



NORTH WEST
DISABILITY SERVICES

NWDS

“Turning Dreams into Reality”



North West Disability Services

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Participant and Carer Information Handbook

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Welcome to North West Disability Services (NWDS)

North West Disability Services

North West Disability Services provides comprehensive, individually tailored activities, where there is a focus on how the individual can develop life skills, achieve goals, and where desired, work readiness skills.



Mission Statement

To be a 'Centre of Excellence' in the responsive and innovative creation of individual life opportunities while embedding people in their community.

Commitment to Quality

NWDS partners with individuals, their families and circles of support through a person centred approach with the overall aim of achieving their chosen goals. There is an ongoing focus on continuously reviewing, improving and enhancing the support that they receive.

NWDS believes that individuals need to be supported by trained and competent staff. All staff receives extensive training to provide quality service and support, including Certificate III in Disability, driving licence upgrades, compulsory basic training and ongoing competency assessment of essential skill areas.

NWDS has a commitment to quality and continuous improvement and has achieved certification against the Australian Community Industry Standard (ACIS 2018).

Aims and Objectives

Services are provided in accordance with the Disability Inclusion Act (2014), the NSW and National Disability Service Standards and the following aims and objectives:

- The organisation shall provide responsive and accountable corporate governance.
- NWDS shall develop innovative and flexible opportunities within the community to support individual choice and control.
- To advocate and lobby for people with disabilities.
- The service shall seek to achieve quality outcomes for individuals with the best use of available resources.
- Through disciplined processes our staff will be challenged and empowered to excel at providing quality activities and supports to individuals and carers and to achieve a rewarding career.
- North West Disability Service seeks to encourage the volunteer ethic and acknowledge the valuable contribution made by volunteers to the community.
- To promote principles of access and equity and normalisation.

If you would like a copy of any North West Disability Services policy or procedure please don't hesitate to ask for a copy from your Coordinator.

National Disability Insurance Scheme (NDIS)

Service Provision

North West Disability Services is a registered NDIS provider and is available to assist you with activities and services through your NDIS plan. NWDS is committed to providing a Person Centered approach and to deliver service that meets the individual, their family and circles of support needs and wishes. We greatly value and encourage the expansion of Circles of Support to increase the connections and involvement in the lives of individuals whilst also incorporating the person's culture and having choice in staff. NWDS is able to assist participants to develop new interests and goals whilst also enhancing their existing skill areas. NWDS has staff trained and ready to assist you. NWDS charges the TTP rate according to the current NDIS Price Guide.

Support Coordination

NWDS is a registered provider of Support Coordination. The Support Coordination is provided independently to any service provision that is provided to the participant. NWDS Support Coordinator can assist you to implement your plan and assist you with queries and getting services in place throughout the length of the plan.

Financial Intermediary

NWDS is registered to provide NDIS financial Intermediary.

I-Care Attendant Care

North West Disability Services is an approved I-Care attendant care panel provider. We have experienced staff who can work in home or the community to assist with personal care and other supports throughout your week.

Disability Support for Older Australians (DSOA)

North West Disability Services is committed to providing whole of life supports to people with a disability and their family. This includes continuing to provide care after the individual turns 65 years of age. NWDS has a range of individual and group activities that are available.

Individually Funded Activities

North West Disability Services can assist you with implementing your care and activities in an individualised and flexible manner.

Locations- where are the facilities located?

North West Disability Services has five primary locations where group and individual activities are facilitated, but also utilises and access a range of community venues. If you would like to take a guided tour of any of our facilities please feel free to contact the Coordinator of that site to arrange an appointment.



North West Disability Services Head Office- Conie Ave

Address: Baulkham Hills Community Complex, 15A Conie Avenue
Baulkham Hills NSW 2153
Contact telephone: (02) 9686 4155

This purpose built facility offers a wide variety of individual and group based activities for adults. Children's activities are also coordinated and administered from this location. The Head Office Administration of the Organisation is located within this facility.

Lavender Cottage

Address: Building 33, Balcombe Heights Community Complex
92 Seven Hills Rd,
Baulkham Hills NSW 2153
Contact telephone: (02) 9686-4155

This cottage offers group and individual activities which are specially designed to cater for Therapeutic, Music and Recreational Activities. The building has a purpose built sensory garden, tailored outdoor areas, sensory room and a focus on music.

Opal Cottage

Address: 46 Bourke St,
Richmond NSW 2753
Contact telephone: (02) 96864155

Opal Cottage is based in Richmond and it offers a wide range of group and individual activities. Opal Cottage works closely with community groups throughout the Hawkesbury and Blue Mountains regions.



Aberdoon House

Address: Cnr Aberdour and Clower St,
Rouse Hill NSW 2155
Contact telephone: (02) 9686 4155

A historic building located in expansive grounds, which provide a unique and tranquil setting for a range of individual and group art, cooking, card making and craft activities.

The Secret Garden

Address: Off Clydesdale Way, UWS Campus
Richmond NSW 2753
Contact telephone: (02) 9686 4155

The extensive meandering gardens with farmyard animals, woodworking shed, and plant propagation areas, is a joy to visit, explore and even take the opportunity to buy plants from the retail nursery. It provides the community with a space to connect with the healing properties of the land and learn new skills in a safe and supportive environment. There are many opportunities to become involved in group or individual activities.



Gemhill Cottage

Address: 28 Carrington Rd,
Castle Hill NSW 2154
Contact telephone: (02) 9686 4155

Gemhill Cottage provides short term accommodation (respite) for adults with a disability. The service accommodates 5 individuals at any one time. There is a focus on assisting individuals to further develop their independent living skills while staying at the house, as well as enjoying local community events.



The Hills School

Address: Mary Street,
Northmead NSW 2152
Contact telephone: (02) 9686 4155

NWDS Mary Street After School and Vacation Care offers after school and holiday activities. These activities are run from the facilities of The Hills School, Northmead or Lavender Cottage.

EXTENSIVE ACTIVITIES AVAILABLE

A wide range of dynamic and diverse activities are offered throughout the week days, evenings and weekends. New activities are always in development and participants encouraged to talk to us about new ideas and activities that they would like to explore. A few of the activities include:

- Community Garden
- Drama Production
- Basic Computers / I-Pad
- Newspaper Delivery
- Sailability
- Hydrotherapy
- Multicultural Dancing
- Sensory Relaxation
- Healthy Cooking Lunch Team
- Zumba
- Swimming and Personal Grooming
- Music and Choir Production
- Garage Rock Band
- Jewellery and Bead Making
- Yoga
- Fishing
- Exploring Sydney
- Bushwalking
- Tennis
- Library skills
- Scrapbooking
- Golf
- Work Experience
- [New activities are always commencing](#)



Useful Contacts

CEO North West Disability Services ceo@nwds.org.au (02) 9686 4155 www.nwds.org.au

Commonwealth Carer Respite Centres 1800 052 222

Taxi Transport Subsidy Scheme 1800 623 724

Companion Card <http://www.nswcompanioncard.org.au>

NDIS Quality and Safeguards Commission Phone: 1800 035 544 (free call from landlines) or TTY 133 677

Your Coordinator can provide further information on a range of services to meet any future needs for you or your carers.

The NDIS Code of Conduct

The Code is an important part of the NDIS Quality and Safeguarding Framework. It promotes the health, safety and wellbeing of persons with disability, by setting out acceptable, appropriate and ethical conduct for NDIS providers and workers delivering supports or services in the NDIS market. The obligations in the Code are fundamental to the rights of people with disability set out in the United Nations Convention on the Rights of Persons with Disabilities. They are also broad to account for the diversity of people with disability and their support requirements.

The **NDIS Code of Conduct** will require workers and providers delivering NDIS supports and services to do the following in providing those supports and services:

1. Act with respect for individual rights to freedom of expression, self-determination and decision-making in accordance with applicable laws and conventions.
2. Respect the privacy of people with disability.
3. Provide supports and services in a safe and competent manner with care and skill.
4. Act with integrity, honesty and transparency.
5. Promptly take steps to raise and act on concerns about matters that may impact the quality and safety of supports and services provided to people with disability.
6. Take all reasonable steps to prevent and respond to all forms of violence against, and exploitation, neglect and abuse of, people with disability.
7. Take all reasonable steps to prevent and respond to sexual misconduct.

National Standards for Disability Services

1. Rights

This standard means that:

- You will be respected and treated with dignity
- Your service will work to keep you safe
- Your service will make sure that your care and support is private
- Your service will keep your information private.

I am safe and free from harm and my personal story is respected and kept private.

2. Participation

This standard means that:

- Your service will work with you to understand
 - what you are interested in
 - what you like to do now
 - what you would like to do in the future
- Your service will help you to join in activities, and will work with other organisations to make this happen
- Your service will help you to have relationships with the people you choose.

My participation in my community is supported.

3. Individual outcomes

This standard means that:

- You get help to do the things that are important to you.
- Your service provider respects the things that are important to you. Such as your family, your hobbies, your religion, your community, your language or your culture.
- Your service makes a plan with you about the things that are important to you.
- Your service checks how you are going with your plan, and changes it with you when you want it to.



I reach my goals with the help of my service.

4. Feedback and complaints

This standard means that:

- You have the right to tell your service provider that you do not like something or have a problem with your service.
- Your service provider will listen to your complaint.
- Your service provider will help you if you need it to make a complaint.
- Your service provider will explain what they will do after your complaint to fix things.
- Your service provider will make sure they don't happen again.

I have a say about what works and what doesn't work in my service. I have a say in how things can be fixed.

5. Service Access

This standard means that:

- Your service provider must give you information about the service in a way that you understand
- Your service must follow fair rules
- Your service will help you to get support when you need it
- Your service will help you with other options when you can't get access to a service.

I understand what the service offers and access to the service is fair. I am supported with other options when I can't access a service.

6. Service Management

This standard means that:

- Your service provider is managed well
- Your service provider follows the law
- The staff are skilled and supported to do their work
- Your service provider involves people with disability in planning about services



I receive services that are well planned and delivered.

Other Opportunities available to our NWDS Community

As well as the range of regular scheduled activities, there are also a number of other exciting activities and opportunities for individuals.

Short Holidays and Camps

Each year there are many scheduled 3 and 4 day short holidays to various holiday destinations, these are offered to individuals accessing NWDS. The staff support component of these holidays can be charged to NDIS or another funder, if there is sufficient funding in the plan, and if requested by the participant. They offer opportunities for the individual to develop their social skills and form enduring friendships, and to also work on their independent living skills.



NWDS Disco's

NWDS hosts Friday night discos monthly at Conie Ave building from 6pm – 9pm for a small entry fee. NWDS also supports a Disco in the Phoenix Room in Castle Hill RSL several times a year on a Wednesday from 6.30pm - 9.30pm. Each disco offers the opportunity to dress up and then get down and boogie while building friendships and confidence. There are disco lights, groovy music, decorations, light supper, games– a great night all round!

Support requirements need to be negotiated with the Disco Co-ordinator prior to attendance and all individuals with personal care or behaviour requirements must be supported by a carer or staff for the whole evening due to limited staffing on the night! The aim of these events is for everyone to have a safe and fun time.



NRL and AFL Games

Attendance at Friday and Saturday Night football games occurs during the football season. Please call us to book in. Support to attend other suggested sporting events can also be organised.

Table of Eight

Once a month a Table of Eight dinner is held at Conie Ave and Opal Cottage where each individual can choose to come and socialise with others, with a possibility of forming enduring friendships and increasing their social networks. These dinners are organised on a pre-paid booking system. Please talk to the Coordinator if you are interested.

Theatre and Other Events (Socialites)

Throughout the year there are opportunities to attend special events and social outings, please discuss with your Coordinator to arrange.

Community Contribution

At North West Disability Services individuals are encouraged and supported to be actively involved in community life, particularly through community contribution projects.

Giving back to the community is an empowering experience that has many positive outcomes for individuals, including:

- Increased personal satisfaction
- Increased happiness and reduced stress.
- Development of social networks
- Learning new skills or maintaining existing ones
- Gaining work experience
- Meeting new people while contributing in a positive way to the community.
- Increased sense of belonging through interaction and engagement within the community.



Christmas Shoebox Appeal

The Shoebox Appeal gives some Christmas spirit to those who may not have any presents to open on Christmas morning. Each year a group of staff and individuals organise donation of presents and go on a three day road trip to deliver donated gifts to schools, charity organisations and families in rural areas.

Fundraising

Individuals participate in a range of fundraising activities to show support for the community. These include Local, National and International charitable donations.

Daily Requirements of Individuals

To support the activities at NWDS, individuals are asked to provide/ bring the following items each day that they are participating in an individual or group activity.

- A durable bag or backpack
- If assistance with your medication is required during the day it must be packed in a Webster Pak, and listed on a current NWDS Medication Form, that is signed by your Doctor. Any medication that you bring must be stored in a locked section of your bag.

- NWDS focuses on supporting each individual to have a healthy lifestyle which includes assisting individuals to make healthy food choices. Each person is encouraged to bring sufficient food and drink for the day. In summer this includes bringing a refillable drink bottle.
- Due to the nature of some of the activities, it is recommended that food be supplied from home each day, as the ability to purchase lunch is not always possible. However some activities may negotiate this with you individually if it is specifically a skill building area. Most activities in the community do not have access to a microwave or facilities to heat a meal during the day. Food in these programs needs to be able to be eaten unheated.
- A spare set of clothes in their bag if required. You should bring a jumper or jacket to cater for weather changes.

All personal care resources (this includes sanitary pads, incontinence pads or anything else that may be required during the day)

- Morning Tea, Lunch and a water bottle, with an ice pack to keep food chilled. Thickener and cutlery need to be supplied.
- Covered comfortable enclosed footwear is necessary for safety reasons and is a WHS requirement.
- Sensible casual clothing is recommended with each item clearly labelled with your name. Covered shoulders are recommended for sun protection even in programs accessing the outdoors for short periods.
- A sunhat, sunblock and sunglasses. If you will be outside for a significant part of the day please wear long sleeve tops and full length pants in lightweight material to maximize sun protection.
- Individuals should bring their NWDS communication diary each day so activities staff can write in it following completion of activities, this also enables two way communication to occur on a daily basis.
- Other resources as required - certain activities such as work experience or swimming may require additional resources, uniforms, swimming costume, towel etc.



Specialised equipment: other items that would assist during the day (e.g. mobility aids, wheelchairs or mealtime assistance equipment).

Please contact us if you have any questions regarding the above information

Our duty of care when providing services

North West Disability Services has a range of responsibilities in providing quality care to all our participants. The following is a detailed list of our daily activities requirements:

- Ensure safe and quality activities to all our participants.
- Record the attendance of participants in our activities.
- Provide a high level of quality and dignity in providing personal care.
- Communicate with carers daily in regards to activities that individuals have been involved in and any changes to an existing activities.
- Provide information and support to families to



ensure they are aware of their rights and responsibilities and where required assist with sourcing independent advocacy or interpreter support.

- Maintain a process to support Participants to maximise their independence and to exercise their rights about choice of lifestyle.
- Ensure all individuals have nutritional needs met on a daily basis.
- Support individual procedures that encourage maximum participation.
- Communicate with carers in the event of sickness or injury.
- Report any behavioural concerns on a daily basis.
- Transport individuals in a safe manner whilst in the activities.
- Ensure the communication needs of all individuals are met.
- Promote a positive image of individuals with a disability in the community.
- Provide information to participants and their family in a timely manner regarding the activities.
- Empower and assist our individuals to work towards their chosen goals.
- Maintain privacy and confidentiality.
- Engage in infection control practices to maintain a hygienic environment.
- Maintain a safe place of work for staff, including community venues and individual participant's homes.

This list is only an overview of our most important responsibilities!!!

Your Responsibilities whilst accessing Activities

1. Phone if late or when unable to receive service.
2. Be polite and courteous to our workers.
3. No smoking inside the building or bus or when with our workers, and abide by the No Smoking Policy whilst accessing service.
4. Clean up if you make a mess, assist or instruct staff on what needs to be cleaned up.
5. Be involved.
6. Be considerate and show respect to our workers, and treat them as you would like to be treated yourself.
7. Show your appreciation and understanding to our workers.
8. Not to physically or verbally assault workers, or any member of the community.
9. Never engage in racial discrimination against our workers or other individuals.
10. To let us know if you are unhappy about anything so we can assist you to resolve it.
11. Not make inappropriate sexually directed comments to others and not to sexually harass any person, physically verbally or otherwise.



12. Not to wilfully damage equipment or resources of the service, and to provide reimbursement where damage or loss is sustained.
13. Individuals are to adhere to the WHS requirements whilst participating in activities, which includes partaking in risk assessments and engaging in behaviour that does not endanger themselves or others.
14. The service area coordinator can suspend service when violent or disruptive behaviour at/or away from the service, where such behaviour presents a physical or emotional danger to other individuals, staff or the community or whether the behaviour is self-directed or directed at any staff member, another individual or any other person.

If we come to your Home

Some services are provided in your home, rather than you coming to our centres or participating in community access. There are some WHS regulations that you must adhere to if we come to your home, as it becomes our staffs' workplace.



1. No smoking in the house or where smoke will enter the house whilst an NWDS worker is in your home.
2. No violence or swearing whilst there is an NWDS worker present or towards any NWDS employee.
3. There must be no sexual harassment towards an NWDS worker.
4. No one must approach the worker to request personal phone numbers or to request contact with them outside of the designated service times.
5. All people who remain in the house whilst service is conducted must remain appropriately clothed and behave appropriately towards the NWDS worker and towards each other.
6. Visitors to the house should remain minimal and the NWDS worker should be advised of possible visitors **before** the service commences.
7. If for cultural reasons you request shoes be removed inside your home, as it is a legal requirement that our workers must have covered footwear on at all times, we will provide shoe covers for our employees to use so we may continue to remain respectful.
8. There must be a working smoke detector and electrical safety switch fitted to your house.
9. There must be Fire Extinguisher / Fire Blanket available in the event of an emergency.
10. There must always be a First Aid Kit available.
11. Your pets must be kept **secured** safely away from where service is taking place, preferably outside of the area where service will be delivered, making sure the worker does not need to come into contact with them at any point.

12. There must be no rubbish / dangerous materials left where service is to take place, the worker can deny service if they feel that the environment is unsafe for any reason.
13. There must always be adequate lighting both outside your house (front porch light to always be working) and inside your house – especially if our workers are providing service at night.
14. A WHS Home Inspection will be conducted at the commencement of service with you where possible issues / gaps will be identified before service can proceed; this will be reviewed every 3 months by your regular worker.



Evacuation Procedures will be discussed with you at the initial Home Inspection, and will need to be practised by the NWDS worker and the individual at least once every 3 months.

These are a few of the most important legal requirements that you must adhere to in order for NWDS to conduct service for you at your home. Please remember that these are legally binding and not at the discretion of NWDS. If you refuse to adhere to these WHS requirements, we may not be able to provide in-home service to you.

Interpreter Services

Cultural and linguistic backgrounds of individuals are considered in the development and facilitation of all activities. If required, interpreter services to assist with discussions and meetings can be provided.

NWDS will be able to organise telephone translation services for initial interviews, and face-to-face interpreter services for the more complex follow up interviews.

The Migrant Resource Centre / Migrant Service Agencies can provide information and support for overseas-born residents of Australia, particularly those who have arrived in Australia recently. A national enquiry line may be used for contact - phone 131881.

Where possible staff of similar cultural backgrounds are rostered to work with individuals, and if specific staff are requested for service provision, all care will be taken to ensure this occurs.

Advocacy

North West Disability Services can provide contact information and referral to independent Advocacy Services upon request at any time an individual feels they may need assistance. Individuals have the right to independent advocacy and the coordinator can provide information and assist with gaining independent advocacy for you. NWDS staff will assist with accessing this service when the individual may not be able to initiate the process themselves. You have the right to have an advocate present to assist you if you have a complaint.

Self Advocacy

- Self-advocacy skills are important for everyone. Self-advocacy is simply acting on your own behalf without using a third party to negotiate outcomes
- Self-advocacy is about communicating needs and wants to someone else. It involves taking responsibility for choices and decisions.

Developing Self Advocacy

- In order to be a good self-advocate it is important to have the following:
- An understanding of their rights and responsibilities
- An understanding of their own abilities
- An understanding of what having a disability means in a community environment
- An understanding of what options are available
- An opportunity to develop and talk about an action plan

What Staff Will Do

- Encourage the Participants to find opportunities to develop self-advocacy skills
- They can also support Participants to solve any difficulties that arise when at NWDS
- Provide and praise for genuine effort
- Working with Participants and families is a partnership and both the person being helped and the person doing the helping are equally important



Exiting NWDS

An individual may choose to withdraw from NWDS at any time for any reason, either on a temporary or permanent basis. Each individual is required to meet Cancellation timeframes as set out in their Service Support Agreement. All individuals are welcome to re-apply for a position with NWDS where they will be reassessed on an individual basis.

Voluntary Exit

Where the individual chooses to withdraw from the service. NWDS will provide information to assist the individual in locating a suitable service to move to and minimise the risk of the individual receiving no services. When requested by the participant, NWDS will share information with the chosen service provider to facilitate a smooth transition to the new provider.

Involuntary Exit and Suspensions

The service area coordinator can suspend service when violent or disruptive behaviour at/or away from the service, where such behaviour presents a physical or emotional danger to other individuals, staff or the community or whether the behaviour is self-directed or directed at any staff member, another individual or any other person. NWDS will commence procedures to ensure that the individual can return to NWDS at the earliest time, and that all staff working with the individual receive training to address the issue to ensure that the individual can be supported fully to engage with their activities and the community and are not restricted from opportunity due to less than high quality behavioural developmental support.

Occasionally through review of behaviour that has resulted in a suspension, it may result in a decision by the family or NWDS Management that the individual's behaviour is beyond what can be supported with resources at NWDS and may lead to exit of the person. NWDS will provide information to assist the individual in locating a suitable service to move to and minimise the risk of the individual receiving no services. When requested by the participant, NWDS will share information with the chosen service provider to facilitate a smooth transition to the new provider. If there is behaviour of significant risk to the staff or participants of the chosen

new provider, NWDS is legally obliged to inform the participant that the new service provider must be informed of this information. This ensures mitigation strategies to be put in place prior to commencement and ensures smooth transition.

Confidentiality & Privacy

NWDS adheres to Privacy Legislation and implements the Australian Privacy Principles. Prior to commencement, information will be collected from the individual's support network to assist in the development of an individualised support file. This details the full support requirements of the individual, and will also include creating an Individual Service Support Agreement which specifies the activities that the individual will be participating in, costs payable, WHS requirements, consent information, rights and responsibilities of both the individual and NWDS, cancellation policies and maintaining privacy information. The information is strictly confidential and only accessed by support staff working directly with the individual. The information is kept in a locked cabinet at all times. Individuals and their carers are able to access their file, by appointment. The information is evaluated annually and updated as required. This information is stored according to legislative requirements.



Privacy Statement

The Australian Privacy Principles is legislation developed by the Australian Government to ensure your privacy and confidentiality of information is maintained at all times.

NWDS adheres to Privacy Legislation and implements the Australian Privacy Principles. The provisions set out below describe how North West Disability Services will deal with privacy issues.

Manner and purpose of collection

The information is necessary for North West Disability Services to provide a vigorous and professional approach to service delivery. The information will be collected in an informed and lawful manner.

Collecting information directly from individuals

North West Disability Services will take every step to tell Individuals why we are collecting personal information, what laws give us authority to collect it, and to whom we will disclose it to.

Collecting information generally

North West Disability Services will take every step to ensure the personal information it collects is relevant for the purpose it is collected, is up-to-date, correct and complete and is not collected in an unreasonably intrusive way.

Storage and security

North West Disability will take all reasonable steps and provide all reasonable systems to ensure that personal information will be stored securely to prevent its loss or misuse.



Access and amendment

North West Disability services will take every step to record the type of personal information and to give Individuals access to personal information about them. Personal information can be amended or corrected if it is incorrect.

Information use

North West Disability services will keep accurate, complete and up-to-date personal information; using information for a relevant purpose; and only use the information for another purpose in special circumstances, such as with the Individuals consent.

Disclosure

North West Disability Services may disclose personal information to someone else, for example another agency. This can only be done in special circumstances, such as with the Individuals consent or at the participant or person responsible request. There are some circumstances where NWDS is required to release information about the participant with or without the consent of the participant or person responsible, these include a medical emergency, where there is an issue of child protection, a crime has been committed, mandatory reporting or reportable incidents are required, or a court subpoena is requesting information.

For more information about Australian Privacy Principles please see the reference section at the back of this document.

What not to bring to activities

- Valuable items are not recommended at the Activities, as we cannot assure their safety (e.g. DVD's, I-Pod's, I-pads (if not for communication or for goal progress) and other additional items).
- Items that could be dangerous to others- chemicals and solvents, sharp items, weapons.
- While staff working in all areas of the service will make every effort to care for property, we cannot take responsibility for any lost or damaged property. This may include lost or damaged equipment including; wheelchairs, personal care items, mobile phones, music players etc. Any items accompanying an individual to activities must be clearly labelled with the individual's name.
- Medication loose in bags- including creams/ointments, vitamin tablets and paracetamol.
- Dangerous items or objects that may present a danger to self or others.
- Excessive money- individuals are advised to only bring money for their daily requirements. Any money that is being paid for invoices should be directed straight to administration staff upon arrival.
- **Items causing SEVERE ALLERGIES-**
Latex Products – such as *gloves, balloons and band aids* that contain latex. A current participant has a severe allergy to these items.

Nut products and seeds- such as *peanuts, peanut butter, poppy seeds and Nutella*. Current participants have a severe allergy to these items.



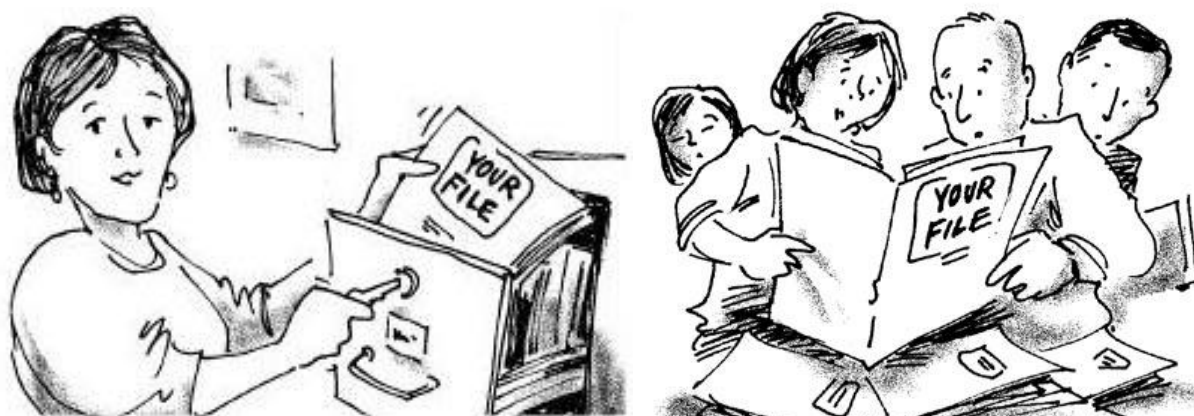
Complaints, Feedback and Concerns



NWDS prides itself on its long standing culture developed around open and constructive communication. Individuals, staff & carers are encouraged to express any concerns or feedback that they may have, in a timely manner. This also includes specific issues surrounding proposed changes in personnel. Individuals are informed of the availability of advocates and interpreters and are encouraged to utilise these services. NWDS staff will assist individuals to access this important service where they are not able to initiate the process themselves. Individuals are aided by NWDS staff to be aware of their right to utilise Advocates to assist and support the individual during complaints management processes. Each family is informed of their right to choose who they would like to discuss the complaint with. The process is documented clearly to assist in prompt and appropriate follow up. All staff are aware and proactive in recording and assisting with this process and receive training on what they can do to assist the process.

Ongoing feedback is important and assists with improving activities quality and individual satisfaction. Outcomes from this process provide feedback for the CEO and Board Members as well as providing training opportunities or acknowledgement to other relevant parties.

ALL COMPLAINTS WILL REMAIN CONFIDENTIAL & THEY WILL BE STORED IN YOUR LOCKED FILE.



What Do You Do If You Want To Complain?

Talk to the person involved or someone that you trust to speak to someone on your behalf. This could be a staff, family member or advocate.



Arrange a meeting between the people involved, you have the right to bring an advocate or person to support and assist you, and help you speak about the issues and come to an agreement or ways to work things out.



IF YOU ARE STILL NOT SATISFIED:

Speak to the CEO



or phone the

- **CRRS (Community Resolution and Referral Service)** 1800 880 052
- **NSW Ombudsman** 9286 1000
- **NDIS Commission** Phone: 1800 035 544 (free call from landlines) or TTY 133 677

These complaints resolution images are borrowed with permission from CRRS.

NDIS Quality and Safeguards Commission

The NDIS Commission wants to make things better for NDIS participants.
We want to:

- protect your rights
- help other people know and understand your rights
- help you receive good quality services
- keep NDIS participants safe

NDIS Quality and Safeguards Commission

- stop people with disability from getting hurt
- see if NDIS providers are following the rules
- help NDIS participants, families and carers who feel:
 - o unsafe
 - o unhappy with their services
- find ways to improve the NDIS.

They are independent –work separately from other parts of the NDIS.

There is more information on their website about:

- **the NDIS Commission**
- **what it means for you.**

www.ndiscommission.gov.au

You can also call them on 1800 03 55 44. This is a free call from landlines.

Hours of Operation

North West Disability Services has lots of different group and individual activities on weekdays, evenings and weekends, with various hours of operation. These timings are usually the same each week. Alternate hours and timetables may be made depending on individual need.

Individuals who have chosen to access these activities can only be admitted within the building from the documented start time, as we do not provide any supervision prior to this time, unless it has been clearly negotiated in advance and staff allocated for support. The activities are staffed until the documented finish time and the staff finishes at this time. It is expected that the individual will be picked up prior to the finish time of the activity. If the activity timing is not suitable for the individual and their family there are opportunities for families to discuss with the Coordinator, multiple program extension activities or alternative timings. If you have not arranged for an ongoing later finish time, please contact us at the earliest opportunity if there is an unforeseen occurrence that means you may not arrive by 3pm. This enables support staff to be arranged. We have a Late Pick up Policy that outlines the process of repeated late pick-ups; several instances may incur an expense to the family.



Gemhill Cottage

The Cottage operates 24 hours a day for the whole year including public holidays. Preferably drop off and pick up times are scheduled before 10.30am and after 3.30pm to facilitate individual and group community based activities during the day.

Medication and Sickness

Medication Policy:

- Any individual who requires assistance with the administration of medication while they are participating in activities must have their medication packed in a Webster Pak, and this must be accompanied by a NWDS Medication Form that has been filled out and signed by your Doctor.
- ALL medication to be administered must be noted on the Medication Form, this will be sighted by your coordinator before commencement of services.
- Any individual who does not have a correct Medication Form OR the medication does not match what is stated on the form will not be able to have their medication administered by NWDS staff.
- The carer will be contacted to discuss options for rectifying the issue, and where consent given, the individual's doctor will be contacted to gain information regarding the medication and its possible side effects.



Sickness:

- At NWDS there are numerous individuals who have decreased levels of immunity to infectious disease.
- To limit the spread of these infections it is requested that individuals who are sick stay home and recuperate.
- Everyone is encouraged to practice good hand hygiene and use cough etiquette and self isolate if they are unwell.

- If an individual becomes unwell during the day, contact will be made to their carer with the expectation that they can go home to recover.
- Please find below the details regarding the most common illnesses.

Covid-19

This is an extremely contagious virus and can quickly pass from one person to another. Some people die from this virus so it is extremely important to be vigilant and follow the Covid-19 plan. It is important that no one comes to activities when they have been to a hotspot location, have signs of illness or a temperature over 37.5 degrees. See attached Covid-19 Policy.

Cold Sores

This is a contagious virus and poses a risk to other individuals and support staff when the sores are weeping or crusting over. Cold sores need to be covered at all times.

Gastroenteritis and Cold / Flu

Easily spread by coughing or sneezing, and inadequate hand washing. If an individual has these illnesses they need to stay at home until they are no longer contagious.

Whooping Cough

Easily spread by coughing and inadequate hand washing. Due to the seriousness that Whooping Cough presents to some of our individuals, staff are instructed to go for a blood test at the first sign of a bad cough to help minimise the chances of whooping cough entering the Centre. It is asked that Families and Carer's also refrain from sending individuals for the day if they too have a bad cough and encourage them to seek medical testing so that they can be treated appropriately and recuperate quickly.

Sickness not only affects other individuals attending the service, but the staff providing the support and may influence the consistency of the staffing activities that is provided, if staff catch a contagious illness.

General Information

Preventing Abuse and Neglect during Service Delivery

All NWDS staff receive extensive training on assisting individuals to prevent adverse issues in any form. There is full training conducted with every staff member in the prevention of abuse and neglect of individuals; this includes mandatory reporting procedures. There is also extensive training about bullying and the management of incidents of bullying both individual and staff related.



VOOHC Reporting

As a mandatory requirement, all Services are required to provide a non-identifying report for children (0-18yrs) if they are participating in overnight care (Voluntary Out-of-Home Care - VOOHC). If you do not want the individuals' information sent to VOOHC register please advise your coordinator in writing. Whilst respectful of your choice, please be aware that this choice may create limitations to your activities options (no overnight activities for children). If you would like more information about this please discuss with your coordinator.

Electronic Media Use

Electronic Media access is restricted during activities where individuals are using computers and building skills in IT. Each individual's use of social Network sites such as Facebook and You Tube access are not able to be closely monitored at all times by staff at NWDS. We greatly encourage the appropriate use of these sites and will provide as much guidance or supervision as is possible in a busy group based activities.

NWDS staff are not allowed to 'befriend' Individuals outside of NWDS through these sites as this is a direct breach of Code of Conduct. Participants must be aware of this so that when a staff does not follow through on these 'friend' requests they are not disappointed.



Individuals are also asked not to post photos of staff and other individuals that they have taken whilst with NWDS onto the internet, as this may be done without the consent of each individual involved and is a breach of their privacy.

Communication – A Consultative Approach

In an effort to provide solid & ongoing two way communication between staff and carers, communication diaries are utilised to report on daily activities and to pass on other relevant information. NWDS provides each individual with a diary at the beginning of each year. We find these to be extremely beneficial & contain most information about upcoming events and activities specific information.

In addition the coordinator or another allocated staff member will contact the Family or Carer regularly to maintain lines of communication, and offer an avenue for feedback; this is in an effort to genuinely make sure everything is going well and being available to offer assistance if needed. During this conversation questions will be asked about any upcoming cultural events that could be recognised and incorporated into the Participants activities.



It is also helpful if carers can report on any unusual behaviour, changes at home or concerns so staff can be prepared for the type of day that the individual may have, & if it may impact on any factors within the activities. Staff will initial any entries at the beginning of the day when diaries are collected from individuals to indicate that they have been read. Staff will inform their Coordinator of any entries that require action. It is very helpful if carers can also do the same to acknowledge the information.

Please keep an eye out for additional notes, activities information, and newsletters that could be stapled into diaries as this saves paper and postage.

There are news bulletins and information flyers on new services, local workshops and community events that may be



of assistance to our families; NWDS encourages carers to provide us with an email address, that they can check regularly, so that we can provide them with additional information. Thank you for your assistance.

Person Centred Planning (PCP)

Purpose of PCP

The purpose of the annual Person Centred Plan is to focus on the individual's unique interests and preferences, as well as tailoring individualised supports which enhance and promote independence. There is a focus on assisting the individual to make new connections and opportunities in the wider community. NWDS will strive to tailor individualised support to achieve goals, for the future, and will aim for social inclusion, valued roles and community participation. Each participant NDIS goals are incorporated into this process.

Objective of PCP's

North West Disability Service review's and record's clear and specific goals for each individual in a documented Person Centred Plan. This process is inclusive and individuals are encouraged to invite their extensive support networks to be involved. This may involve advocates, friends, family members, therapists, and other people, as well as NWDS staff. Information and action that results from the meeting is recorded, and actioned in a timely manner with feedback of progress provided to relevant parties. A copy of the PCP is signed and given to the Individual, carer and all attendees within two weeks of the PCP meeting.

Timing and Frequency of Reviews

North West Disability Services completes Person Centred Planning once a year. Additional reviews are available on request.

PCP's are scheduled by the organisation in consultation with the carer and participant, considering the availability of the parties that want or need to attend. NWDS offers great flexibility in timing, format and can assist in many ways to maximise the support networks ability to be involved. An interpreter can be utilised as part of this process.



All Person Centred Planning Meetings are facilitated utilising a generic agenda, but other discussion items may be added to the agenda where necessary. Prior notice of specific discussion is provided to carers (for example- issues they have raised with an existing activity). An important part of this discussion involves the sharing of information concerning progress towards completion of goals, general activities involvement, and future opportunities to build on their current skill levels.

As part of the person centred planning process there is recognition and discussion of the Participants culture to incorporate upcoming cultural events in their service delivery. This can also include opportunities to select staffing of similar cultural backgrounds and interests.

Close Down Periods

The group based services run throughout the year with new activities being developed and commenced according to emerging need and Participant / carer requests. Generally in the warmer months there are more outdoor and water based activities and during the colder months some more indoor venues accessed.

There is a 2 week close down period from Christmas to the second Monday in January, each year where normal activities will not be offered. Each individual can choose to participate in these closedown periods or to continue to access individual or small group activities of their choice with their funding.

Individual community based activities continue to operate as scheduled and are confirmed prior to the close down period and these families are provided with the supervisors contact (On Call Coordinator) to make changes or notify of absence. It is assumed that these will continue according to their regular schedule unless they are cancelled by the participant or carer.

After School Care operates during NSW Public School Terms except for Pupil Free Days or Public Holidays, and Vacation Care for two weeks during each School Holidays. Vacation Care activities operate during school holidays and can run within the closedown period.

Gemhill Cottage continues to operate during these closedown periods and is open every day of the year unless otherwise advised.

Quality Assurance

As part of NWDS's ongoing commitment to quality and continuous improvement, carers are asked to complete a Quality Assurance Questionnaire each year. This gives carers and individuals a constructive pathway to provide feedback on the service provided.

Transport Service

Transport Services are generally not included in group based activities but may be offered at an additional cost. Some activities have a transport service available. Please speak with your coordinator regarding your transport need and the availability and associated costs of this.

Companion Card

Every Individual who is eligible is encouraged by NWDS to apply for a Companion Card. This is a Federal Government initiative to assist with the costs associated with having a carer supporting you in order to access services such as transport and social / recreational activities.



The Companion Card entitles your carer to gain access for free, which will significantly reduce the costs associated with accessing the community.

Please contact your coordinator for further information; NWDS where required, will assist with the application. You may also like to visit www.companioncard.gov.au



Activities Costing and Invoicing

Every Participant and their family are involved in the development and selection of their activities. During this discussion the Coordinator will offer different choices and a range of costs associated with these choices. Every effort will be made to assist you to minimise the cost of receiving a service. Each individual will receive an invoice covering the cost of the activities they have chosen. These activity costs cannot be charged to your NDIS plan. These invoices can be paid off all at once or in monthly instalments. These invoices must be paid in full before the end of the scheduled activities.

Activity Cost Reduction due to absence

In group based programs there is no cost saving to the service in providing credit for the service not used, as staffing is still needed to support the other participants in the group. NWDS meets NDIS cancellation and claiming costs requirements. Where a two full working days written notice is provided, for a absence from service, no funds will be claimed and activity costs will not be charged for the absence. It is important to note that North West Disability Services (NWDS) attempts to provide a stable and consistent atmosphere to provide services as many of our staff are permanent and working on full time basis. Instances of short breaks and sickness with no notice are not able to be unclaimed.

Where transport is contracted, daily changes to agreed transport cost cannot be reduced as arrangements cannot be changed at short notice. One (1) weeks written notice is required to cancel a bus run and not pay the transport cost.

All Invoice adjustments will be made as changes are implemented and may be credited or debited against the current invoice period, or if the invoice is already paid, as a credit towards future Invoices. Adjusted invoices will be sent to the participant or carer each time a change is made. NWDS is committed to meeting its service agreements with our Participants and ensuring that staff and resources are contracted and available to meet our commitments; establishing a safety net for our Individuals with assurance of ongoing service delivery.

In a medical emergency, an ambulance may be required, the Participant is responsible for payment of any costs associated with receiving this service.

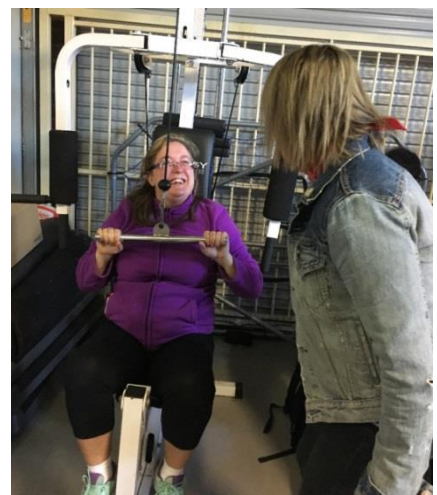
Changing and Adjusting your Scheduled Activities

NWDS requires two weeks' notice of changes to your activities, please talk to your Coordinator or forward an email with details of the requested change. This enables staff training and changes to documentation to occur to facilitate a smooth transition. If necessary the coordinator will be in contact with you to discuss further. Activities changes can be very disruptive to individuals and activities. We will make every effort to assist you with activity issues and adjustments so they can be completed with minimal disruption and within a short timeframe.

Risk Assessment and Supporting Challenging Behaviour

North West Disability Services has a commitment to providing a safe environment for individuals and staff to ensure it meets WHS requirements. Extensive risk assessment processes ensure a safe and comfortable atmosphere for individuals and staff. Part of this process is ensuring that all individuals are thoroughly risk assessed to ensure full knowledge of any possible risks. Your assistance with providing accurate information to develop the risk assessment is highly important.

Where an individual exhibits or demonstrates Challenging Behaviour, NWDS makes every effort to analyse, assess and provide support to reduce and manage individual behaviour. The NWDS team have specific skills and training in this area. The team has a strong collaborative and consultative approach when relating to presented issues. The team's main role is to work with individuals and carers to reduce issues relating to Challenging Behaviour. There are a variety of methods utilised in this process. In an attempt to provide the very best service and to ensure we are as informed as



possible, the NWDS Board have requested that we ask all families to provide notification of any incident, change or variation to routine that may affect the temperament or functioning of the each person attending the service.

We know this will vary from person to person and the need for information may also vary greatly. We therefore ask that you consider what may cause an impact and ensure NWDS has the information to support the person involved and are able to prepare staff to maintain a safe and positive environment for all.

We request that NWDS has information regarding any incidents or near misses at the individual's home that may have put other house mates, family or staff at any risk of injury. Also information on any major change or trauma in the household or particular incident or escalation in behaviours at home that could also be transferred to NWDS and or require our support.

A phone call to a Co-ordinator for more serious concerns would be required. For more minor instances please provide information to staff at the handover and include in the diary if appropriate. In a group home situation, such information will also include, but not be restricted to, any incident reports, documentation related to incidents and behaviours, changes in medication, changes in routine and any other triggers or agitation that may have occurred in the home.



As you are aware, if there are any incidents, agitation or issues occurring in the home; a Participant's behaviour at the day service can be affected. It can change the way they may usually respond to a particular activity, task or environment. This unpredictability is a risk if NWDS are not informed. If we are not informed we cannot provide the safest environment and service possible to the individual and also other participants and staff.

The NWDS Board has advised that due to our need to mitigate all Workplace, Health and Safety risks we ask for confirmation that this information and documentation will be provided for us when it arises. As always, all information will be maintained confidentially and will be used to support best options for the individual.

Where an individual arrives giving the appearance of being in an agitated state and at an increased risk of engaging in behaviours of concern (actions that could put others or themselves at risk) the individual will not be accepted for service. The decision is made in consultation with a senior staff person.

Thank you for choosing North West Disability Services to provide activities and support for your individual.

REFERENCES and POLICIES

Please visit our website www.nwds.org.au for quick links to:

- Participant and Carer's Newsletter
- Calendar dates and Closure dates
- Individual and Carer support services

Included in this publication are the following Policies:

- Late Pick Up
- Medication
- Infection Control
- Complaints
- Exiting the Service

Other Policies that are available to be viewed at any NWDS location or electronically by request include:

SERVICE DELIVERY POLICIES

1.1 Service Access Policy

1.1A Service Agreement Policy

1.2 Individual Needs Policy

1.3 Decision Making & Choice Policy

1.4 Privacy, Dignity and Confidentiality Policy

1.5 Participation and Integration Policy

1.6 Valued Status Policy

1.7 Complaints Handling Policy

1.9 Family Relationships Policy

1.10 Protection of Human Rights and Freedom from Abuse Policy

1.12 Advocacy Policy

1.13 Behaviour of Concern or Risk / Assault Management Policy

1.13A Gemhill Cottage Emergency Procedures

1.14 Cleaning and Maintenance Policy

1.15 Management of Waste Policy

1.16 Participants Innovation Meetings Policy

1.17 Death of a Participant: Action Upon Sudden Death Policy

1.18 Drug & Alcohol Policy

1.19 Service Delivery Fees and Charges Policy

1.20 Fire Drill/Emergency Evacuation Policy

1.21 Guardianship Policy

1.24 Person Centred Planning (PCP)

1.25 Infectious/Communicable Diseases Control

1.26 Information/Statistics Collection

1.27 Late Pick Up Policy

1.28 Multicultural and Anti Discrimination Policy

1.29 Networking Policy

1.30 Nutrition and Swallowing Policy
1.31 Orientation for Participant
1.32 Medication Policy
1.32A Privacy Policy
1.34 Assisting with resolution of conflict between Carer and Participant policy
1.35 Responsibilities – Participant Policy.
1.37 Work Health Safety (WHS) Policy in Service Delivery
1.38 Bus Safety Policy
1.39 Sexuality and Human Relationships Policy
1.40 Training Available to Participants
1.41 Food Handling Policy
1.42 Epilepsy Policy
1.43 Interpreter Service Usage
1.44 Quality Assurance Policy
1.44A Quality Assurance and Continual Improvement Policy
1.45 Swimming Policy
1.46 Working With Chemicals Policy
1.47 Use of NWDS Equipment & Resources
1.48 Restrictive Practices Policy
1.50 Home Visit Policy
1.51 Protection of Participant Money and Property Policy
1.52 Personal Care and Universal Precautions Policy
1.52A Enteral (PEG) Feeding and Management Policy
1.53 Sole Worker In The Community
1.54 Payment to Artists for the sales of artworks
1.56 First Aid in the Workplace Policy
1.57 Working Safely in Direct Sun or High Temperatures
1.58 Voluntary out of Home Care
1.59 Support Co-Ordination
1.60 Plan Management Policy

1.27 LATE PICK UP POLICY

POLICY

This policy has been developed to recover costs from services and carers who consistently attend the service late to collect Participants.

PROCEDURE

- Late pick up is defined as any time after the activity/group finishes.
- 24 hours' notice prior to pick up time is required to enable other arrangements to be made.
- In the event of an emergency, phone contact from the carer is required.
- Where prior arrangement has been made, the agreed recovery of costs shall be invoiced for staff cost rather than Late Pick Up charges.
- Upon the first occasion of a late pick up the Carer will be issued with a reminder letter about the late pick up and a copy of the Late Pick Up Policy..
- Upon the second and further instances of Late Pick Up the carer will be invoiced as outlined in the table below.
- Where late pick up is consistently a problem carers shall be expected to arrange a more appropriate form of transport or arrange for NWDS to provide additional hours of staff support.
- This policy is included within The NWDS Participant and Carer Handbook and provided to all new and existing Participants.

The late Pick up fee is charged at the current NDIS centre based TTP rate, one on one ratio charges with a minimum of ½ hr intervals.

These fees have been established to cover any related costs to the organisation caused by the Late Pick Up, taking into consideration hourly rates charged at these relevant times.

These fees are subject to change when NDIS rates change or at future policy reviews.

1.32 Medication Policy

POLICY

Participants will be provided with medication with the best practices of duty of care and within relevant legal requirements.

PROCEDURE

All individuals participating in service delivery with NWDS who require assistance with medication must provide a Prescription Medication Form correctly completed and signed by their General Practitioner (GP) or other medical practitioner for prescription medication or by their carer for non-prescription medication only. This should be updated as medication changes. Each Participant's medication requirements will be clarified prior to NWDS staff needing to assist with and/or prompt the taking of medication. All NWDS staff are required to complete compulsory Medication training and Medication Competency Assessment prior to assisting with medication.

Prescription & Non Prescription Medication

Prescription medication may only be given to a Participant if a current Prescription Medication Form has been provided and signed by a medical practitioner, this medication form must contain all prescription and over the counter medications and all prescription medication must be provided in a Webster Pak. NWDS staff cannot assist a Participant with medication unless appropriate documents and Webster Pak are provided.

An original medication form must be sent in for Participants accessing any NWDS programs, this will be placed with their medication in the locked section of the Participants bag and a scan taken of the form and placed in the Participants' computer file in the support plan section, to cover days when they forget their form. All new forms must be checked by a NWDS Co-ordinator or Manager and authorised prior to any medication being taken by the Participant.

- a. Non-prescription medication may only be taken if a Non Prescription Medication Form has been completed by the Carer. If the Participant has prescription medication as well the Prescription Medication Form must be completed and signed by a medical practitioner. Carers are advised that it is a requirement to have all non-prescription medication on the medication form E.g. Panadol, cold tablets, vitamins, herbal medication. Non-prescription medication must be in its original packaging, for example a sheet of blister pack Panadol from the box. This medication blister pack is then stapled to an administration of non-prescription medication sheet, with the plastic blister facing out, in the designated place and the writing side (foil) is photocopied onto the bottom section of the form. The staff member who sets up the form must mark off the areas where there is no medication/empty blister and date and initial these, another staff member must also initial this. When using the form staff must draw an arrow to the blister and sign and date in the box prior to removing medication from that blister so there is a clear record of that medication being administered/ removed. Where Participants do not require assistance to take their medication, these Participants are able to purchase non-prescription medication i.e. Panadol or anti-histamine or cold/flu capsules during program time or whilst they are staying at Gemhill. Normal procedures as in 2c and 2d of this policy. The carer must be contacted by telephone to give approval and the non-prescription medication form is then able to be signed by the carer upon picking up the Participant from NWDS. It is the Participant's responsibility to cover all costs associated with the purchase, and full

reimbursement to occur if any money borrowed from NWDS upon collection of the Participant.

- b. If the medication is too big for the Webster Pak e.g. cough lozenges, this must be authorised by the NWDS Co-ordinator/ Manager/ on call to ensure it meets medication policy requirements, and it must still be recorded on the medication form whenever it is given. A clear medication plan will be attached to a medication form with clear guidelines of when the medication is to be given. The carer must be notified and a record of the dose given and the time should be made on the medication form in order to provide information for the Participants doctor and for other staff. If staff think they need to give PRN medication, and the PRN medication is prescribed for after epileptic seizures, changes in mental state or unusual circumstances, staff need to ring ON CALL NUMBER 0413 131 671 and describe the circumstances to get confirmation of the need prior to giving any medication. Staff should ensure they are not going to exceed the maximum recommended daily dose for the PRN medication. In some instances contact must be made with the carer to obtain permission prior to giving PRN medication.

Participants who do not require assistance with their medication must-

- Provide a Medication Form completed in a clearly legible manner by their doctor for prescription medication, or by their carer for non-prescription medication. This is necessary for use in a medical emergency to convey information to ambulance officers or medical practitioners.
- Meet with the Co-ordinator/Manager to fully discuss the implications of self-administered medication and their understanding of these implications to be assessed by the Co-ordinator/Manager using the self-administration of medication risk checklist. Co-ordinator/Manager to document on the checklist and place the form in the Participants file.
- At Gemhill the Participant is to be provided with a lockable tin/drawer in their bedroom in which to store their medication. This must not be accessible to other Participants. In the community a lockable bag will be utilised.
- When accessing day programs the Participant who is able to self-administer must keep the medication either in a locked section of their bag or on their person, in a pocket inaccessible to others.
- If the Participant cannot remove the medication from the Webster Pak or other packaging independently or is assessed as not being able to comply with safe storage guidelines to prevent other Participants accessing their medication, it is deemed that the Participant requires assistance and NWDS staff will provide assistance.
- A review of the Participants ability to self-manage their medication can occur at any time at the request of the carer, NWDS direct care staff, or the Participant themselves.

Participants who need assistance with medication:-

1. Prescription medication must be sent in Webster Pak with frame and correct name and dosage etc. on the label. Non-prescription medication must be in the original packaging.
2. A passport size photo must be attached to the Webster Pak with the name of the Participant written on back of the photo.
3. A current NWDS Prescription Medication Form must be legibly completed and signed by a medical practitioner or the carer for non- prescription medication only, and accompany the Participant's medication. This form/s must be forwarded to NWDS prior to the staff needing to assist with and/or prompt the taking of medication. A separate form/s and Webster Pak are required for each service area that the individual accesses if the Participant requires different medication e.g. night time meds (Gemhill Cottage, PSP, or HADPAC). The medication form must be renewed with each adjustment or change in medication, and if there have been no changes, after twelve months from the forms completion by their Doctor or carer or when the form has run out of room for staff to sign off for the supervision of medication.
4. Medication form is to be locked in their bag with the Webster Pak prescription medication or the non-prescription medication attached to the administration of non-prescription medication form when accessing services at NWDS or placed in a medication form file at Gemhill,. Once the completed form has expired or has finished it is placed in Participants administration file in the medication section. Any unused or surplus medication is to be returned home.
5. All medication is to be secured in a lockable container, bag or approved cupboard. Participants who access community based or day programs must bring their prescription medication in a Webster Pak or non-prescription medication in original packaging to be attached to the Non-Prescription Medication Form in a bag or backpack stored in a separate compartment (not with food or other items) which can be padlocked. The Participant/Carer is to provide a bag that may be locked, and NWDS will provide the padlock and a key for the carer to access the lock, and NWDS will keep another key. One key is kept on all bus key rings for any groups that go out, and there is also another key which is kept in the Office for the groups that stay in. All NWDS padlocks are all accessed by a universal key. Which allows staff/carers access and assist with and/or prompt the taking of medication during the day.
6. All medication must be stored at the recommended temperature and if refrigerated storage is required medication must be kept in a locked container in the refrigerator or a lockable refrigerator.

When dispensing medication two medication competency assessed staff members must:

- a. Wash and Dry hands thoroughly, put on gloves
- b. Get glass of water or other drink if required
- c. Check correct person using photo, check dosage time and day for medication sign and date back of Webster Pak or the correct box on the Non-Prescription Medication Form in black or blue pen prior to removing medication.
- d. Both staff must observe that the Participant has swallowed the medication.
- e. Both staff must initial Square on NWDS medication form corresponding with time/date/medication in black or blue pen.
- f. Return the Webster Pak and Medication form to the locked section of the Participants bag or the medication cupboard and ensure is locked

- g. A medical practitioner or a registered nurse only can administer injections. However, staff can supervise Participants who are able to self-administer. Staff who have received training and have been competency assessed can use an Epi-pen if required. Staff must ensure the appropriate disposal of all sharps into the sharps container provided and use extreme care to prevent needle stick injuries. All needle stick injuries need to immediately advise their Coordinator or On- Call who will advise the staff member of any action required.
- h. Staff is responsible for the return of any unused medication or empty Webster Pak to the Participant on completion of respite or program day and the completed medication form must be retained in the Participant file.
- i. Obtaining and refilling of Webster Pak or providing additional medication in original packaging must be undertaken by a pharmacist or carer and will be the responsibility of the Participant/Carer.
- j. When taking medication out into community, medication must be taken in a locked bag.

Where Participants have medication administered by “tube feeding” – this should be in liquid form, or crushed using a cut and crush tablet crusher or similar crusher that contains the medication and does not allow it to spill.

Where staff are assisting with medication on a sole worker shift

1. Ensure Participant has a current NWDS medication form and Webster Pak medication.
2. Go through and visually check the medication with the Carer at the start of the shift, confirming that the medication is there and when it needs to be given.
3. When giving medication staff need to check carefully to ensure giving the correct medication at the correct time and sign for it on the medication form.
4. Visually go through the medication that was given with the Carer when finishing shift.

Medication forms must include the following information in clear and legible writing.

- a. Adequate identification of the Participant and a passport size photo attached.
- b. The name, strength and dose of each medication the Participant is taking.
- c. How and specific times when the medication should be taken/used.
- d. The name of the prescribing medical practitioner and his/her telephone number.
- e. The Participants known drug allergies.
- f. The date of the doctor’s last review of the Participants medication.

Additional information:-

- It is important that a record is made on the medication form in red pen whenever it is known that a Participant has missed a dose, has taken the wrong medication or is suspected of suffering an adverse reaction.
- The Participants doctor should be contacted in the latter two cases and advice on action required requested.

Medication Direction Abbreviations	
B.D.	-twice a day, i.e. morning and night.
T.D.S.	-three times a day.
Q.I.D.	-four times a day.
P.R.N.	-when necessary.

Medication Direction Abbreviations	
P.O.	-by mouth
Mane	-morning
Nocte	-night

Action to ensure medication procedures can be followed

- If prescription medication arrives with Participant and is not in a Webster Pak, the carer must be sent to nearest pharmacy with medication and medication form to get it put into a Webster Pak.
- If Participant arrives unaccompanied with their prescription medication not in a Webster Pak, the Coordinator needs to be advised and a staff member must take medication and medication form to a pharmacy to get it put into a Webster Pak.
- The Participant will cover the cost of the filling of the Webster Pak.
- Liquid medication must be in original bottle with original labelling and with an additional pharmacy direction label attached specifying the name of the Participant and instructions for taking the medication.
- Topical creams should be in the original tube and has an additional pharmacy direction label attached specifying the name of the Participant and method of use instructions.

If Participants medication appears to not match the medication form-

- Not enough tablets or too many – contact Carer to clarify and get assistance. If Carer not home ring doctor/second contact after talking to Co-ordinator/Manager on call person.
- Label on Webster Pak has different named tablet – ring local pharmacist for clarification.

If Participant refuses to take the medication

- Explain medication and possible side effects of not taking medication.
- Ring Carer to get their assistance.
- If Participant still refuses to take their medication it may lead to them being sent home.
- Please consult Staff/Manager.

Wrong dosage of medication, given at wrong time or missed medication.

- Ring doctor for advice and information

Fill out incident report and record on medication form.

Inform Carer and Co-ordinator/Manager. (Medication may only be given one hour each side of actual medication time – This general rule may vary from med to med so check in file)

- If Participants medication changes during their respite any addition must be made to the medication form and must be completed by the doctor and refilled Webster Pak provided by Carer or assistance given by NWDS staff if the individuals are mid respite stay.
- If medication is dropped on the floor it should not be used and an identical dose taken from the furthest away part of the Webster Pak to enable replacement. The dropped tablets should be placed in a clearly labelled envelope that states the Participant's name, date, time, and that they were dropped, then stapled to the Webster Pak and or locked in the same place as the Webster Pak medication. This should be documented on an incident report and discussed with the carer and/ or Co-ordinator who will arrange for return to the pharmacy or destruction.

- If unsure of the time of the medication is to be given, ring the Carer for clarification. If Carer is unavailable ring the Participants Doctor.
- If Participant vomits after they have been given their medication, staff need to check if medication has brought up and all tablets are present. If all medication present give replacement medication from furthest away day in Webster Pak. If medication not found DO NOT give any additional medication. Contact Doctor for guidance
- If medication appears to be not working or having adverse effects ring the Carer or if not available ring the Participants Doctor.
- Changes to Medication must be notified by the Carer to the Organisation where these changes may impact on the individual whilst they are accessing the service. Where a medication is used as a part of an ongoing behaviour management program, the carer will need to provide written instructions from the Doctor prescribing this change. These instructions will need to include reasons for the change, possible changes in behaviour and if the individual needs to stay at home for a specified period whilst the medication change takes effect to ensure their own safety.
- If there are any concerns or issue in regards to a Participants medical needs, call their contact person or doctor to gain guidance
- When a Participant has taken an unknown amount of Alcohol – medicines should not be given without advice from Carer or doctor.
- All contact for advice from the Carer or the Doctor must be noted on medication communication sheet in Participant's file and on any related incident report form.

Advice and Emergency Contacts

- Healthdirect Australia is a FREE* 24-hour telephone health advice line staffed by Registered Nurses to provide expert health advice. 1800 022 222
- Poisons Information 13 11 26
- Police/ Fire/ Ambulance Emergency 000 or 112 from a mobile phone
Resource and Information Documents
- [Medication Handling in Community-Based Health Services/Residential Facilities in NSW - Guidelines 2005](#) (NSW Department of Health)
- Medication Administration for the Disability Sector –July 2007 The Centre for Cerebral Palsy and National Disability Services, Western Australia
- *Recommended Least Restrictive Principles and Practices for the Administration of Medication to People with Disabilities in Community Based Settings, Australian Cerebral Palsy Association, 2003*

1.25 INFECTIOUS/COMMUNICABLE DISEASES CONTROL

POLICY

NWDS has a statutory obligation to provide a safe and healthy work environment for all its staff, Participants and visitors. NWDS is committed to preventing and minimising infectious diseases within the workplace. All staff and Participants must ensure they do not attend the service if there is a possibility that they may transmit an infectious disease.

The identification or confirmation of an infectious disease and the decisions on control measures to be implemented are to be made in consultation with a treating medical practitioner.

Staff, Participants and visitors to NWDS on premises are required to follow safe work practices, to wear protective equipment provided and to follow instruction with regard to the prevention and control of infectious diseases within the workplace.

Staff, Participants and visitors who contract an infectious disease (where the disease is diagnosed as a notifiable infectious disease) must inform NWDS should their infection status pose risks to other staff, Participants or visitors. Notification will depend upon the legal requirements of disclosure for a particular disease.

NWDS consults the Westmead Hospital Infectious Diseases Public Health Unit, Western Sydney 9840 3603 <http://www.wslhd.health.nsw.gov.au/Population-Health-Services/Public-Health-Unit/Infectious-Diseases>

PROCEDURES- MANAGERS RESPONSIBILITIES

Managers have the responsibility for the implementation of this policy and for,

- a) Making sure that risks are identified within the workplace and control measures are implemented to prevent the spread of infectious disease.
- b) Making sure that high risk occupational groups in NWDS are offered screening and immunisation. It is also a Managers responsibility to refer staff; Participants or visitors suspected of carrying an infectious disease to a medical practitioner and adopt measures to protect other people who may be at risk of contracting an infectious disease.
- c) Identifying categories of staff/Participants who may be at risk of contracting an infectious disease because of the nature of the work. Attachment A provides a guide on common infectious diseases.
- d) Implementing control measures by developing safe work practices.
- e) Arranging screening and immunisation of staff if required.
- f) Making sure that there are designated First Aiders in all workplaces.

RELEVANT LEGISLATION

NSW Department of Health Infectious Diseases Policy <http://www.health.nsw.gov.au/infectious>

1.7 COMPLAINTS HANDLING POLICY

POLICY

A complaint is considered to be “any expression of dissatisfaction either written or verbal”. Participants and carers will be encouraged to express concerns and complaints arising from service provision. Complaints can be made in writing, by telephone, by email or in person. All staff will encourage Participant/carers to make a written complaint regardless of the degree of Complaint and if Participant/carer declines then the staff member must ensure the complaint or concern is documented on a “feedback/concerns/complaint form”.

Complaints must be freely expressed by all Participants without fear of reduction or withdrawal of service or any other recrimination or repercussion. Any dissatisfaction in relation to our service shall be dealt with following principles of fairness and natural justice, consistency and confidentiality will be ensured at all times. In all our dealings with Participants, Carers, individuals and agencies, we aim to be polite, responsive, fair, impartial, prudent, effective and efficient. All staff receives complaints handling training to enable them to support Participants and carers to make a complaint and to also gain awareness of their role in preventing any negative impact for Participants.

Staff should offer assistance to Participants and family members with an identified need. Types of assistance may include, interpreter and advocate services, offering to arrange a culturally appropriate support person and arranging assistance to put a complaint in writing. Each Participant is informed of their right to have an advocate or support person to assist them to resolve any complaint that they have. NWDS Coordinators can assist the Participant and their family with information on how to apply for the assistance of an advocate.

Participant representation (i.e. Participant/advocate or carer) will be invited and encouraged on relevant decision-making Boards. The service aims to promote and respect the legal and human rights of the Participant. Complaints expressed by Participants will be dealt with in a constructive and respectful manner by relevant personnel or Board of Directors.

Board of Directors meetings held to discuss complaints attended by Participant/carer, advocate or other nominated person will be conducted in an atmosphere designed to facilitate open discussion of the complaint.

The Board of Directors reserves the right to make a final decision concerning complaint resolution based on consideration of Participant, carer and service provider rights and responsibilities.

The Service shall provide all staff and volunteers with ongoing training on the importance of immediate recording and action on all complaints and the correct application of procedures for receiving and resolving complaints, in order to increase understanding and assist in the positive implementation of complaints handling policies and procedures. Through this policy we show our commitment to actively seek and use feedback to improve and enhance our service delivery.

PROCEDURES

1. During commencement process all participants and their families are informed of the how to make a complaint.

2. In the event that frontline staff are unable to resolve a simple concern or complaint, for e.g.: misplaced personal items, requests for information and paperwork, the complaint must be noted on a Feedback/Concerns /Complaint form and must be immediately forwarded to the most senior staff member to attempt a resolution.
3. If the complaint involves the staff member receiving the complaint and/or could be perceived as a conflict of interest, the complaint must be referred to a Manager/Chief Executive Officer (CEO) immediately. If the complaint involves the CEO then the complaint shall be forwarded directly to the Board. Board complaints are referred externally to an independent and appropriate support service relevant to the nature of the complaint. Receipt should be acknowledged and the complaint settled within 5 working days.
4. Any allegation concerning the abuse or neglect of a child or young person should be reported immediately to the CEO and then, for children, to the Family and Community Services Helpline on 13 21 11. These matters may also require a notification to the NDIS Quality and Safeguards Commission or the NSW Ombudsman (if not receiving NDIS or Icare funding) as a reportable incident, if the alleged perpetrator is an employee or volunteer working with children, young people or people with disability. These issues are dealt with under the Children and Young Persons (Care and Protection) Act (1998), Disability Inclusion Act (2014), National Disability Insurance Scheme Act 2013, Motor Accidents (Lifetime Care and Support) Act 2006, and the Ombudsman Act (1974) specifically for those participants not receiving NDIS or Icare funding.
5. Registered providers must report to the NDIS Commission, Icare or the NSW Ombudsman, whilst also informing the funding body about serious incidents (including allegations) arising in the context of NDIS or other funded supports or services, including:
 - the death of an NDIS or other funded participant
 - serious injury of an NDIS or other funded participant
 - abuse or neglect of an NDIS or other funded participant
 - unlawful sexual or physical contact with, or assault of, an NDIS or other funded participant
 - sexual misconduct committed against, or in the presence of, an NDIS participant, including grooming of the NDIS or other funded participant for sexual activity
 - the unauthorised use of a restrictive practice in relation to an NDIS or other funded participant.

This does not replace existing obligations to report suspected crimes to the police and other relevant authorities.

1. Reportable incidents to NDIS Quality and Safeguards Commission, Icare or NSW Ombudsman need to be reported using the NDIS Commission Portal, or by phone/online to NSW Ombudsman, Reportable Incidents form within 24 hours of key personnel being notified. There is also a second follow up reportable incidents form due 5 days after the first form.
2. All Feedback/Concern/Complaints forms are referred to the Manager and CEO for an informal resolution if possible.

3. The options of having a support person or advocate shall be discussed with the Participant and if the Participant wishes to have an advocate or support person then assistance shall be given for the support person to be present.
4. Participants are offered a choice of who they would like to discuss their complaint with from all NWDS Coordinators, Managers or the CEO.
5. Participants shall be made aware of all facts involved and that all information shall be fully confidential.
6. The Service will provide assistance by making referral to an advocacy service or finding a support person if necessary.
7. NWDS will also provide assistance to contact external complaint handling organisations. This includes NDIS Quality and Safeguarding Commission and NSW Ombudsman. Complaints are important—they can help providers improve the quality of services they provide, so your complaint can help other people too. If you feel comfortable, you are encouraged to raise your concern or complaint with your provider first, as this is often the best way to have your issue resolved quickly. All registered NDIS providers must have a complaints management and resolution system in place.
 - If the provider is unable to resolve your concern or complaint, then you should seek further support.
 - You may seek support from family, friend or an independent advocate to support you in making a complaint. For further information see: Disability Advocacy.A complaint can be made to the NDIS Quality and Safeguards Commission by:

- Phoning: 1800 035 544 (free call from landlines) or TTY 133 677. Interpreters can be arranged.
- National Relay Service and ask for 1800 035 544.
- Completing a complaint contact form.

The NDIS Quality and Safeguards Commission can take complaints about:

- services or supports that were not provided in a safe and respectful way
 - services and supports that were not delivered to an appropriate standard
8. Complainants can have a support person and this could be a friend, family member or anyone else who is acceptable to the Participant.
 9. The Service will provide support with translation of documents, interpreters, assistance to put complaints in writing and assistance to contact an external agency.
 10. Participants also have the right to have an advocate to speak on their behalf. Participants should be fully confident that they will be treated in a non-discriminatory manner regardless of the outcome of the complaint.
 11. The Manager/CEO will respond to the Participant/carer by phone as soon as possible to follow up the complaint and to confirm the outcome of the complaint, if resolved. He/ She shall provide their name and contact details to the complainant for future reference. This person shall then be responsible to keep the complainant informed regarding the progress at each stage of the complaint handling process, and any delays must be explained.
 12. In the event that an informal discussion fails to resolve the issues a formal written report detailing the nature of the complaint should be submitted in confidence to the Board of Directors for resolution.

13. The Board of Directors will provide a written reply to the Participant/carer detailing the process and date for proposed resolution of the complaint within 14 days of the informal discussion at a date, time and venue convenient to all parties.
14. The Participant/carer will attend the meeting and where resolution is reached, outcomes will be clearly documented and a report will be issued, signed by the Board of Directors representative and the Participant/carer.
15. The Participant/carers complaints meetings will be recorded by compiling meeting minutes which clearly document the outcomes, which will be provided to the complainant and remain accessible to the Participant/carer at any time.
16. If the complaint cannot reach a resolution the Participant/carer has the right to request an internal review of the decision. Information and support shall be provided to access other resolution sources. i.e.:- NDIS Quality and Safeguards Commission, ICare complaints department, Commonwealth Continuity of Support Program, or NSW Ombudsman. Complainants are encouraged to follow NWDS procedures. However, the Participant/ Carer have the right to contact a Senior Manager or CEO or an outside agency such as the NSW Ombudsman, NDIS Quality and Safeguards Commission, at any point in the complaint handling process. This step might be taken if the Participant/Carer is not happy with the NWDS complaint handling process or the outcome.

Outcome from Complaints

- As an outcome from the complaint, strategies developed from the complaint feed into NWDS Quality & Continuous Improvement Plan to identify systematic improvement across the Organisation and are then implemented and reviewed within 30 days.
- Initiator to note on complaint form the appropriate meeting for specific issue.
- Quality Services Manager or CEO reviews the complaint in conjunction with raising it as an agenda item in relevant meeting
- Complaint is actioned and documented on the feedback/concerns/complaint form. Any follow up is actioned and complaint is reviewed.
- Assessment of other areas of the service in relation to this complaint and strategies adopted shall also take place as part of the corrective actions process.
- All complaints shall be held in a separate Complaints File and not held in the Participants file. The file shall then be held in a locked cabinet.
- The CEO will maintain a Register of Complaints.

Roles and delegations

- The Coordinator initially informs the Participant/Carer of the complaints process as part of the Participant orientation. The Frontline staff are responsible for providing ongoing information to Participants, families and carers about the complaints handling system, recording and reporting complaints, handling simple and less serious complaints and reporting the more serious complaints within a specified time frame. Front line staff should encourage Participants to make complaints and explain why they are helpful to the service. Frontline staff are also responsible for providing and arranging support.
- The Co-ordinator can provide written responses as required and review staff training needs.
- The Coordinator is responsible for developing action plans, investigating or delegating the investigation of complaints that have not been resolved at

management level. The CEO is responsible for handling complaints concerning the Coordinators and Managers.

- The Board plays a role in handling complex complaints that have not been resolved at other levels and handling complaints about the CEO.

VOLUNTEERS AND STAFF COMPLAINTS IN RELATION TO PARTICIPANTS

Volunteers and service staff will be encouraged to voice their concerns or complaints in accordance with procedures regarding conditions or issues which impede their ability to provide services to Participants and carers or affect the relationship between Participant and service provider.

The Board of Directors reserves the right to make a final decision concerning complaint resolution based on consideration of Participant and service provider rights and responsibilities.

Volunteers/Staff have a reciprocal right to resolution of a complaint in relation to a Participant.

Procedures

- Staff will be encouraged to attend an informal meeting to discuss complaints (attended by the relevant parties following notification of the complaint to CEO) at a meeting arranged at a mutually convenient time. Staff shall be made aware of their right to have a support person attend a complaint meeting at any time.
- Following the initial meeting, unresolved issues should then be addressed in writing to the Board of Directors for resolution.
- Reply from the Board of Directors acknowledging receipt of the submission should be made within 10 days of receiving written application.
- The Board of Directors reserves the right to make a final decision concerning staff work-related issues based on consideration of Participant and staff rights and responsibilities.
- If the complaint concerns the CEO or a member of the Board of Directors a mutually acceptable independent mediator may be used to reach a resolution.
- In the event that the issue cannot be resolved the Board of Directors will reserve the right to resolve the issues in the best interest of the service.

COMPLAINTS REPORTING POLICY

CEO shall report on all complaints on a monthly basis, at the Board of Directors meetings. Complaints data, trends, strategies and feedback is incorporated in service planning and review with documented improvements and procedural changes and also provided as a report for the services Annual Report.

COMPLAINTS AUDIT POLICY

Complaints Audit to be conducted by a Board Member who shall read through complaints forms and Complaints Register to ensure correct procedure has been followed and suitable outcome achieved.

Audit to be conducted prior to each Board Meeting and feedback provided to the Board in regards to complaints outcomes, issue or concerns.

Complaints Audit Board Member to be elected by the Board after each Annual General Meeting. A Complaints feedback report to be included in the yearly Annual Report.

A Complaints flow chart to be included on the complaints form to ensure suitable processing of complaint.

COMPLAINT HANDLING PROCEDURE – Flow Chart

Complaint Flow Chart	Date	Action Taken by	Outcome
1. <u>Initial awareness of complaint</u> by staff Discussion to resolve Complaint documents – assistance given where necessary			
2. <u>Unresolved</u> – Discussion between Participant/ Carer /Manager or Coordinator			
3. <u>Unresolved</u> – Complaint form noted with issues areas not agreed Complaint form given to CEO or most senior staff member available. Encouraged to have support person or advocate present. Resolution to be attempted within 5 working days.	Support/ Advocate offered <input type="checkbox"/> Yes Timeframe met- <input type="checkbox"/> Yes Date:		
4. <u>Not resolved</u> – Formal written report of grievance prepared for Board of Directors			
5. Board advise Participant/ Carer within 14 days of formal meeting arrangements at time acceptable to all parties.	Timeframe met- <input type="checkbox"/> Yes Date:		
6. Formal resolution meeting held, attended by relevant parties. Outcomes documents in a report format.			
7. <u>Not resolved</u> , grievant still dissatisfied – provide options for further avenues to pursue the complaint.			
8. Referral required to Ombudsman NSW- Disability NSW Ombudsman NSW– Phone: (02) 9286 1000 Toll free 1800451524(outside Sydney Metro) Web: www.ombo.nsw.gov.au Fax: (02)9283 2911	<input type="checkbox"/> Yes If ticked please record date and Ref #:	CEO/ Manager/ Coordinator Name:	
9. Referral required to NDIS Quality and Safeguards Commission. NDIS Q&S Commission Phoning: 1800 035 544 (free call from landlines) or TTY 133 677. reportableincidents@ndiscommission.gov.au	<input type="checkbox"/> Yes If ticked please record date and Ref #:	CEO/ Manager/ Coordinator Name:	
10. Complaints Audit by Board	Date:		

1.1 SERVICE ACCESS POLICY

POLICY

Each Participant seeking to receive a service from North West Disability Services (NWDS) has access to the service on the basis of capacity and available resources.

ENTRY POLICY

A Participant with a disability from any socio-economic, community, culturally and linguistically diverse (CALD) or Aboriginal and Torres Strait Islander (ATSI) backgrounds will be eligible to access the relevant services of North West Disability Services (NWDS) through self-referral or referral utilising assistance of family, advocate, case manager or other agency. Information sought on potential Participants is utilised to assess their individual support needs, and the type of information sought is the minimum required for a fair and suitable assessment.

PROCEDURE

Enquiries are followed up by the Co-ordinator to ensure sufficient information has been received to enable an assessment of support needs, where required assistance is offered to gather this information and complete application paperwork. There may be additional plan documents needed if there are specific health needs.

TIME FRAMES FOR FOLLOW UP	
Within 2 working days	Respond to enquiry, provide information, and if required send out forms needed
Within 2 working days	Receive referral and commence assessment process, including initial assessment of if additional information is required
Within 10 working days	Respond to carer/Participant with questions and outcome of assessment

Organisations Entry Procedures

When contact is made:

- The Coordinator asks questions to gather a clear picture of what the person is seeking and provides information on what the organisation could provide and answers any questions. The Coordinator explains the complaints procedure and the person is advised that they have the right to use an advocate to assist them with the entry process. They are also advised that there is comprehensive information about what is available on the NWDS website.
- If it is ascertained that the organisation is not able to provide what the individual is seeking, information is offered to the individual to assist them to find a suitable service. These enquiries where NWDS could not provide assistance are discussed at the monthly Management meeting with the purpose of identifying if there is anything further that NWDS could offer and to identify trends for future planning.

- If it is ascertained that an individual is able to receive the service requested and the individual would like to access the service, an information and Support Plan is sent to be completed. The information package contains electronic access to the NWDS web site where a full and comprehensive list of information is available. Information includes individual and group activities available and locations, Participant and Carers Handbook, how to make a complaint and the Service Agreement and other forms. Questions will identify if additional forms or existing plans are also needed, including Epilepsy Management Plan, PEG Feeding Plan, Mealtime Management Plans, Asthma Management Plan, Diabetes Management Plan, Medication Forms, and Behaviour Support Plan. Where required additional supports will be offered to meet the cultural, value, beliefs, or linguistic needs of the family during the referral process and supports that may be required on an ongoing basis to support the individual, for example, interpreters, food selections, and/ or staffing from different cultural backgrounds. If the completion of the paperwork is difficult for the person an appointment is made with the Co-ordinator, or other NWDS staff, and full assistance in completing the forms is given. The information sought takes into account the broader need of the carers and family during this assessment process with safety and wellbeing of the individual or child is placed of highest importance and every effort made to ensure support offered supports the families capacity to provide ongoing care. If the carer cannot come in or if service is to be offered in the home, a Home Visit must be undertaken (See the Home Visit Policy). Included in this visit is a full WHS house inspection.
- When this information is returned, an individual electronic and hard file is set up for the person with the development of a comprehensive Individual Support/ Respite Plan and a comprehensive risk assessment. Some identified risks may warrant further investigation and documentation to ensure the maintenance of a safe environment for other Participants and a safe workplace for staff. All documentation is completed at this time and an entry checklist commenced, when file is assessed as complete by the Coordinator and the individual is assessed as suitable to attend the file is audited by the Quality Services Manager. If the participant is a child and is requesting overnight care, full discussion of VOOHC requirements is undertaken and consent obtained on support plan. All personal information is collected, used, disclosed and stored according to legislation and VOOHC requirements. This includes asking about the legal status of the child, as those children in statutory out of home care are not required to be added on the VOOHC Register. This discussion also identifies the need to check VOOHC placement days, case plan, and if there is active VOOHC supervision in place with a supervising designated agency. This information is confirmed on the VOOHC Register. If there is a designated supervising agency who have lodged case plan notifications and other agencies that have recently provided a VOOHC placement, an exchange of information by contacting these agencies must occur prior to commencement of the new placement. If the only option is to place a child under the age of 16 years in a placement with adults this must be fully risk assessed to ensure it is safe.
- Once audited the applicant's file is discussed with the CEO who assesses their suitability and approves their access to the service to commence. Each person commencing service is informed that the initial transition phase is a trial period and that either party reviews the

suitability of the activity and support during the trial. The participant and carer are informed that during this initial transition phase there will be ongoing communication and adjustments to activities to ensure it meets the participants' individual need.

- The Coordinator must be available to greet new Participants at the time of arrival on the first trial day of service and provide a full orientation if one has not yet been completed. Preferably initial days for Participants are booked on weekdays to ensure additional staffing support can be given to the individual by the Coordinator. This ensures that any issues that the individual may experience during this settling in process can be resolved in a mutually agreeable way as quickly as possible. Where required additional supports will be offered to meet the cultural, value, beliefs, or linguistic needs of the Participant and provision of supports that may be required on an ongoing basis, for example, interpreters, food selections, and/ or staffing. During the trial period every effort is made to ensure the Participant is supported fully to develop friendships and relationships with other Participants and staff whilst also assisting current Participants to understand and relate to the new Participants. Throughout the trial period, consultation with current Participants is undertaken to ensure a level of compatibility is present to enable group dynamics to change and structure toward a positive experience for all involved.
- When a Participant lives out of the Sydney Metropolitan area and is unable to attend the service prior to commencing, an orientation can be completed on the first day of service to be received, with the NWDS Participant and Carers Handbook and all forms required for service delivery sent out and returned prior to the first day of service.
- At Gemhill if the Participant is comfortable and the support offered by the service is considered suitable then they are approved to make repeat bookings. The ability of staff to provide a quality service is assessed by the direct care staff working with the individual throughout their stay and documented on a recommendations form after the three day stay form. This form is then discussed with the staff, action taken and documented to address any concerns raised, and then signed off and approved by CEO.
- All Participants that require staff assistance with medication are requested to arrive with medication in a Webster Pak and a NWDS medication form that has been completed by their Doctor; (or carer - for non-prescription medication), and complies with the NWDS Medication Policy and Procedures.

ELIGIBILITY CRITERIA

1. Each application to access activities or services is assessed to ensure the services needed falls within the level of support and resources of NWDS
2. The participant has sufficient funds available for staff support to be claimed once service has been provided.

GEMHILL CRISIS ACCOMMODATION PROCEDURE

Gemhill Cottage provides crisis accommodation in an emergency situation to individuals who already access Gemhill Cottage regularly for respite. This crisis accommodation is available where the circumstances of the emergency have resulted in a breakdown in the usual care arrangements.

The crisis may be the result of:

- Sudden onset of illness or accident to the primary carer.

- Sudden need for the carer to attend to unexpected family commitments, for example, funeral or another family member hospitalised.
- Unavailability of suitable alternate care arrangements at the time of crisis.

Note: A change in the physical or psychological state of the Participant will not qualify for crisis accommodation.

The crisis bed is only to be occupied for a short time, up to three days. This is to enable the Participant's carer/support group to arrange alternative care for the duration of the crisis. If another bed is available at Gemhill Cottage it may be possible for the individual to stay longer by transferring to this other available bed.

A Participant who regularly accesses Gemhill for respite or their primary carer contacts Gemhill Cottage to request crisis accommodation. If it is office hours the Coordinator will assess the need for crisis accommodation. Outside of office hours Gemhill Staff will need to gather information from the carer and then ring the NWDS On-Call Supervisor. The Co-ordinator or the NWDS On-Call Supervisor will assess each request based on the following:

- The need for crisis accommodation including the full reasons it is needed.
- Availability of accommodation at Gemhill Cottage.
- Suitability of accommodation for this individual at the requested time.
- Rapport with Participants currently residing at Gemhill.
- Level of support required.
- Staff availability.
- Training of staff to provide service to the Participant in crisis.
- File documentation and all paperwork up to date.
- Has short term accommodation funds available to claim the staff support costs
- Entrance requirements to be met. (Including medication in a Webster pack and up to date NWDS medication form)

If these requirements cannot be met to the satisfaction of the Co-ordinator or NWDS On-Call Supervisor the request will need to be declined with a full explanation. If the applicant is not satisfied with this, the matter will be referred to the CEO.

Once crisis accommodation has been approved the guest is to be accompanied by the primary carer or another family member to the cottage to follow the usual arrival procedures.

The current staff support cost for short term accommodation will be charged for the crisis accommodation stay.

ATTENDANT CARE ENTRY PROCEDURE

Individuals who have been assessed as eligible to receive services through the I-Care can be referred to NWDS to receive personal care and other supports. An initial services needed brief summary is sent to NWDS. If within the capabilities of NWDS a written agreement to provide services is sent back within the set time frame. Once the written agreement has been approved by I-Care, comprehensive information is sent through from their designated rehabilitation provider about the individual and their support needs, in some instances there is a need for more information to be provided if there is specific and complex need. From this information an individual risk assessment Individual Support / Respite Plan is written. A full Work Health Safety (WHS) inspection of the site is conducted and a risk management plan drafted to include all of the tasks to be completed by NWDS staff.

Eligibility Criteria

Individuals who have been assessed as eligible by I-Care

EXIT POLICY

Participants have the right to withdraw on a temporary or permanent basis for any reason. Each individual is required to meet cancellation timeframes as set out in their Service Support Agreement. Participants are made fully aware that they are welcome to re-apply to join the service at any time in the future, where they will be reassessed on an individual basis.

VOLUNTARY/INVOLUNTARY EXIT - PROCEDURE

Voluntary Exit

All effort must be made to address concerns about activities and meeting the participant's individual needs, in a timely manner and make adjustments to activities to address concerns of carer and participant. Where a Participant clearly displays a desire to exit and the service is not fulfilling the Participant's needs they must notify that they are exiting in writing meeting cancellation timeframes as specified on their Service Support Agreement. NWDS will provide information to assist the individual to locate a suitable service to move to and take action to minimise the risks of the individual receiving no services. When requested by the Participant, NWDS will share information with the chosen service provider to facilitate a smooth transition to the new provider.

Involuntary Exit

1. The Co-ordinator has the power to suspend any Participant involved in violent or disruptive behaviour of significant intensity and of high risk of causing injury to themselves or others, at/or away from the centre, whether the behaviour is self-directed or directed at any staff member, another Participant or any other person. The Co-ordinator must ensure that the demonstrated behaviour was not caused by a break down in staff's ability to communicate or failure to implement the participants documented behaviour support strategies. A Behaviour Support Plan review will be initiated in consultation with the Participant, carer, staff, and the participants behaviour support clinician and a clear course of action explained.
2. Occasionally through review of behaviour that has resulted in a suspension, it may result in a decision by the family or NWDS Management that the individual's behaviour is beyond what can be supported with resources at NWDS and may lead to exit of the person. NWDS will provide information to assist the individual in locating a suitable service to move to and minimise the risk of the individual receiving no services. When requested by the participant, NWDS will share information with the chosen service provider to facilitate a smooth transition to the new provider. If there is behaviour of significant risk to the staff or participants of the chosen new provider, NWDS is legally obliged to inform the participant that the new service provider must be informed of this information. This ensures mitigation strategies to be put in place prior to commencement and ensures increased likelihood of a smooth transition.
3. For minor incidents, a written behaviour contract will be developed in consultation with the Participant, their carer and other involved individuals, and the Participant will be asked to sign. This will state that the provision of service will come under suspension if the behaviour continues. Further breaches of the contract will result in termination. Carer/advocate will be notified and involved in this process as it occurs by the Coordinator.

4. Where the attendance at the service becomes infrequent, or there is frequent cancellations consultation shall take place to identify if there are any issues for resolution and may require renegotiation the Service Support Agreement to reduce days or adjust their schedule of service to a mutually agreeable schedule.

Written entry and exit Procedures

The Organisation has written entry/exit policies and procedures that are accessible to potential and current Participants. Where a conflict of interest or difficulty arises whether or not to accept an individual into the service, the service must consult and involve an external person in the decision making process. This information is made known to all Participants via

- NWDS Participant and Carers Handbook
- Newsletters

Co-ordinators inform the Participant at initial interview and when regular reviews are held.

Review of Entry and Exit Procedures-

The agency's entry and exit policies are reviewed regularly with Participants. Information on entry – exit policies is provided via -

- Discussion of Disability Service Standards
- Within Participant Innovation meetings
- On-going updates by Co-ordinators
- Participant representation on Board of Directors and all sub-committees of the Organisation
- Policy Review Meetings

Re- entry Procedures-

Participants who have previously exited can reapply to access activities of NWDS. The application process is not affected by them previously exiting the activities and is assessed without prejudice. The individual's archived file is retrieved and the information updated with a review of the history, and updated risk assessment and updated Individual Support/ Respite Plan to reflect their changing support needs. If required an up to date Behaviour Support Plan is also requested. This information is utilised to assess the individual against the available resources, including staffing, and suitability of activities available/possible to be developed.

RELEVANT LEGISLATION

Anti - Discriminations Act 1977 NSW http://www.austlii.edu.au/au/legis/nsw/consol_act/aa1977204/

Disability Discrimination Act 1992 [DISABILITY DISCRIMINATION ACT 1992 - List of Sections](#)

Disability Inclusions Act 2014

<http://www.legislation.nsw.gov.au/viewtop/inforce/act+41+2014+cd+0+N/?autoquery=%28Content%3D%28%28%22disability%20Inclusion%20Act%22%29%29%29%20AND%20%28%28Type%3D%22act%22%20AND%20Repealed%3D%22N%22%29%29%20AND%20%28%22Historical%20Document%22%3D%220%22%29&dg=Document%20Types%3D%22%3Cspan%20class%3D%22dq%22%3EActs%3C%2Fspan%3E%22,%20Exact%20Phrase%3D%22%3Cspan%20class%3D%22dq%22%3Edisability%20Inclusion%20Act%3C%2Fspan%3E%22,%20Search%20In%3D%22%3Cspan%20class%3D%22dq%22%3EText%3C%2Fspan%3E%22&fullquery=%28%28%28%22disability%20Inclusion%20Act%22%29%29%29>

Sex Discrimination Act 1984 http://www.austlii.edu.au/au/legis/cth/consol_act/sda1984209/

UN Convention on Human Rights of people with a Disability

<http://www.un.org/disabilities/convention/conventionfull.shtml>

Privacy Act (1988) <http://www.comlaw.gov.au/Series/C2004A03712>

Australian Privacy Principles <http://www.oaic.gov.au/privacy/privacy-resources/privacy-fact-sheets/other/privacy-fact-sheet-17-australian-privacy-principles>

1.32A PRIVACY POLICY

POLICY

This policy describes the privacy rights of the Participants of NWDS. We aim to provide comprehensive, clear and useful records about our Participants, their needs and their use of our services which is essential for the effective and high-quality service delivery and to maintain appropriate accountability. Our Participants have statutory rights to confidentiality and privacy in relation to the records we keep and our processes for collecting, using and securely storing Participants data. It is essential that we protect and uphold these rights.

- NWDS will make available to all Participants a copy of the privacy policy
- A copy of the Privacy statement will be displayed in full view at each of NWDS outlets
- NWDS is committed to collecting, keeping and disposing of Participant records in ways that protect our Participants' privacy, ensure their confidentiality is maintained, and enable us to provide the most appropriate service to each Participant.

PROCEDURE

The Australian Privacy Principles is legislation developed by the Australian Government to ensure your privacy and confidentiality of information is maintained at all times.

NWDS adheres to Privacy Legislation and implements the Australian Privacy Principles. The provisions set out below describe how NWDS will deal with privacy issues.

Australian Privacy Principle 1- Open and Transparent Management of Personal Information

Describes what the organisation does when collecting personal information and has this fully documented in a policy that is available to participants and families.

- **Australian Privacy Principle 2- Anonymity and Pseudonymity**
Offers individuals the option of dealing anonymously or using a pseudonym when interacting with the organisation. Would be offered but would mostly to apply to people making service enquiries.
- **Australian Privacy Principle 3- Collection of Solicited Personal Information**
Includes details of what information the organisation can collect that is related directly to the service to be provided, collect from third parties and, generally, what individuals need to be told about the collection.
- **Australian Privacy Principle 4- Dealing with Unsolicited Personal Information**
The organisation has set procedures in place to manage and destroy information that it receives that is not requested and could not have been collected directly from the individual or a third party.
- **Australian Privacy Principle 5- Notification of the Collection of Personal Information**
The organisation informs the participant and their family of what information is collected and why it is collected.
- **Australian Privacy Principle 6- Use or Disclosure of Personal Information**
NWDS must inform the participant and their family of all uses of their personal information and obtain consent before using the information for secondary uses
- **Australian Privacy Principle 7- Direct Marketing**

The organisation must not use the personal information to promote goods or services through direct marketing, and give an opportunity to opt out from receiving information if they chose to

- **Australian Privacy Principle 8- Cross-Border Disclosure of Personal Information**
Where disclosing Personal information to an overseas agency the organisation must make every effort to ensure that the receiving agency has an awareness of Australian Privacy Principles and does not breach them in the management of the information
- **Australian Privacy Principle 9- Adoption, Use or Disclosure of Government Related Identifiers**
The organisation has awareness that identifiers used by Government departments cannot be used or disclosed
- **Australian Privacy Principle 10- Quality of Personal Information**
The organisation must take reasonable steps to ensure the personal information it collects is accurate, up to date and complete
- **Australian Privacy Principle 11- Security of Personal Information**
NWDS must take reasonable steps to ensure the information that it collects is safeguarded against misuse, loss, unauthorised access, modification, or disclosure
- **Australian Privacy Principle 12- Access to Personal Information**
Each participant is able to access and review their own personal information records upon verbal or written request to their Coordinator
- **Australian Privacy Principle 13- Correction of Personal Information**
Where identified, any errors in the participants personal information, is adjusted to ensure it is accurate, up to date, complete and not misleading

Collecting, keeping and using identifiable data about Participants

When we collect, keep and use identifiable data about a Participant, we follow procedures that guarantee the privacy of the Participant, and ensure that records are appropriately dealt with, are accurate and are securely stored.

Manner and purpose of collection

The information is necessary for NWDS to provide a vigorous and professional approach to service delivery. The information will be collected in an informed and lawful manner.

Collecting information directly from individuals

NWDS will take every step to inform Participants why we are collecting personal information, what laws give them authority to collect it, and to whom we will disclose it to. NWDS will require certain information when you enter the service to assist us in developing a case plan. This could be assessments such as behavioural assessment, VOOHC Register entries, or healthcare assessments. Consent will be sought prior to the collection of information. We acknowledge that this historical information is important to families and only copies will be made.

Collecting information generally

NWDS will take every step to ensure the personal information it collects is relevant, up-to-date, correct and complete and not collected in an unreasonably intrusive way.

Storage and Security

Personal information will be stored securely to prevent its loss or misuse. Each Participant has a confidential file and will be stored in a locked cabinet. Only relevant personnel will have access to this information. Each participant will also have an electronic file stored in Shiftcare and on the NWDS Intranet. Access to these files will only be on a need to know basis and Security Procedures are held for all external interaction with such storage methods.

Access and amendment

NWDS will take every step to record the type of personal information and to give Participants access to personal information about them. Personal information can be amended or corrected if it is wrong. Consent forms will need to be signed when Participants enter the programs at NWDS. Managers will ensure that individual Participant's records are up to date, to ensure that we deliver the best service to Participants. Disposal of Participant records will be archived, due to the complexities of Participant's dis/abilities we will not destroy any information that will assist in an historical overview of the Participant's life.

Information use

NWDS will keep accurate, complete and up-to-date personal information; using information for a relevant purpose; and only use the information for another purpose in special circumstances, such as with the Participants consent or for some health and safety or law enforcement reasons. The CEO will be the only person who can give approval for release of information.

Disclosure

NWDS may disclose personal information to someone else, for example another agency. This can only be done in special circumstances, such as with the Participants consent or for some health and safety or law enforcement reasons. There are some circumstances where NWDS is required to release information about the participant with or without the consent of the participant or person responsible, these include a medical emergency, where there is an issue of child protection, a crime has been committed, mandatory reporting or reportable incidents are required, or a court subpoena is requesting information. No staff member will pass on information without consent from their Participant and their family.

1.25A COVID-19 SAFE WORK POLICY

POLICY

NWDS is committed to return fully to post Covid-19 services and activities in a socially responsible manner to ensure all are kept safe and well supported.

PROCEDURES

1. **Checklists** - NWDS are using a range of Worksafe checklists to ensure we are meeting all requirements including;
 - a) Workplace COVID-19
https://swa.govcms.gov.au/sites/default/files/2020-05/COVID-19_Workplace-Checklist.pdf
 - b) COVID-19 Safety Plan
<https://www.nsw.gov.au/sites/default/files/2020-06/Covid-19-safety-plan-general.pdf>
 - c) Physical Distancing Checklist – COVID-19 <https://swa.govcms.gov.au/sites/default/files/2020-04/COVID-19-Physical-Distancing-Checklist.pdf>
 - d) Cleaning Checklist- COVID-19 https://swa.govcms.gov.au/sites/default/files/2020-04/COVID-19_Cleaning-Checklist.pdf
 - e) Health Hygiene & Facilities Checklist – COVID-19
<https://swa.govcms.gov.au/sites/default/files/2020-04/COVID-19-Good-Hygiene-Checklist.pdf>
2. **Signage** – Each facility has signage that includes
 - Do not enter if have symptoms of being unwell- Symptoms of COVID-19 include fever (≥ 37.5), cough, sore throat, shortness of breath (difficulty breathing), loss of smell and loss of taste.
 - Before entering - please get temperature checked and sanitise hands
 - Maintain physical distancing- Maintain 1.5metres space between people at all times.
 - Maximum Capacity of space- Signage about the maximum amount of people in each enclosed space.
 - Hand Washing- Reminders about handwashing and instructions about how it should be done at each handwashing area.
3. **Visitors and Contractors**- All visitors and contractors advised by signage to wait at entry (press doorbell), staff to come and take temperature, remind if unwell they cannot enter and ask to sanitise hands. Efforts are made to minimise the amount of time visitors need to be present in the building and staff ensure physical distancing is implemented at all times whilst they are in the building. Delivery of resources will be managed in this way as well if it requires entry to the building.

Where possible meetings are held by phone or via video to minimise needing to be in physical proximity.

4. **Support for Participants and Staff who are Self Isolating-** Where a staff or participant has chosen or been instructed by NSW Department of Health to self-isolate regular contact will be made to ensure they are adequately resourced and monitor for assistance needed.
5. **Access to facilities** – Buildings will be sectioned off to ensure access is restricted to defined activity areas and bathrooms to reduce cross contamination and enable effective daily cleaning. Entry and Exit will be via different doorways and staff and participants will be required to remain in their section of the building and garden area. During the day and at the end of the day the spaces and resources used during the day will be thoroughly cleansed in preparation for the next programs use. Daily temperature checking will be undertaken prior to entry and a quick question check to ensure participants and staff do not present with any mild symptoms or with any smallest signs of illness, particularly sore throat, fever, coughing, shortness of breath, or loss of sensation of taste. All participants and staff advised to wash or sanitise hands on arrival. Efforts will be made to reduce the number of touch points for workers and participants as much as possible.
6. **Dishwashing of crockery and cutlery** – Washing of all items in the dishwasher at hottest temperature possible. Making sure all items are dry prior to reuse.
7. **Cleaning and disinfecting of Surfaces** - Cleaning should start with the cleanest surface first, progressively moving towards the dirtiest surface. When surfaces are cleaned, they should be left as dry as possible to reduce the risk of slips and falls, as well as spreading of viruses and bacteria through droplets. Before a surface is disinfected, it is important it is cleaned first because dirt and grime can reduce the ability of disinfectants to kill germs. Disinfectant may not kill the virus if the surface has not been cleaned with a detergent first. If the surface is not particularly dirty then alternatively, you may be able to do a 2-in-1 clean and disinfection by using a combined detergent and disinfectant. You should avoid any cleaning methods that may disperse the virus or create droplets, such as using pressurised water, pressurised air (including canned air cleaners), dry cloth and dusters. What about workers' personal items? You should instruct your workers to clean personal items used in the workplace such as glasses and phones regularly using disinfectant wipes. Does every surface need to be cleaned? You don't need to clean every surface. The virus is transmitted by breathing in droplets produced by an infected person coughing or sneezing, or contact with contaminated surfaces, so you only need to clean surfaces that are touched. This is true whether the touching is deliberate (e.g. a door knob) or incidental (e.g. brushing a door when reaching for the door knob). There are some surfaces that are never touched (e.g. ceilings and cracks and crevices in machinery) and these do not need to be cleaned and disinfected.
8. **What should my workers wear to clean?** In most circumstances, it will not be necessary for workers to wear protective clothing to clean your workplace. However, workers should use personal protective equipment (PPE) that is necessary for the products they are using. As a starting point:

- Gloves are the minimum requirements
- Medical masks should be used if cleaning an area impacted by a suspected or confirmed COVID-19 case.
- Gowns and disposable suits are not required. Clothes that can be washed afterwards are suitable.
- PPE is available and staff are train on how to use it safely.

9. **What if there is a case of COVID-19 in my workplace?**- If NWDS has a case of COVID-19 in the workplace, Safe Work Australia 13 10 50 will be notified of a diagnosed case of COVID-19 in the workplace. NSW health authority will be consulted to provide advice on what needs to be done in your workplace. Their instructions will be implemented in full. All areas of the workplace will be thoroughly cleaned and disinfected before people can return to the workplace. Safe Work Australia recommends the following:

- Using an ISO accredited cleaner is not required.
- Fogging is not required and is not recommended.
- Swabbing surfaces following disinfection is not required.

10. **Training in Personal Hygiene** - Staff and participants will be trained and monitored to ensure they maintain the highest level of personal hygiene, washing hands effectively with soap preferred and wiping with paper towel. Posters will guide this behaviour and constant reminding and supervision will be implemented to gain maximum uptake of best practice for all in this area. Encouragement of cough etiquette into the elbow and use of tissues once then disposal, and minimising touching faces.

11. **Social Distancing** - All staff have been instructed in ensuring social distancing can be implemented as much as possible with role plays and floor markings to assist to remind all of these requirements. Posters will be available to provide a visual reminder to all. We will be ensuring we maintain social distancing to the maximum extent and Staff will need to be vigilant in training, checking and recommitting everybody to maintaining distancing, hand washing and not touching faces PLUS keeping physical distance from their friends and asking to use the toilet so they can be supervised around others and do not congregate in the hallway or in transit areas.

12. **Minimising Congestion and Potential cross contamination of groups**- Plans must be in place to reduce congestion and groups of people mingling outside their rostered groups. Attention should be focused on reducing these opportunities at all times by implementing staggered start and finish times, having adequate allocated facilitation staff to supervise and support transition periods to ensure physical distancing and separateness of groups is maintained.

Staff who have meal breaks must have them at staggered times and maintain 1.5 metre physical distancing throughout.

Where possible staff are supported to work from home to minimise office congestion. Rosters of staff in office are managed to ensure physical distancing can be implemented.

13. **Community Access** - At first there will be minimal or no community access, public transport use, or going to the shops. Where vehicles are used, a bus seating plan will be developed for best Social Distancing.

14. **Vehicle Use –**

- Vehicle is cleaned and all touch points sanitised by staff prior to use.
- All passengers to sanitise hands prior to entering the vehicle.
- All passengers and Driver to wear masks when in the vehicle, wherever possible, and everyone reminded during the journey to not touch their face.
- All passengers encouraged to be seated at maximum distance from each other to maintain physical distancing. This will incorporate seating plans for behavioural support.
- Participants and staff to be encouraged to carry their own belongings as much as possible and to sanitise hands after touching other people's belongings.
- Driver to set air conditioner to fresh air rather than recirculate to minimise the circulation of germs.
- Vehicle to have all touch points and seats cleaned after each use. This includes the driver area.

15. **Bus Pick up and Drop Off** - To commence only 1:1 pick-up and drop off will be available to ensure social distancing is provided. As we progress we will return to transport services being available as we can meet all safety requirements and seating plans are suitable.

16. **Coronavirus Symptoms and App** - All staff has been encouraged to install the Australian Government COVID Safe tracking app to their phones and have it turned on. If a staff has any of these mild symptoms or with any smallest signs of illness, particularly sore throat, fever, coughing, shortness of breath, or loss of sensation of taste, they are also advised that they must seek medical assessment and request COVID-19 testing and not return to work until results are known and they no longer have any symptoms. All staff is also advised to inform HR if they have been exposed to anyone who has been diagnosed with COVID-19, they will be requested to self-isolate and not work for 14 days. All commencing programs will be compliant with the current level of restrictions as set out by the NSW government. Over time these will change further as restrictions are eased further. All staff is also advised to inform HR if they have been exposed to anyone who has been diagnosed with COVID-19, they will be requested to self-isolate and not work for 14 days. Staff must not congregate in the car parks chatting as it is vital we keep that separation for ongoing services to be able to continue.

17. Participant Expectations - Similar to staff there is an expectation that participants are encouraged to install the Australian Government COVID Safe tracking app to their phones (if they have one) and have it turned on. All participants must not come to programs or have staff to come work with them individually with any smallest signs of illness, particularly sore throat, fever, coughing, shortness of breath, or loss of sensation of taste. If a participant has any of these symptoms they are also advised that they must seek medical assessment and request COVID-19 testing and not return to receiving service until results are known and they no longer have any symptoms. All participants are also advised to inform their Coordinator if they have been exposed to anyone who has been diagnosed with COVID-19, they will be requested to self-isolate and not receive individual or small group supports from NWDS for 14 days.

18. Staff Requirements - If staff can't work they can -

- a) Present a medical certificate and go on Personal Leave
- b) Provide a certificate for carers leave and go on Personal Leave
- c) If you prefer not to work you can request Annual Leave or Long Service Leave
- d) If aged over 70 or over 60 with a compromising illness you can ask not to work and work from home or in a role away from people if we can make that available
- e) Any other concerns can be addressed to HR as an email and it will be addressed on a case by case basis. HR will direct these enquiries to the CEO for consideration.
- f) Supporting Individuals with a Disability is classed as an essential service therefore children can return to school full time to assist staff to return to work

19. Food Handling Requirements related to COVID-19 –

- This is in addition to the usual food handling requirements.
- All staff working with food that is shared or for sale must complete COVID-19 awareness food service training.
<https://www.foodauthority.nsw.gov.au/covid-19-awareness-food-service-training>
- Staff allocated to food preparation and another to taking orders, ensure they are collecting contact details of customers, cleaning of seating areas after use.
- Contact details of customers will be collected each day and transferred to an electronic format within 24 hrs, it will be stored so it is easily accessed by authorised people if required. Paper copies are shredded. This information is confidentially stored for 28 days after accessing the site. After 28 days have elapsed, the person's details will be deleted.