington Multi Service Centre Inc function, if they are intoxicated by the nominated responsible person. Two staff will drive client or volunteer home immediately.
- Wellington Multi Service Centre can request for staff or volunteer to undertake random Blood Alcohol test, at any time.
- Client who are intoxicated at the time-of-service delivery (eg Shopping) will be refused service on that day

#### **Illegal and prescription drugs:**

- No illegal drugs are to be brought on to Wellington Multi Service Centre Inc premises at any time.
- Any staff member presenting for work whose capacity to adequately perform their duties appears to be affected by something they have taken or inhaled, including prescription medication, may be sent home on sick leave by their manager.
- A staff member who repeatedly presents for work affected by drugs, other than those prescribed for them by a medical practitioner, will be dealt with under the Wellington Multi Service Centre Inc Discipline Procedures and offered support and counselling.
- Where a staff member is required to take a prescription medication that affects their capacity to perform their duties, this will be treated the same as any illness affecting work performance. The staff member may be offered sick leave and/or reduced or limited duties for a fixed period.
- Wellington Multi Service Centre can request for staff or volunteer to undertake random Blood Alcohol test, at any time.
- Client who are intoxicated at the time-of-service delivery (eg Shopping) will be refused service on that day.

#### **Smoking:**

Smoking is prohibited within the Wellington Multi Service Centre Inc building. A smoking area is available outside the building for staff/clients or guests that wish to smoke.

Smoking is prohibited within a participant home or in the proximity of a participant's home (eg: footpath, road etc) and is also prohibited when caring for a participant in the community.

If care workers or staff are caring for participants for a long period of time more than 4 hours. Then they are entitled to a 10 - 15-minute break, only if there is another care giver to care of the participant while they take their break, or the participant is able to be left unsupervised.

Reviewed & Updated 19/5/22

## Timesheet Policy

*Aged Care Quality Standard 7 – Human Resources*

*NDIS Practice Standards 2 – Governance & Operational Management*

### **Policy Statement**

Wellington Multi Service Centre Inc, endeavours to keep and maintain an accurate system of record keeping. We use timesheets to pay all employees correctly and within a reasonable period of the work performed. Timesheet information may be used for accounting, costing and planning purposes

### **Policy**

This policy applies to all employees regardless of full-time, part-time and casual employees. This does not form part of any employee's contract of employment. It will commence from 10 March, 2021. This was developed to ensure all legislative and award requirements are met and employees are paid their correct remuneration on time. If you believe there is any discrepancies within a pay period and it is the employees responsibility to follow this up with Bookkeeper and or Manager

All employees are responsible for and must complete and sign timesheets to verify their attendance at work and working hours. Timesheets must be completed correctly with hours worked and kilometres travelled for the fortnightly pay period. Completed timesheets must be handed in or emailed into the office by 4 pm every second Wednesday for payment on Thursday.

Failure to complete and sign a timesheet when required for each pay period, or providing false or inaccurate information on timesheets, may result in disciplinary action. The onus is on each employee to complete, sign and provide accurate information on timesheets. If you require any assistance to complete a timesheet, please contact your manager or bookkeeper prior to the scheduled pay day.

Should any staff member believe there is a discrepancy between the information on their timesheet and the pay subsequently received should notify the Bookkeeper as soon as possible and before the next pay period. If this process does not resolve the matter, the issue will be referred to the Manager

### **EMPLOYEES ACKNOWLEDGEMENT**

I acknowledge:

- receiving the Wellington Multi Service Centre Timesheet Policy.
- that I have read and will comply with the policy; and
- that there may be disciplinary consequences if I fail to comply, which may result in the termination of my employment.

Employees name: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Reviewed & Updated:**

## Dismissal Policy

*Aged Care Quality Standard 7 – Human Resources*

*NDIS Practice Standards 2 – Governance & Operational Management*

### **Policy Statement**

Wellington Multi Service Centre Inc., will ensure that where a dismissal of a staff member is required, the process is fair, impartial and in line with the Fair Work Act, the relevant Award and any industrial relations requirements.

All employees will be provided with the opportunity to make improvements to their work and will be well informed of the policies, procedures and the implications of unsatisfactory work. Where an employee breaches the code of conduct they may be instantly dismissed without warnings.

### **Policy**

Before commencing the process for dismissal Wellington Multi Service Centre Inc., will seek advice and support from an Industrial Relations organisation. More information can also be attained from Industrial Relations NSW <sup>11</sup>. The decision to progress to a dismissal stage with an employee must agree with the Executive Committee/Management Committee and Manager. The process must always remain confidential and only involve the employee, direct supervisor and committee members.

The following process outlines steps that must occur before an employee is dismissed:

**Step 1** - *Employees who are performing unsatisfactorily will be given guidance, so they understand the standards expected of them. They will be helped and given guidance in achieving the expected standards.*

**Step 2** - *Confidential records of any supports undertaken will be made. The employee will be shown and given a copy of the written records and will have an opportunity to comment on its contents. This can be done either in writing or orally. The record will only be placed on the employee's personal file when the employee has been given the opportunity of responding to the record and adding any notations regarding the contents of the record.*

**Step 3** - *Employees whose performance or behaviour is unsatisfactory will be given adequate time to demonstrate a willingness to improve. If at the end of this period the employee shows no willingness to improve in the opinion of the employer, a final warning in writing will be issued to the employee. This notice will inform the employee in writing that disciplinary action up to and including dismissal may be taken if the employee does not cease the unsatisfactory performance or behaviour immediately.*

**Step 4** - *The employer also has the right to summarily dismiss an employee for serious and willful misconduct.*

**Step 5** - *At every stage of the disciplinary process, the employee has the right to have another person or union representative present as a witness.*

**Step 6** – *If for any medical reason that may hinder (short term period) or permanently prevent a staff member from carrying out their Position Description and may cause interruption to performing staff duties to capacity.*

Wellington Multi Service Centre Inc., will encourage staff to explore other options to retain their position. If there is no other option, the committee will review the situation and take into account the impact of the service, clients, fellow staff members and make a discussion on whether to dismiss staff member.

During the dismissal process the Manager will need to ensure that all meetings and interactions are clear and well understood verbally. This verbal communication will also be followed up with a written record of the meeting and signed and dated by all parties. Generally, providing three written warnings

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is good practice before an employee is dismissed for behaviour or not performing duties properly, these warnings will be clear, concise and clearly outline the situation.

Reviewed & Update 19/5/22

# Staff Grievance Policy

*Aged Care Quality Standard 7 – Human Resources*

*NDIS Practice Standards 2 – Governance & Operational Management*

## **Policy Statement**

Wellington Multi Service Centre Inc., is committed to providing a safe, supportive and productive work environment for all staff. Staff will be encouraged to treat each other with dignity and respect at times and to act fairly and professionally.

Wellington Multi Service Centre Inc., will provide staff with a clear internal procedure aimed at resolving staff grievances where these occur.

## **Procedure**

The following outlines the process for dealing with a grievance:

- All grievances will be dealt with in a timely, factual, confidential and impartial manner
- It is expected that all parties involved in a grievance or dispute will have a desire to resolve the grievance or dispute in a co-operative manner and in good faith
- Individuals must not harass or bully the other party or parties involved in the grievance or dispute
- Confidentiality will always be maintained and only those directly involved in the grievance will know about, or be involved in the resolution
- Those involved in the grievance will be involved in the outcome as soon as possible
- Staff involved in a grievance have the right to a support person during the resolution process (this might involve a friend, family member or advocate)
- Where there is a conflict of interest, or perceived conflict of interest the investigator must identify this conflict of interest and remove him/herself from this role

The process for making a grievance is as follows:

1. Complaint or grievance is made with the employee's Co-ordinator in the first instance
2. Staff member is to complete a staff Grievance Form
3. Where the employee has a grievance with their co-ordinator, the grievance must be discussed with the Manager of the organisation
4. The grievance must be documented clearly, outlining the date, times, grievance in a factual and professional manner
5. The co-ordinator or Manager will activate the resolution procedure within a 48-hour period
6. The co-ordinator or Manager will provide information about the grievance to the staff member concerned and request a response about that grievance within a 48-hour period
7. Where possible, both staff, or staff involved with the grievance will meet to discuss the grievance together with resolution options considered and discussed
8. Mediation between staff may be required, and this will occur where consent provided by all parties concerned in the grievance
9. Both parties will be asked to sign off on a resolution to the grievance
10. Both parties will act to resolve the dispute with dignity and respect
11. The co-ordinator or Manager will meet regularly to follow up with the grievance to ensure a resolution has occurred for all parties
12. Where a resolution has not occurred, parties may be required to meet again, or another action sought

13. Where a staff member is found to have breached the Code of Conduct or have acted in a manner inconsistent with the organisation's aims and objectives the Manager and/or Management Committee representative will determine which course of action will be taken – Misconduct or Dismissal.
14. Grievance will be linked to our Continuous Improvement Plan.

Reviewed & Updated: 19/5/22

## Bullying & Harassment

*Aged Care Quality Standard 7 – Human Resources*

*NDIS Practice Standards 2 – Governance & Operational Management*

### **Policy Statement**

Wellington Multi Service Centre Inc., is committed to providing a safe environment for all staff, volunteers where they are treated with dignity and respect. Wellington Multi Service Centre Inc. will not tolerate bullying and harassment of any kind.

### **Policy**

*Bullying* - refers to the unwanted, repeated and unreasonable behaviour (s) to an individual or a group which adversely affects the wellbeing of that individual or group.

Some examples of bullying include:

- Intimidation
- Verbal abuse or threats
- Swearing, yelling or offensive language
- Assigning of impossible or unpleasant or meaningless tasks
- Managers or leaders gossiping or talking about other staff members negatively
- Spreading rumours
- Cyber bullying
- Physical abuse.

*Harassment* - refers to a range of repeated, unwanted offensive behaviours which are disturbing, upsetting or threatening. Sexual harassment refers to persistent and unwanted sexual advances where consequences of refusing these advances are disadvantageous to the employee.

Wellington Multi Service Centre Inc., will do all that it can to provide a culture where staff feel safe and secure and are free from bullying or harassment. Staff will be encouraged and supported to report incidents of bullying or harassment and incidents will be dealt with in a prompt, confidential, fair and equitable manner.

The organisation will ensure that it provides training on bullying and harassment to staff and volunteers on a regular basis. The organisation will act immediately where bullying and harassment is reported or suspected.

Where staff are subjected to bullying or harassment they should:

- Discuss the matter with their direct supervisor in the first instance
- Where the supervisor is the alleged bully or perpetrator of harassment, the victim should discuss the matter with the Manager/President of the organisation (depending upon structure of the organisation)
- Employee should document the incident clearly with dates, times and facts of the incident
- The Manager/Chairperson must investigate the incidence of bullying or harassment within 48 hours of the alleged incident (ensuring privacy and protection of the alleged perpetrator and the victim)
- Both the alleged victim and perpetrator of bullying or harassment will be provided with counselling and contact the Fairwork infoline 13 13 94 or [www.fairwork.gov.au](http://www.fairwork.gov.au) for guidance.
- The Manager/Chairperson must provide the alleged perpetrator with a summary of alleged incident and provide an opportunity for a response within a 24-hour period



- The Manager/Chairperson should discuss the incident and information with their direct supervisor and seek input (for e.g., Chair should seek Management advice or help, Manager should discuss with the Chair or executive committee). At all times the privacy and safety of both alleged victim and perpetrator must be considered
- Where bullying or harassment is proven to have occurred the supervisor must undergo disciplinary proceedings immediately or contact police, depending upon the severity of the act
- Further ongoing monitoring may be required between the complainant and alleged perpetrator
- Where necessary and effective, mediation might be considered or undertaken
- Where bullying or harassment is found to have not occurred might monitor the situation closely or take no action at all
- Where a bullying or harassment complaint is found to be vexatious, the Manager or Chairperson may counsel the complainant or follow disciplinary procedures (depending upon the severity and nature of the complaint)
- Further training for all employees on bullying and harassment will be provided to ensure staff are clear on what constitutes bullying or harassment and how to ensure all staff can be comfortable in their environment.

Reviewed & Updated:

# Volunteer Policy

*Aged Care Quality Standard 7 – Human Resources*

*NDIS Practice Standards 2 – Governance & Operational Management*

## **Policy Statement**

The definition of volunteering is 'time given freely or willingly without any financial gain given or expected'. Wellington Multi Service Centre Inc., recognises the very important role that volunteers play in supporting the organisation to develop and to provide a vital service to participants and the community. Wellington Multi Service Centre Inc., will support volunteers in their role and ensure that they can be as safe and happy as possible within the workplace and in their community.

Volunteers will be supported in their role and provided with training and education to increase their professional development. Volunteers with the adequate skills and abilities will be encouraged to seek employment wherever possible in different roles externally or with the organisation.

## **Policy**

In order to ensure that volunteers are supported in the workplace, Wellington Multi Service Centre Inc., will:

- Recruit volunteers fairly and equitably
- Ask volunteers what their skills are and also, where they may have any challenges
- Volunteers will be provided with aids, equipment and/or assistance where special needs are identified
- Ensure adequate screening of volunteers prior to work placement (this includes police check screening, reference checks and interview)
- Ensure information about volunteers is retained securely and privately at the office (including contact numbers; police check screening information; licence information, insurance information)
- Ensure adequate orientation of all volunteers
- Provide training on relevant aspects of service delivery
- Provide ongoing relevant information to volunteers
- Provide supervision on the job for all volunteers
- Enable volunteers with an opportunity to provide feedback to their supervisor
- Meet with volunteers on a regular basis to provide information and updates of what is happening
- Ensure volunteers understand the processes and procedures of the organisation
- Ensure volunteers understand Work Health and Safety process and reporting procedures
- Provide opportunities for volunteers to gather together and share experiences
- Acknowledge and thank volunteers on a regular basis (via morning tea, certificates of thank you etc.).

Reviewed & Updated:

# Managing Clients with Difficult Behaviour Policy

*Aged Care Quality Standard 7 – Human Resources*

*NDIS Practice Standards 2 – Governance & Operational Management*

## **Policy Statement**

Challenging behaviour is defined as behaviour that is of such intensity, frequency or duration that the physical safety of the person or those nearby is put at risk. The behaviour may also limit the person's ability to participate in daily life and enjoy wider experiences.

## **Policy**

Challenging behaviours may occur for a number of reasons, including:

- An inability to communicate or an inappropriate method of communication.
- Undiagnosed medical condition(s).
- Need for attention or increased support.
- Boredom and/or frustration.

Behaviours included in this definition could be:

- Self-injury that leads to physical trauma and/or disfigurement requiring medical attention.
- Violent or dangerous behaviour that has the potential to cause physical injury or emotional trauma to others. Violent acts may include: verbal abuse, in person or over the telephone, written abuse, discrimination, bullying and harassment, spitting, stalking, threats, ganging up, bullying and intimidation, physical or sexual assault, armed robbery, malicious damage to the property of staff, residents or the Service.
- Persistent refusal to follow necessary treatment procedures for medical conditions such as epilepsy, diabetes or other conditions that, if not treated, will further endanger the person's health (if there is discrepancy about the person's ability to make an informed choice, then application should be made to the NSW Guardianship Tribunal for a decision).
- Leaving the house in a persistent manner without due consideration for their safety and continuously disregarding the concern of staff for their whereabouts (duty of care) and/or creating a nuisance in public including engaging in criminal activities.
- Extreme manipulative behaviour including mischievous accusations against others, inappropriately engaging emergency support services or persistently over-using medical and other professional services.
- Offensive behaviour in public places, or generally behaving in a manner likely to elicit extreme negative community reactions.

This is an approach that considers the whole person, looks at the person's environment and lifestyle, and at what kind of supports the person needs in order to reach his or her potential and life goals.

In providing the "positive approach" in service delivery, the balance between duty of care dignity of risk and occupational health and safety issues must be carefully considered for all parties.

## **Procedures**

To ensure that the Wellington Multi Service Centre Inc., meets its policy objective of appropriately and effectively managing challenging behaviour.

Wellington Multi Service Centre Inc., will:

1. Immediately investigate reports of challenging behaviours from employees, volunteers, family members or the general public.
2. Ensure a written record of the reported incident to be completed within 5 working days, including a description of the challenging behaviour, the time and place, and the antecedents (the events leading up to the behaviour which may have been possible triggers) and the consequences (the impact of the behaviour on the resident and others) is developed and maintained.
3. Involve staff members, key family members (where appropriate) and behavioural consultants (where required) in the development of an individual support plan aimed at supporting the person.
4. Ensure that the individual plan is fully documented, and copies provided to all parties involved in its development.
5. Appoint an appropriate staff member or external consultant to co-ordinate the implementation of the behavioural component of the individual plan and record the future occurrences of the behaviour or other challenging behaviours.
6. Support staff at all stages through service delivery and service may be withdrawn under the WH&S policy and Service Access Policy.

Reviewed & Updated:

# Legislation and Guidelines

[www.comlaw.gov.au](http://www.comlaw.gov.au) (Commonwealth legislation)

[www.legislation.nsw.gov.au](http://www.legislation.nsw.gov.au) (NSW legislation).

Age Discrimination Act 2004 (Commonwealth)

Commonwealth Home Support Program (CHSP) Guidelines

Commonwealth Home Support Program (CHSP) Manual (2017)

Living Well at Home: CHSP Good Practice Guide (2015)

The Aged Care Act 1997 (Commonwealth)

The Aged Care Quality Standards

The Aged Care Quality and Safety Commission

Passenger Transport Act 2014 (NSW)

NDIS Practice Standards & Quality Indicators (July 2018)

NDIS Act (2013)

Disability Act (2006)

Disability Service Act (1993)

Disability Standards (2010)

National Standards for Disability Services (2017)

Disability Discrimination Act (1992)

Convention of Rights of People with Disability (2007)

National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018

National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018

National Disability Insurance Scheme Act 2013

## Generic Legislation and Guidelines

Anti-Discrimination Act 1977 (NSW)

Archives Act 1983 (Commonwealth)

Associations Incorporations Act 2009 No 7

Australian Charities and Not-for-profits Commission Act 2012 (Commonwealth)  
 Australian Human Rights Commission Act 1986 (Commonwealth)  
 Australian Privacy Principles 2014  
 Carers (Recognition) Act 2010 (NSW)  
 Carers Recognition Act 2012 (Commonwealth)  
 Commission for Children and Young People Act 1998 (NSW)  
 Community Relations Commission and Principles of Multiculturalism Act 2000 (NSW)  
 Corporations (New South Wales) Act 1990 No 83  
 Corporations Act 2001 (Commonwealth)  
 Crimes Act 1900 (NSW)  
 Employment Protection Act 1982 (NSW)  
 Equal Opportunity for Women in the Workplace Act 1999 (Commonwealth)  
 Fair Work Act 2009 (Commonwealth)  
 Government Information (Public Access) 2009 (NSW)  
 Guardianship Act 1987 (NSW)  
 Health Records and Information Privacy Act 2002 (NSW)  
 Human Rights and Equal Opportunities Commission Act 1986 (Commonwealth)  
 Industrial Relations Act 1996 (NSW)  
 Industrial Relations-  
[http://www.industrialrelations.nsw.gov.au/oirwww/About\\_NSW\\_IR/Legislation.page](http://www.industrialrelations.nsw.gov.au/oirwww/About_NSW_IR/Legislation.page)  
 Information and Privacy Commissioner. [www.ipc.nsw.gov.au](http://www.ipc.nsw.gov.au)  
 Information on Privacy legislation. [www.adhc.nsw.gov.au](http://www.adhc.nsw.gov.au)  
 Local Government Act 1993 (NSW)  
 Mental Health Act 2007 (NSW)  
 NSW Trustee and Guardian Act 2002 (NSW)  
 Premises Standards 2011 (Commonwealth)  
 Privacy Act 1988 (Commonwealth)  
 Privacy and Personal Information Protection Act 1998 (NSW)  
 Public Health Act 1991 (NSW)  
 Racial Discrimination Act 1975 (Commonwealth)

Sex Discrimination Act 1984 (Commonwealth)

State Records Act 1998 (NSW)

Work Health and Safety Act 2011 (Commonwealth)

Work Health and Safety Act 2011 (NSW)

Work Health and Safety Regulations 2011 (NSW)

Workers Compensation Act 1987 No 70 (NSW)

Workplace Injury Management and Workers Compensation Act 1998 NO 86 (NSW)

## Appendix

**Contains copies of all forms associated with the policies to provide services to all our clients**

