



The CASSI Service Policy Handbook

(2021 Edition)

**CASSI provides quality support
to enrich the lives of people with disabilities**

(Confirmed for use February 2021)

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SECTION 1: GENERAL INTRODUCTION

The CASSI Service Policy Handbook forms part of our quality management system.

The document's is designed and presented in an accessible and useable format. That is, with an alphabetical listing of all current policies and in a consistent layout.

The Handbook is not intended to be a stand-alone document or reference. It is meant to be used in the broader context where other resources and documents will also serve as a guide to the current practices in the human services and disability sectors.

The other resources include:

- The CASSI mission statement
- The CASSI Annual Reports and reviews of our service
- The NDIS regulatory requirements
- The NSW & QLD Disability Service Standards
- The NSW and QLD requirements for restrictive practices
- The National Disability Services Standards
- The quality management systems at use in CASSI
- Workplace Health and Safety legislation
- Workcover Legislation
- Equal Opportunity Legislation
- The Position Specifications used at CASSI
- The Code of Conduct in operation at CASSI
- Australian Privacy and Confidentiality Legislation

The Handbook is an evolving resource, in that it is redeveloped each year just as the ways that services grow and operate develop each year.

CASSI does not maintain control of external documents. Useful web service locations are provided in various entries of the Handbook. These websites are most likely to contain current and accurate information.

The handbook is set out in two sections

1. An introduction including statements on implementation, references and some relevant contextual information.
2. CASSI's policies and procedures displayed in alphabetical order.

**SECTION 2:
POLICIES AND PROCEDURES
(ALPHABETICAL LISTING)**

ABUSE, HARASSMENT, ASSAULT OR NEGLECT

Policy Statement

All staff and service users have the right to a workplace and / or service environment free from abuse, harassment, assault or neglect.

Objective

All staff, under the leadership and guidance of the CEO and Service Managers, are responsible to ensure that our work practices are consistent with this policy. This includes ensuring that

- our workplace and service locations are free from abuse, harassment, assault, and neglect,
- our corporate reputation as a fair and conscientious employer and service provider is maintained and complies with all relevant legislation,
- all complaints are dealt with quickly and sensitively.

Strategies and Procedures

Staff Responsibilities

- All staff have a responsibility to report any suspected abuse, assault or neglect of service users or staff.
- CASSI accepts the reporting of any suspected abuse is a valid action and staff should feel confident they will receive support and encouragement for their actions.
- In the first instance, staff should approach their service manager or the CEO where any abuse is suspected and request an investigation.
- It is CASSI policy that staff do not form an intimate relationship with a service user and also be a member of the team supporting that service user.

Procedure for Reporting Suspected Abuse of a Service User

- The CASSI Management Committee have taken a leading role in regard to any allegations of abuse at CASSI. There is a standard and formal section of the Committee's meeting agenda for a report of any examples of abuse which have been

identified and how they have been dealt with. So, the Committee will expect a summary overview of the following steps, at the next available meeting; and prior to that the CEO will advise the Committee President of the details of the allegations and how it is being responded to.

- Immediately telephone the CEO to advise of the situation. If the CEO is not available, the operations manager or service manager should be called.
- The CEO, operations manager or service manager will attend the support location to see the evidence of suspected abuse.
- The CEO should initiate contact with the police if there is clear evidence of the suspected abuse.
- In the event police are involved, all staff will take directions from the police as to the medical examination and welfare of the service user, the provision of statements or information and all associated matters.
- Where there is a reasonable degree of evidence that abuse has occurred then in the first instance the CEO may decide to stand the staff person down, pending the outcome of an investigation. In very serious cases summary dismissal may be the appropriate response.
- The CEO will be responsible for making early contact with the family or advocate of the service user involved, to inform them of the situation and of the action being proposed or taken.
- At the earliest possible time and at the direction of the CEO, staff members will be required to prepare and submit written reports (independently and separately from each other) concerning the alleged event/s.
- The CEO will submit a summary report, together with the staff statements, to the management committee which will outline the actions and implications for the organisation.
- With the introduction of the NDIS first in NSW then in QLD, that funding body has a structural approach to dealing with reports of abuse. That detail is outlined on the website of the NDIS Quality and Safeguards Commission. That website contains the current definitions of what they regard as reportable incidents of abuse; which is not as extensive as that which is listed here for CASSI's purposes.

Additional Information

The following is an indicative list or description of what could be considered to be abuse, harassment, assault or neglect.

- Physical abuse includes such examples as the infliction of pain or injury or physical coercion such as hitting, shoving, pushing, or burning and physical restraint.
- Psychological / emotional abuse includes the infliction of anguish through actions that lead to fear of violence, to isolation or deprivation, feelings of shame, loss of dignity or powerlessness.
- Financial abuse is the illegal or improper use of another person's property or finances.

- Neglect means the failure to provide the basic necessities of life such as food, clothing, shelter, health care, safety or security needed for the person's optimal growth and development or the failure to use the available resources to meet those needs.
- Sexually abusive or exploitative behaviour ranges from rape to indecent assault, sexual harassment and inappropriate touching.
- Physical abuse - Non-accidental actions causing injuries, such as bruising, lacerations welts, burns, fractures or dislocations
- Threats of violence - Refusing service users a service or food because they haven't done what they were asked to do
- Hitting, smacking, biting or kicking
- Pulling arms, hair or ears
- Bending back fingers or bending an arm up behind the back
- Placing hot substances in the mouth for swearing
- Beatings or shakings
- Physically restraining a service user without appropriate permission
- Psychological / emotional abuse
- Humiliating service users for losing control of their bladder or bowels
- Shouting orders to service users
- Using humiliating names when speaking to service users
- Treating adult service users as children
- Humiliation, emotional blackmail, blaming, swearing, intimidation, name calling or isolation from friends and relatives
- The use of isolation
- Locking service users in their bedroom
- Using other service users to provide physical control over another service user
- Harassing service users to eat food they don't want to eat (or which is contrary to their cultural or religious beliefs)
- Sexual abuse and / or assault
- Voyeurism
- Displaying pornographic photography, literature or material
- Financial abuse
- Denying service users access to or control over their money or personal property, without consent of the service user or of a duly appointed advocate.
- Taking money or other property of service users without their consent (which is likely to constitute a criminal offence)
- Misappropriation of money, valuables or property
- No inventory kept of significant purchases
- No records or intentional misuse of records of expenditure or purchases
- Forced changes to wills or other legal documents
- Staff assisting service users to eat or drink in an incorrect or hurried or rushed manner
- Failure to provide service users with adequate food, clothing or health and personal care needs
- Inappropriate administration of medication that is not in accordance with the current prescription

- Giving non-prescribed medication to a service user without first checking with the service user's doctor of any potential side effects
- Administering medication to a service user after the expiry date
- Staff not utilizing a service user's communication devices to allow the expression of needs
- Failure of staff to recognise or acknowledge non-verbal messages conveyed by service users who have limited communication abilities
- Staff leaving service users alone in a vehicle

Reportable incidents (NDIS)

Reportable incidents are serious incidents or allegations which result in harm to an NDIS participant and occur in connection with NDIS supports and services.

Incident Management

CASSI must now report certain incidents to the NDIS Commission.

CASSI must report to the NDIS Commission serious incidents (including allegations) arising in the context of NDIS supports or services, including:

- the death of an NDIS participant
- serious injury of an NDIS participant
- abuse or neglect of an NDIS participant
- unlawful sexual or physical contact with, or assault of, an NDIS participant
- sexual misconduct committed against, or in the presence of, an NDIS participant, including grooming of the NDIS participant for sexual activity
- the unauthorised use of a restrictive practice in relation to an NDIS participant.

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

CASSI is responsible for preventing, responding to, and managing incidents. CASSI has in place an internal management and reporting arrangements to ensure that all incidents (not just reportable incidents) are recorded, and that actions are taken to respond to them and prevent such incidents from happening again. CASSI will provide support to ensure that their health, safety and well-being are maintained, and immediate

action is taken to ensure they are not in harm. Support and assistance will be provided to ensure that all needs are addressed.

The participant, and with participants consent, their support network and other stakeholders, as appropriate, are included in the review of incidents and documented in the detailed report.

Timeframes and reports

Most reportable incidents must be notified to the NDIS Commission within 24 hours of a provider's key personnel being made aware of it, with a more detailed report about the incident and actions taken in response to it to be provided within 5 business days.

The unauthorised use of restrictive practice must be notified to the NDIS Commission within 5 business days of a provider's key personnel being made aware of it. If there is harm to a participant, it must be reported within 24 hours.

A **final report** may also be required within **60 business days** of submitting the five-day report. The NDIS Commission will advise providers whether a final report is required.

In all cases, CASSI must assess:

- the impact on the NDIS participant
- whether the incident could have been prevented
- how the incident was managed
- what, if any, changes are required to prevent further similar events occurring.

CASSI must make their records available to auditors as part of their quality assurance process and contribute to NDIS Commission investigations relating to incidents.

Who will notify the NDIS Commission of a reportable incident?

CASSI CEO or Operations Manager will be responsible to notify the NDIS Commission of a reportable incident.

How does CASSI notify the NDIS Commission of a reportable incident?

CASSI CEO will submit a completed reportable incident form to the NDIS Commission.
at reportableincidents@ndiscommission.gov.au

Web sites for more information

NDIS Commission email to report reportable incidents
reportableincidents@ndiscommission.gov.au

NDIS
<http://www.ndis.gov.au>

NDIS Quality and Safeguards Commission
<http://www.ndiscommission.gov.au>

A NSW based advocacy and advice service (DAISI)
<http://www.daisi.asn.au/>

A Gold Coast based advocacy and advice service (Gold Coast Advocacy Inc.)
<http://www.gca.org.au/>

Documents and Forms

There are several forms, records and reports that will be applicable in such circumstances; including,

Incident Report Form
Hazard Report Form
Service User's File Notes
Reports prepared by staff, Managers and CEO

ACCESS and EQUITY

Policy Statement

CASSI will ensure each person, who meets our eligibility criteria and is seeking a service, has access to our services on the basis of relative need and available resources.

Objective

Access to our services will be based therefore on identified needs, the resources which are available and the skills, capacity and experience of CASSI as a specialist disability support service.

Access to our services is also to be free from discrimination of any kind, including:

- gender,
- race,
- sexual preference,
- age,
- socio economic status,
- political, cultural or religious beliefs.

CASSI also recognizes that each person with a disability or their advocate has the right to give their consent to receive an appropriate service that is responsive to their needs and to refuse or leave a support service at any time.

CASSI also has the right to withdraw our services if there are no positive outcomes being achieved for the service user. CASSI will consult with the service user, their family / advocate and staff, prior to withdrawing our services. And CASSI will ensure that reasonable access to and information about alternate service are provided for consideration.

CASSI ensures responsive and alternative communication according to participants needs by tailoring the communication preference according to the individual needs of the participant and advocates. Translator assistance can be arranged if required.

Strategies and Procedures

Access to specialist disability support services, at the time of writing, is in a period of significant change as the funding arrangements, through the NDIS, are “rolled out” across the country. In NSW the “roll out” is complete in that there are no remaining state funded

services; In QLD there is a partial “roll out” in effect and much of the transition is planned to be completed mid-2019.

In NSW there is a significant change in the access and referral processes that were and are operational. Until recent times the NSW State Department of FACS funded and resourced a comprehensive and structural approach to gaining access to support services. Now that that State funding arrangement has been fully closed and replaced by the NDIS, there is a new arrangement in place which has some strengths and some unresolved weaknesses. The main strength that is in place for each person who gains access to NDIS funding is that they then have full choice and control in place in regard to the available services they wish to use. This degree of independence is supported by what could be described as a new and to some extent evolving process; that is, each person has access to information about the NDIS approved services which are available in their region. However, what is missing is that there is no updated and accurate list of which services have capacity to provide the support which the person is seeking; to that extent the outcome of enquiries can be a hit and miss situation. The NDIS do, for some people, offer funding of a Supports Co-Ordinator; that is a person whose role it is to assist the person to find the services that he or she may wish to use. Likewise, though, that Co-Ordinator also does not have access to up-to-date information about services which may or may not have the capacity to provide the supports that a person wishes. It is likely that this end of the NDIS process will be evolved and developed in time.

The current situation for QLD is mixed; probably until July 2019, when the transition to the NDIS is complete in that state. Until that time there may be some access to state funded services as well as access to NDIS funded services. The state funded services access will most likely only be for people who are in an urgent circumstance that cannot be readily responded to by the NDIS. Otherwise, there are similar arrangements and issues as described for the NSW situation that will be operational in QLD.

CASSI is undertaking an active involvement in the impact of the “roll out” of the NDIS, on our existing service users and on people who are new to funded supports. To that end the CEO and the Management Committee are keen to be involved in appropriate evaluations of the new systems and in providing our service’s impressions and data about the new systems.

There are two particular items of interest that are linked to this policy area; these are being developed through the NDIS transition process and the outcomes are crucial to current and future service users at CASSI. The first is that the NDIS is seeking to fund supports which are “fair and reasonable”. That is a very broad term; there is work being done by the NDIA to create a working definition of these concepts. The other issue of great interest is the methods to be used to define the quantum or amount of funds that will be made available to each individual and what that is expected to purchase. This too is the subject of current and active debate. CASSI and others should particularly stay informed about these two central issues.

Disability funding through the NDIS

NDIS arranges its offers of funding along a range of identified types of support. CASSI is registered with the NDIS for a range of service delivery types; that is both in NSW and QLD. When we have the service registration, capacity and the appropriate skills we will consider accepting a request for support by a participant in the NDIS. If there is agreement to provide that support, then there will be a Service Agreement established between the participant and CASSI, as per the NDIS format and expectations.

Once an agreement to provide support is made then CASSI will use our spreadsheet tracking systems to follow the funds available, for each identified purpose, and the funds expended for each purpose. That spreadsheet will be reviewed on a regular basis by the CEO and the Operations Manager to oversee the viability and suitability of the funding that has been made available.

Where CASSI is also identified as a Supports Co-Ordinator we will provide an on-going review of the appropriateness of the supports being provided for the participant; and also assist the participant to engage with the NDIS with respect to reviews of their approved plans.

Privately Funded Service Users.

CASSI can also be approached by organisations, usually trust funds, to provide support to a person with a disability on a fee for service basis. Such approaches for support can be in either Queensland or in NSW.

While these arrangements are at one level a commercial transaction, they should always be undertaken in the same way CASSI supports people with a disability who are supported through the provision of government funding. The arrangements will always be consistent with the Disability Service Standards and they will always be provided in a quality-based environment.

When CASSI is approached to provide support to an individual who has funding, there are a number of issues that require attention and consideration:

- Does the person fall into the main target group for CASSI's services; that is, people with a disability who require medium to high levels of support?
- Are the supports to be provided within the skills, experience and capacity of CASSI?
- If there is a consideration to sharing the cost of support (co-tenancy arrangements) then there must be an assessment of compatibility and due consideration to the wishes of the people with a disability that could be involved in the co-tenancy.
- The financial viability of the proposed support arrangement will also be assessed in detail.
- The new support arrangement must be likely to produce an improvement to the lives of each of the people with a disability who are involved.
- It may be advantageous and preferable to consider a reasonable trial period to evaluate the effectiveness of the proposed support arrangement.

ACKNOWLEDGEMENT OF COUNTRY

Policy Statement

CASSI will acknowledge the traditional owners of the lands on which we meet as an important mark of respect, through an Acknowledgement of Country.

Objective

Contemporary Australian society is seeking to find ways of establishing a basis for reconciliation between the indigenous and non-indigenous members of our community. In part that can be facilitated by the respectful acknowledgement of the traditional owners of the lands on which CASSI conducts any formal meetings, by offering an Acknowledgment of Country.

Strategies and Procedures

The Acknowledgement of Country, of the traditional owners of the land on which CASSI conducts a formal meeting will be at the commencement on such occasions as:

- The Annual General Meeting
- Any Special General Meeting
- Every meeting of the Committee of Management
- Every meeting of a support team
- Every meeting of the Quality Review Committee
- Any formal meeting held between CASSI and representatives of other agencies

The acknowledgement will be conducted by the person who is leading or chairing the meeting.

An Acknowledgement of Country is a way of showing awareness of and respect for the traditional Aboriginal or Torres Strait Islander owners of the land on which a meeting or event is being held, and of recognising the continuing connection of Aboriginal and Torres

Strait Islander peoples to their Country. At a meeting, speech or formal occasion the speaker can begin their proceedings by offering an Acknowledgement of Country. (Unlike a Welcome to Country, it can be performed by a non-Indigenous person).

The traditional owners of the area in which CASSI provides support are the Yugambeh people. The Yugambeh are a group of Australian Aboriginal clans whose ancestors all spoke one or more dialects. Their traditional lands are located in south-east Queensland and north-east New South Wales, now within the Logan City, Gold Coast, Scenic Rim, and Tweed City regions.

The Bundjalung people are a large Aboriginal nation, a federation of a number of groups of clans which occupy the land from Grafton on the Clarence river of northern New South Wales north to the town of Ipswich and the Beaudesert, in southern Queensland, and down around the other side of the Great Dividing Range and back to Grafton.

The preferred form of an Acknowledgement of Country, at CASSI, is as follows:

- I would like to acknowledge that this meeting is being held on the traditional lands of the Yugambeh people and pay my respect to elders both past and present. (for meetings conducted by CASSI north of Tweed Heads)
- I would like to acknowledge that this meeting is being held on the traditional lands of the Bundjalung people and pay my respect to elders both past and present. (for meetings conducted by CASSI south of and including Tweed Heads)

ADMINISTRATION PROCEDURES

Policy Statement

It is CASSI's aim to operate in an efficient, timely and effective manner. And it is our belief that a sound administration structure will assist in the achievement of that aim.

Objective

These procedures are designed to better ensure that all records and processes are provided on time and accurately. This will better enable CASSI to meet its compliance regimes and to sustain our services in an efficient and effective manner. These procedures will address CASSI's responsibilities as an employer, as a contractor and as a corporate citizen.

Strategies and Procedures

Employment issues

CASSI engages staff under the guidelines described in the SCHADS Award, the National Employment Standards and also our Individual Agreements. CASSI will seek to ensure that all staff records are completed accurately and on time. The records form part of a staff member's employment history and safeguard correct payment of all entitlements and wages.

Wages Forms

All wage forms (time sheets and leave notifications), together with rosters, must reflect actual hours worked. Where there is a discrepancy of hours shown, the staff member may not be able to be paid until clarification is obtained.

Time sheets:

- Time sheets should be completed at the end of each shift. It is important that location and dates are entered.

- The signature of an employee indicates that the entries are true and correct. Any mistake may be altered by the person who signed the timesheet, administration officers or the relevant service manager.
- In the situation where a staff member is unable to make the required alterations because of sickness or other absence, the operations manager, service manager or CEO may alter and sign the changes.
- Timesheets form a record for workplace health and safety matters.
- Completed timesheets should be in the office by 9am on the Wednesday each fortnight of the designated pay period.
- Pay period finishes at midnight, the second Tuesday of the pay period.

Personal Leave Notification:

- Where an employee needs time off for sickness, a leave notification form must be completed as soon as practicable and may be sent in with the next timesheet.
- Where an employer needs time off to have a medical or cosmetic procedure or returning from an injury, a leave notification needs to be completed detailing the date of the procedure, the expected leave as stated by the treating doctor and a medical clearance and suitable duties plan completed if needed prior to returning to work. You will be required to fill out a return from leave form following leave and forward to the CASSI office prior to returning from leave.
- This form is also required where a staff member has applied for carer's leave which is to be paid from the personal leave entitlement of the employee.
- The employer may require a medical certificate or statutory declaration for any personal leave.
- A leave form is to be completed where an employee requests leave on the death or significant illness of a person, as specified in the National Employment Standards. 24 hours or 3 x 8hour days will be without deduction of pay, on each occasion.
- The employee will supply reasonable proof of illness or death.

Family and Domestic Violence Leave:

- All employees are entitled to 5 days unpaid leave each year to deal with family and domestic violence.
- Family and domestic violence means violent, threatening or other abusive behaviour by an employee's close relative that:
 - seeks to coerce or control the employee
 - causes them harm or fear
- A close relative is an employee's:
 - spouse or former spouse
 - de facto partner
 - child
 - parent
 - grandparent
 - grandchild

- sibling
- an employee's current or former spouse or de facto partners child, parent, grandparent, grandchild or sibling
- a person related to the employee according to Aboriginal or Torres Strait Islander kinship rules

Annual Leave:

- Any request for leave should be forwarded to the roster service manager at least four weeks before the proposed start date.
- CASSI has a responsibility to provide support to service users and may not be able to grant the requested leave unless appropriate staffing arrangements can be made to cover the absence.
- In accordance with the National Employment Standards the following conditions apply to Annual Leave. The leave will be by mutual agreement between CASSI and the employee. Noting that CASSI may not unreasonably refuse a request for annual leave.

Other Leave:

- Leave without pay may be granted for a period of up to twelve months. Leave without pay will only be granted once all annual leave entitlements have been used.
- Any request for leave without pay should be forwarded to the roster service manager at least four weeks before the proposed start date.
- Ceremonial leave will be granted, as appropriate, as specified in the SCHADS Award.
- Community Service Leave will be granted, as appropriate, as specified in the National Employment Standards.
- Parental Leave will be granted, as appropriate, as specified in the National Employment Standards.

Shift Changes:

This section is to be read in conjunction with Rostering Arrangements.

- When a worker is rostered on and are aware, they have a personal matter that will require attention at that time, they may change their rostered shift with another coworker. Both staff are then required to notify and confirm changes with the roster service manager or their service manager.
- Where a staff member is unable to attend work (e.g., sickness) the rostered-on worker should attempt to cover the shift with other co-workers. If unable to fill the shift the employee must contact the house coordinator, service manager or CASSI On-Call Manager immediately. A leave form must be completed on return to work along with any other relevant documentation (e.g., medical certificate if requested).
- In the interests of service users, last minute changes of shifts for anything other than emergencies, are not permitted.

- All changes of shifts, including changes made for the needs of service users, must be confirmed with the relevant service manager and phoned through to the office.

NB: Shift changes which occur after hours must be called to the CASSI on-call mobile.

Payment of Wages

- Wages are prepared on a Wednesday once a fortnight from the master rosters, current rosters of each location and also from the time sheets, leave forms and other claims for payment.
- The time sheets and other claims for payment are to be received by 12 noon on the Wednesday that pays are prepared.
- The forms and documents which are received by 12 noon will then be processed first for payment; the staff who provide their forms and documents will have their pays processed as a part of a second “run”, later that afternoon if time permits, or next day.
- Wages are paid by direct credit into an employee’s nominated bank account on the Thursday or Friday depending on the bank’s processing arrangements; for staff who provide their forms and documents prior to 12 noon; the other staff will most likely receive their pay a day later.
- Staff should notify the office, in advance of wages preparation, of any change to their bank details.
- A fortnightly pay slip and a monthly roster will be sent to the employee.
- Any queries about wages should be addressed to an administration officer.

Salary Packaging

- All permanent staff will be offered the opportunity to be included in CASSI’s salary packaging system provided to employees through the Community Business Bureau (CBB).
- This allows for staff members of a public benevolent institution (PBI) to have a proportion of salary paid tax free.
- The details of this arrangement will be included in the CASSI sign up pack which then requires the employee to contact CBB direct as per the Salary Packaging Employee Information Booklet.
- The salary packaging arrangement continues at the discretion of the management committee and may be altered from time to time depending on changes to taxation laws.

AGREEMENT FLEXIBILITY

Policy Statement

CASSI will seek to work collaboratively with its staff, where that is possible and where that is consistent with the needs of our service users, to enhance the flexibility of our workplace.

Objective

All disability support services are respondents to the Social Community Home Care and Disability Services Award (SCHADS) which details the minimum pay and conditions of all employees. There may however be some circumstances in which an employee would prefer to vary part of that Award through a formal agreement for a range of reasons. CASSI commits to considering such requests in a reasonable and positive way.

Strategies and Procedures

There are a number of areas and conditions in the Award that may be changed by mutual agreement. These include:

- a) Arrangements for when work is performed,
- b) Penalty rates for staff not engaged as continuous shift workers,
- c) Allowances, and
- d) Leave loading.

It should be noted that CASSI will also consider a request for a flexible adjustment to the provisions of the Award by an employee who is a parent, or who has responsibility for the care of a child. In these cases, the child will be under school age; or under 18 where the child has a disability. Similarly, employees who have caring responsibilities for an adult may also seek to have a change in working arrangements.

To be eligible to change the terms of the SCHADS Award there are conditions that the employee and employer must first satisfy. These conditions are:

- a) Employees must have worked for CASSI for a minimum of 12 months before making a request. For a casual employee, the person must have been engaged on a casual basis immediately before making the request and it should be reasonably likely that future casual engagement for work will be offered.
- b) Employees must make the request in writing, setting out the reason(s) and the changes sought.
- c) CASSI must respond to the request within 21 days, in writing. Where the request is refused, the reasons for the refusal must be clearly set out in plain language. CASSI may only refuse the request on reasonable business grounds.
- d) Where an agreement is achieved, the terms agreed to must be in writing, and signed by both the employee and CASSI. The agreement also needs to state the date the agreement commences to operate. CASSI must give a copy of the agreement to its employee and keep a copy of the agreement.
- e) The employee and CASSI must have come to this agreement without coercion or duress.

In addition to the above considerations there are also three principles which underpin this policy:

- a) An agreement of this nature between CASSI and an employee must result in the employee being better off overall; that is the employee must be demonstrably better off because of the agreement. And importantly, the agreement must detail how the employee is better off overall in relation to the CASSI's terms and conditions of employment as defined in the SCHADS Awards.
- b) If CASSI is seeking to enter into an agreement, they must provide a written proposal to the CASSI employee. CASSI must ensure that the employee understands the proposal and if need be is translated into an appropriate language to assist with their comprehension.
- c) An agreement may be terminated by CASSI or by the employee giving four weeks' notice of termination, in writing, to the other party and the agreement ceasing to operate at the end of the notice period. Alternatively, the agreement may be terminated at any time, by written agreement between CASSI and the CASSI employee.

Web Sites

Fair Work Australia has the most range of information on their web site about this and other industrial issues.

<http://www.fwc.gov.au>

AUDITS OF SERVICE DELIVERY

Policy Statement

CASSI actively engages in the operation of a quality management system in order to promote service delivery at a high standard. This will include the use of both internal and external audits.

Objective

By the use of regular audits CASSI will be seeking feedback about our service's quality and level of responsiveness to the needs of our service users. The outcomes of the audits will then feed directly into CASSI's processes of continuous improvement.

Strategies and Procedures

Internal Quality Audits:

Internal Quality Audits are performed to ensure the organisation adopts sound management practices which maximize outcomes for service users. Internal audits and assessments are conducted by CASSI as a part of our Quality Management System and to also ensure compliance with legislation and funding body requirements.

Internal audits will be undertaken to ensure that procedures and the Disability Service Standards are being met and for other purposes as deemed necessary by the CEO.

The Quality Manager and Operations Manager develop an Internal Quality Audit Schedule to ensure all elements of the quality system are audited, at all support locations and at the administration office, by nominated staff at least once annually.

The schedule is approved by the CEO and then all staff involved are advised by the Quality Manager. The CEO and Quality Manager will consider requests for delay and will amend the schedule when requests are approved.

In order for audits to be procedurally fair, open and transparent, it is essential the Quality Manager ensures the Service Manager and staff are informed about the audit purpose and processes. This process is an integral part of our culture of seeking feedback about service performance and continuous improvement.

Conducting the Audit:

Where possible the CEO, or designate, will select suitably skilled and experienced staff to undertake an audit. Personnel with direct responsibility for the function being audited, will not audit their own area.

Audits will be conducted using prepared checklists (copies of existing approved Quality Procedures) that will be raised by the nominated auditor. The checklist will become part of the audit report.

The audit is an evidence-based process – the quality manager or nominee will visit each service location and peruse the forms and documentation specific to each service user.

Audit evidence can be gained by processes such as:

- Conducting service user surveys; this can be done my post, in person, by telephone and focus group. The methods to be chosen by the service user and or their advocate.
- examining forms, policies, procedures, and service user files.
- examining records of actual training conducted.
- discussing support issues with staff to further explore evidence.
- holding interviews (with management, clients, staff).
- observing support processes in a range of settings.
- reviewing facilities.

The Quality Manager will discuss the findings of the audit with the staff and the service manager who work in the area that is being audited. Action plans will be developed from the findings of the audit to ensure that corrective actions take place in a timely manner.

The quality manager may introduce additional unscheduled follow up audits to verify the effectiveness of the corrective action implemented.

The quality manager will table the findings of the Internal Quality Audits at the next Quality Review meeting after the audit.

External Quality Audits

The CEO will ensure that corporate policies are developed for the requirements of:

- Applicable State Disability Service Standards (NSW and QLD) and also the National Disability Services Standards
- The Disability Sector Quality System / Human Services Quality Framework (QLD)
- The third-party verification process (NSW)
- And as the NDIS is applicable currently in NSW and QLD, in accordance with the expectations and regulatory framework of the NDIS Quality and Safeguards Commission.

BEHAVIOUR SUPPORT AND DEVELOPMENT OF SUPPORT PLANS

Policy Statement

CASSI acknowledges that each person we support will interact with his environment and others in an individual manner; and it is our role as a support service to respect those differences and to accommodate those difference in the supports that we provide.

Objective

Where a person who is supported by CASSI has demonstrated behaviours of concern then our service will seek to provide support in ways that aim to reducing the frequency and intensity of those behaviours. Where those support strategies include the use of restrictive practices then it is CASSI's stated intention to reduce and eliminate the use of those practices.

Strategies and Procedures

The selection and use of support strategies that respond in a positive way to the presence of behaviours of concern will always be considered, respectful, based on expert and experienced and consistently documented.

CASSI's strategic and support approach is arranged with these principles in mind, as well as the requirements of the NDIS Quality and Safeguards Commission; and also, of the NSW and QLD state-based requirements.

Behaviour support is about individualised strategies for people with disability that are responsive to the person's needs, in a way that reduces the occurrence and impact of behaviours of concern, and minimises the use of restrictive practices.

The arrangements for behaviour support under the NDIS Commission focuses on person-centered interventions to address the underlying causes of behaviours of concern, or challenging behaviours, while safeguarding the dignity and quality of life of people with disability who require specialist behaviour support.

These arrangements will include undertaking a functional behavioural assessment, then developing a behaviour support plan containing evidence-based, proactive strategies that meet the needs of the person.

Who can develop behaviour support plans containing a regulated restrictive practice?

These plans can be developed by a NDIS registered specialist behaviour support service or by a NDIS registered behaviour support practitioner who is engaged by the service provider. Such registration requirements are an expectation of the NDIS Commission for people who are participants in that funding scheme.

What is the time frame within which a behaviour support plan containing a regulated restrictive practice must be developed?

Where a regulated restrictive practice is used in relation to a person with disability; and because of that use, a specialist behaviour support provider or practitioner is engaged to develop a behaviour support plan an interim behaviour support plan must be developed within 1 month. And then a comprehensive behaviour support plan will be developed within 6 months.

The NDIS Commission's expectations about how behaviour support plans containing a regulated restrictive practice must be developed.

A behaviour support plan for a person with disability that contains a regulated restrictive practice must be developed in accordance with any authorisation process (however described) in the State in which the regulated restrictive practice is, or is proposed to be, used. For CASSI, that means that the current expectations in either NSW or QLD will be applicable, depending on where the person lives.

In addition to the guidelines and expectations of the relevant NSW or QLD state authority for restrictive practices, the NDIS Commission has these guidelines that must also be followed when developing and reviewing a behaviour support plan for a person with disability. The specialist behaviour support provider must take all reasonable steps to:

- a) reduce and eliminate the need for the use of regulated restrictive practices in relation to the person with disability; and
- b) consider any previous behaviour support assessments and other assessments; and
- c) make changes within the environment of the person with disability that may reduce or remove the need for the use of regulated restrictive practices; and

- d) consult with the person with disability; and
- e) consult with the person with disability's family, carers, guardian, or another relevant person; and
- f) consult with the registered NDIS provider who may use the regulated restrictive practice and other relevant specialists.

When consulting in accordance with these guidelines, the specialist behaviour support provider or practitioner must provide details of the intention to include a regulated restrictive practice in the behaviour support plan, in an appropriately accessible format, to the person with disability subject to the plan, and the person with disability's family, carers, guardian or another relevant person.

In developing a comprehensive behaviour support plan for a person with disability, the specialist behaviour support provider must undertake a behaviour support assessment, including a functional behavioural assessment of, the person with disability.

The NDIS Commission's expectations about how a behaviour support plan containing a regulated restrictive practice will be structured.

A behaviour support plan must include strategies that are evidence-based, person-centred and proactive and which address the person with disability's needs and the functions of the behaviour.

The regulated restrictive practice must:

- a) be clearly identified in the behaviour support plan; and
- b) if the State or Territory in which the regulated restrictive practice is to be used has an authorisation process (however described) in relation to that practice—be authorised in accordance with that process; and
- c) be used only as a last resort in response to risk of harm to the person with disability or others, and after the provider has explored and applied evidence-based, person-centred, and proactive strategies; and
- d) be the least restrictive response possible in the circumstances to ensure the safety of the person or others; and
- e) reduce the risk of harm to the person with disability or others; and
- f) be in proportion to the potential negative consequence or risk of harm; and
- g) be used for the shortest possible time to ensure the safety of the person with disability or others.

The person with disability to whom the behaviour support plan applies must be given opportunities to participate in community activities and develop new skills that have the potential to reduce or eliminate the need for regulated restrictive practices in the future.

The NDIS Commission's expectations about how Review of comprehensive behaviour support plans containing a regulated restrictive practice

Where a behaviour support plan contains a regulated restrictive practice, the plan must be reviewed by an NDIS behaviour support provider or practitioner:

- a) if there is a change in circumstances which requires the plan to be amended as soon as practicable after the change occurs; or
- b) in any event—at least every 12 months while the plan is in force.

The NDIS Commission’s expectations about the format of behaviour support plan containing a regulated restrictive practice

The Commission expects that any behaviour support plan prepared by or on behalf of the provider that contains a regulated restrictive practice must:

- a) be in the form approved by the Commissioner; and
- b) include any information, and be accompanied by any documents, required by the Commissioner.

The Commissioner must approve a form for this purpose.

Behaviour support plan containing a regulated restrictive practice must be lodged with the Commissioner

The NDIS requires that a behaviour support plan for a person with disability that contains a regulated restrictive practice, including a reviewed plan, must be lodged with the Commissioner as soon as practicable after it is developed.

To avoid doubt, a behaviour support plan that contains a regulated restrictive practice must be lodged with the Commissioner, regardless of whether State or Territory authorisation (however described) is required to be obtained, or has been obtained, for the use of the practice in the relevant State or Territory.

BUSINESS CONTINUITY PLANNING

Policy Statement

Business continuity planning is a process where we seek to effectively plan for and respond to potential or actual events and disasters that could put CASSI, our service users and staff at risk.

Objective

The business continuity planning process will enable the CASSI community and others involved in the provision of support to people with a disability to:

- assess our capacity to provide support to our service users and to operate effectively during adverse events and emergencies,
- identify alternate strategies so that CASSI can continue to operate and provide services during adverse events and emergencies.

Strategies and Procedures

CASSI has an additional document, The CASSI Business Continuity Plan (2019) that describes in detail the issues and strategies associated with this policy. As the plan contains a great deal of private and confidential information about the people who use our services, Committee members and the Management Team, it is not generally available. The non-confidential items only will be available in this policy handbook. The Business Continuity Plan is accessible only by the CEO and the Operations Manager; they will decide when the information within the Plan can be made available for the purposes of ensuring the continuity of CASSI's business and operations.

A disaster, as defined in the Disaster Management Act (2003), is a serious disruption in a community, caused by the impact of an event that requires a significant coordinated response help the community recover from the disruption. That can include the following:

- cyclone, earthquake, flood, storm, tide, tornado, tsunami, volcanic eruption or another natural occurrence,

- an explosion or fire, a chemical, fuel or oil spill or a gas leak,
- an infestation, plague or epidemic,
- a failure or significant disruption to essential services or infrastructure
- an attack against the state

An event may be natural or caused by human acts or omissions.

In the case of storms and flooding, the policy and procedure are as follows:

1. The CEO (or a designated delegate) will be responsible to monitor the development of adverse weather situations which could build into the conditions likely to produce storms or floods.
2. There are a number of excellent sources of good quality information available for monitoring such conditions. They are:
 - The local ABC radio stations; www.abc.net.au/northcoast for Northern New South Wales and www.abc.net.au/goldcoast for the SE Queensland information. These stations have a community service function in times of natural disasters to offer a vital communication and information service to the community.
 - The Bureau of Meteorology (BOM) web site at www.bom.gov.au. This organisation will provide active and current information about rainfall, storm warnings and flood information
 - The State Emergency Service (SES) is a service which assists the community to respond to disasters. Their information for Northern New South Wales is www.ses.nsw.gov.au and for information about SE Queensland the relevant site is www.emergency.qld.gov.au/ses. These sites are particularly useful in regard to information about disasters and the services being provided to assist affected people.

When the CEO (or the identified delegate) decides that there is a reasonable risk of a storm or other natural conditions which would impede CASSI's ability to operate safely then the following actions will be taken:

- All non-essential activities will be cancelled.
- The deployment of staff must be done in a safe manner that considers the ability of staff to travel safely to and from CASSI support locations. To that end there will be a need to consider staff rosters, changeover times and the possibility of not being able to leave or arrive at a support location.

- A number of CASSI's service users either live alone or are supported by their family members as well as CASSI staff. Contact will be made with these service users and families to keep them informed of the circumstances and to ascertain if they need additional assistance. They may need advice or support to gain assistance through the SES or other emergency services.
- There are other service users who live in shared support arrangements where more than one person with a disability shares housing and support. In those circumstances' consideration should be given to the option of asking family members to take their relative to the family home during the emergency period. That will be a significant contribution towards CASSI's ability to respond to the difficulties of providing support during such an emergency.
- Senior staff will keep in regular and active contact with each of the support locations during the period of the emergency to gauge how the situation is progressing and whether additional assistance may need to be called upon.

Evacuation of areas affected by flood is possible; and will usually be as directed by the SES. CASSI recognises that the level of impact of an evacuation for many of our service users will be high. Our service will take the initiative in the event of flood in particular.

When an evacuation order is issued for a suburb or township that usually includes a number of elements; the day and time by which the evacuation should be affected, where to go to register who has left the area, the need to rely on our own transport, and the preference for us to arrange our own alternative accommodation.

Given these parameters then each Service Manager is responsible to make the necessary arrangements for each of the service user locations. A current plan of response will be developed by the Service Manager, in consultation with those directly involved, taking the local issues of concern. Each plan will include her, in the event of evacuation, the option for the service user's family to care for the service user in their home or for CASSI to make alternative arrangements.

Web Sites

www.abc.net.au/northcoast

www.abc.net.au/goldcoast

www.bom.gov.au

www.ses.nsw.gov.au

www.emergency.qld.gov.au/ses

CODE OF CONDUCT

Policy Statement

CASSI conducts its business according to the highest standards of honesty, integrity, respect and fairness when dealing with Service Users, staff and anyone involved in the activities of the organisation. We are committed to complying with all applicable Federal and State legislation, standards and regulations, as well as common law obligations.

Plus, with the rollout of the NDIS, that organisation too has a group of expectations around a suitable code of conduct for approved service providers. The NDIS document (copy included in this policy) is thematic and an overview of issues that are required to be included in a Code of Conduct. All involved in the provision of support are expected to comply with the NDIS Code of Conduct.

In addition, CASSI will continue to have our own Code of Conduct as a more detailed approach to these issues and with a greater level of information and direction for staff, contractors and volunteers.

At time of writing, the NDIS as has not developed a guideline for their Code. In the meantime, CASSI will proceed with the dual approach of using both the NDIS and the CASSI documents. We require all staff to demonstrate that each does operate at a high standard.

Objective

All staff are bound by the following set of rules and should ensure that they observe them at all times. Abiding by the Staff Code of Conduct, and the NDIS Code of Conduct, is a condition of employment and any departure from it will be grounds for disciplinary action.

A staff member is defined as any person who agrees to carry out work for CASSI and includes paid staff, contract workers and people who undertake a voluntary role.

Strategies and Procedures

This Code of Conduct describes and highlights several specific areas. However, it should be noted that what would be reasonably expected by the community as a standard of behaviour or practise will apply to areas that are not specifically identified in this policy.

Principles of Practice

Every member of staff, contractor and volunteer will demonstrate a commitment to the philosophies, aims and objectives of CASSI and to work towards the best possible standards of service.

And each person will be familiar with and implement all policies, procedures, and practices of CASSI, as documented in the Quality Management System.

It is very important that each person respect the Service User's Rights and Responsibilities and to ensure that all practices meet with the various Disability Services Standards. And in doing so will project a positive image of CASSI and people with disabilities.

Responsibilities to the Community

It is CASSI's intention to be a good corporate citizen and to contribute positively to the well-being of the community.

The reputation and good name of CASSI is highly valued, and it is important that you do nothing that will jeopardise it.

When dealing with the public you must always display a high degree of honesty.

Responsibilities to Management

You are required to do your job to the best of your ability, and at times you will be required to use your discretion in fulfilling your responsibilities.

You are required to communicate to management any Service User complaints or requirements that may occur during your shift.

Should you not be available for your rostered shift, you are required to attempt to cover the shift. If you cannot then advise management so that alternative arrangements can be made.

It is mandatory to every relevant team meeting and training workshops.

Any damage or injury whatsoever to property, equipment or person caused by staff, Service Users, suppliers, or contractors must be reported to management and an “Incident Report” and/or “Hazard Report Form” completed.

No illicit drugs may be consumed prior to or during shift or brought into service locations or company vehicles. CASSI staff are to not to assist a service user to participate in any illicit drug activity or illegal activity in any way.

Alcohol may be consumed with prior approval from the CEO or authorised person/s. Any person who exhibits behaviour associated with intoxication will be in violation of this Code of Conduct.

Responsibilities of Management

We undertake to make your job interesting and a positive professional experience.

We will make your job as safe as possible.

We will see that your pay and conditions are in accordance with the applicable awards and industrial instruments.

We will promote and reward on performance.

We will provide training to give you the skills and knowledge needed to do your job, and we will provide refresher training to keep your skills and knowledge current.

Service User Service

The success and future of our business, therefore your job, is directly dependent on our Service Users.

They are the reason we are here. They are not an interruption to our business; they are the purpose of it.

Service Users deserve the most courteous and attentive treatment we can give them.

Service Users bring us their needs and wants. It is our duty to fill those needs and wants.

Service Users are not someone to match wits with or argue with.

Service Users should be served/request handled or at least acknowledged as quickly as possible.

Support Location Responsibilities

Each employee is required to display a high degree of responsibility when handling Service User/s belongings and money.

Items for staff's personal consumption may be left at a location. These items are to be clearly marked with the staff's name. Staff are not to consume Service Users' food or drink unless arrangements have been made with the relevant Service Manager.

The telephone is paid for by the Service User/s and CASSI mobile phones are provided at support locations for the use of staff in relation to matters of providing support to the Service User/s.

Security

The industry in which we work has some risk / security issues at times. We need to be aware of these and develop work habits that minimise the risks that be present for the people we support, and for our staff, contractors, and volunteers.

Special attention should be given to the following areas:

Robbery: Do not wait for a crime to occur. Report any suspicious persons immediately to CASSI management or to the police; and it will always be important to record any details in an Incident Report and File Notes.

Doors: The doors to the house and the office and any storage area should be kept secured and/or locked after regular office hours. The main entry should be kept locked for security purposes.

Access: No unauthorised persons are to be admitted to the homes of our service users; including off duty staff.

Personal Belongings: Ensure that all personal belongings are kept securely during working hours.

Motor vehicles: Ensure that CASSI operated vehicles are secure at all times. Notify CASSI Service Managers of any accidents or damage to vehicles.

Safety

It is CASSI's policy that all work practices be carried out in a safe manner and that we comply with all relevant legislation and regulation. CASSI will provide you with a safe system of work and you must carry out your job in accordance with that system.

This approach to safety means that all staff and volunteers are required to be familiar with and implement the CASSI occupational health and safety program. This means that all staff and volunteers will:

Take care of your health and safety and the health and safety of others who may be affected by your work behaviour.

Co-operate with management in its efforts to meet occupational health and safety requirements.

Report and record any work-related injuries, illness, hazards, and risks to your supervisor immediately.

Actively recognise that they have a “duty of care” to Service Users. This means taking steps to avoid foreseeable risks.

Abide by the policy that all support locations and CASSI vehicles are strictly a no smoking area for all staff and volunteers. In each location that CASSI staff provide support, a designated smoking area (in accordance with current community expectations) will be provided subject to the approval of all CASSI service users (and advocates) living at that location. Only one staff member at a time may be in the designated smoking area.

Be familiar with the location and operation of all emergency cut-off switches and fire extinguishers.

Never engage in horseplay or fighting.

Be familiar with and adhere to all manual handling safety requirements.

Follow the correct procedures when handling any corrosive or hazardous materials and equipment. If in doubt, consult with your Service Manager. All cleaning products are to be purchased through FSG Green Shop or from the non-hazardous products list unless alternative arrangements have been made in consultation with management.

Be familiar with the location’s “Emergency Procedure Plan” and to adhere to the designated procedures in an emergency.

Be accountable for your performance in respect of occupational, health and safety.

Confidentiality and Privacy

All staff, contractors and volunteers will abide by CASSI’s policies regarding privacy, dignity, and confidentiality. Each person is expected to actively maintain strict confidentiality in all matters relating to present, past and potential service users, and also staff and volunteers. This applies to written, spoken, and observed information and information stored electronically.

CASSI staff are not to use their own phones or cameras to take photos / videos of service users. If the service user does not have a personal camera or phone and would like photos taken, service user and/or their advocate will need to give their permission for pictures to be taken with a staff camera or phone. These images are then to be transferred to the service user, their advocate or to their office file and not kept on staff personal cameras or phones.

Responsibilities to Other Staff

In order that you have a good working relationship with your fellow employees, it is important that you always consider them.

Punctuality is essential: turn up to your rostered shift in sufficient time to change over at the allotted time.

Make sure that all monies and medications, if applicable, are correct and are included as a part of a properly completed handover at the end and beginning of each shift.

Pass on any messages or other relevant information to other staff that may impact on them.

Use the processes identified in the Quality Management System to record messages and information to both management and other staff.

Harassment

By law, all types of harassment are illegal. Workplace bullying, abuse or harassment of any kind will not be condoned or tolerated in any manner by this company. Those guilty of such behaviour will be subject to the strongest of disciplinary action.

Dress

All people who are undertaking any role for CASSI as a paid staff person, contractor or as a volunteer will be well presented and appropriately dressed for the position and role, including appropriate protective clothing, when required.

Housekeeping

Housekeeping is the responsibility of each employee. All parts of the house / service location should be kept in a high standard of cleanliness. Housekeeping duties, if applicable as per your shift roster / support plan, must be carried out prior to your finishing of the shift. Service locations and workspaces/desks should be left at the end of the shift clean, safe, and tidy.

NDIS Code of Conduct (Workers)

The NDIS Code of Conduct promotes safe and ethical service delivery, by setting out expectations for safe and ethical services and supports for both NDIS providers and workers.

It requires workers and providers delivering NDIS supports to:

- act with respect for individual rights to freedom of expression, self-determination, and decision-making in accordance with relevant laws and conventions
- respect the privacy of people with disability
- provide supports and services in a safe and competent manner with care and skill
- act with integrity, honesty, and transparency
- promptly take steps to raise and act on concerns about matters that might have an impact on the quality and safety of supports provided to people with disability
- take all reasonable steps to prevent and respond to all forms of violence, exploitation, neglect, and abuse
- take all reasonable steps to prevent sexual misconduct.

The NDIS Code of Conduct applies to all workers of:

- registered NDIS providers
- unregistered NDIS providers
- community partners of the NDIA – LAC and ECEI providers
- providers delivering information, linkages, and capacity building activities
- providers delivering Commonwealth Continuity of Support Programme services funded by the Department of Health for people over the age of 65

The NDIS Commission will apply the Code to its employees, in addition to the Australian Public Service Code of Conduct.

Guidance has been developed to help NDIS providers and workers understand their obligations under the NDIS Code of Conduct.

Web Sites

<http://www.fwc.gov.au/> This is the site for the Fair Work Commission; suitable for most industrial issues.

<http://www.humanrights.gov.au/workplace-bullying-violence-harassment-and-bullying-fact-sheet> This is an excellent site for information about harassment and bullying in the workplace.

<http://www.deir.qld.gov.au/workplace/index.htm> This is a QLD site regarding workplace health and safety issues.

www.ndiscommission.gov.au This is a site you can find further information regarding the NDIS Code of Conduct

COMMUNITY ACCESS EXPENSES

Policy Statement

When the people that CASSI supports wish to attend or take part in community activities the person with a disability is responsible to meet his or her own costs of participation; And when a staff person is needed to provide support then CASSI will first look to the person's funding to meet the costs (e.g., wages and expenses), or if that is not available the costs will be met by the person with a disability.

Objective

The objective of this policy is to clarify who is responsible for which costs when a person that CASSI is supporting needs assistance to take part in a community activity. The policy will be consistent with the express position of the funding bodies, that funds are only to be used to meet the costs associated with the provision of support and cannot be used to meet the personal costs of the service user.

Strategies and Procedures

CASSI will assist the service user to plan for such events and will look to achieve a cost-effective way of participating in the activity.

Apart from exploring the use of available funds for the costs of support, CASSI will also look to the use of the Companion Card facility. To this end Service Managers are responsible for ensuring that the service users who wish to, will have access to the Companion Card system.

COMMUNITY BELONGING

Policy Statement

Community is people of all ages and cultures, who share various interests, roles, and commitments. By our contributions and involvement, we are identified, recognised, and have belonging in community. When we are appreciated for our contributions, we feel valued and included.

Objective

A person with high and complex requirements for support, has social needs just like others, as well as disability needs. When the day-to-day focus is meeting disability needs, human needs can be overlooked. A person is more likely to be identified by their disability. This is reinforced by spending time with others who have a disability, or within disability - specific groups.

Strategies and Procedures

When we include human needs in the focus, we discover what is authentic to each person. Through their personal story, significant events, places and people, gifts, and strengths, we discover their interests and what they value. Through knowing a person's values, we discover how those values can be expressed in existing or potential roles.

Connection with others does not always happen naturally. By using a variety of tools and skills with intention, and a thorough step by step process, we plan for success.

It is important to be with and pay close attention to the person, to notice what they enjoy and what they require. We need to notice opportunities in the community and what others of similar age and interests are doing.

All this knowledge goes to inform the planning process.

As roles, skills and needs are continuously changing and evolving, we adapt to the person as this happens.

We encourage and facilitate the people we support to be involved in the community. To be actively involved with others who share their interests, values, and roles.

We aim to provide and adapt the necessary support for:

- establishing, developing, and maintaining meaningful relationships and involvement within the community
- maintaining valued relationships with family members and significant others
- maintaining cultural, linguistic, and religious backgrounds
- having the choice to involve families and others in decision making processes.
- access to regular services and facilities within the community
- access to education, community-based training, and skills acquisition
- access to generic and specialised facilities and services
- access to social, recreational and leisure activities, and membership in local clubs, community centres, fitness centres, sporting teams and travel services
- access to all facets of our service

COMPLAINTS

Policy Statement

CASSI will always endeavour to ensure that each service user, advocate, staff member and volunteer are free to raise, and have resolved, any complaints he or she may have regarding the organisation or one of its services.

Objective

Our organisation ensures that, where required, each service user, advocate and staff member will receive support when making a complaint or dispute. They will also be supported to make a complaint without fear of punishment. Each person making a complaint will be listened to, treated with respect, and have their complaint resolved in a timely manner.

Grievance: A Definition - "A real or imaginary wrong, causing resentment and regarded as grounds for complaint - a feeling of resentment or injustice at having been unfairly treated".

All such matters are treated as confidential, recorded in writing and processed in accordance with a structured procedure.

Strategies and Procedures

The overall aim is to provide an opportunity for full discussion of any complaint and any relevant associated matter; and to provide a means of resolving issues without disruption of the support provided and the work undertaken. During such discussions, either or both parties will be afforded the opportunity of utilising an appropriate advocate.

In the first instance and where that is appropriate, a person with a complaint should approach the person with whom he/she has the grievance and discuss the matter.

If it is not resolved by timely discussion the person will complete a complaint form and refer the matter to the CASSI management team to be addressed.

The Complaint process is overseen by the CEO.

The Quality Manager will receive the complaint form; a letter or email acknowledging the receipt of the form is sent within 48 hours of receiving this complaint.

THE CEO will ensure that the matter is fully investigated and explored by the appropriate member of the management team. The investigation will be conducted in a concise and timely manner.

Where the complaint is about the actions of the CEO then the Operations Manager and the Quality Manager will jointly co-ordinate a suitable investigation and response.

The outcome of the complaint will be provided to the complainant in writing; that will include an outline of any corrective actions to be taken as a result.

All associated documentation will be referred to the next available Quality Review Committee to review the process followed and the outcome achieved.

If the person making the complaint remains dissatisfied with the outcome:

Then he or she may address the matter to the Management Committee for consideration. In these cases, the complaint must be forwarded in writing to the Secretary of the Committee.

The Committee will decide how the matter is to be addressed in an independent manner.

In these cases, the Management Committee will respond directly to the complainant about the outcome of their considerations; that will include any corrective actions being taken as a result.

If the complainant remains dissatisfied with the outcome then he or she is able to further pursue the matter using the complaints procedure of Department of Communities Disability Services Queensland or of the NSW Ombudsman's Office, depending on the state of residence. And the person may also approach the NDIS Quality and Safeguards Commission with the issues of concern.

All NDIS participants have the right to approach the NDIS Quality and Safeguards Commission in relation to a complaint. The website is available below to anyone who may require assistance or information regarding making a complaint. This information is also available within the NDIS service agreements.

Web Sites

<http://www.ombo.nsw.gov.au/> This is the contact site for the NSW Ombudsman

<http://www.communities.qld.gov.au/gateway/about-us/compliments-and-complaints-feedback/complaints> This is the site for unresolved complaints in QLD

<https://www.ndiscommission.gov.au/participants/complaints> This is the link to the NDIS Quality and Safeguards Commission

COMPREHENSIVE HEALTH ASSESSMENT

Policy Statement

CASSI will make available to all service users assistance to access the Medicare funded Comprehensive Health Assessment Program (CHAP). Participation in the CHAP is voluntary.

Objective

The use of the CHAP can be a great advantage to CASSI's service users in that it provides a comprehensive review and overview of the person's health.

Strategies and Procedures

All service user's being assisted by CASSI's accommodation support services will be offered assistance to undertake a Comprehensive Health Assessment Program (CHAP); the outcomes and information can inform the development of the person's Individual Program Plan.

The CHAP is developed collaboratively with the service user / advocate, LSA's with the GP to identify and manage each service user's individual health needs.

If the service user does not have the capacity to give or withhold consent, then formal consent must be obtained from the person responsible or guardian. Written consent is required from the person responsible prior to a service user receiving medical or dental treatment.

Staff attending medical and allied health services appointments with service users must record all information pertaining to the appointment on the Medical & Allied Health Form.

Staff attending appointments must inform advocate of any outcomes or treatments if they do not attend appointments themselves.

CONFLICT IN THE WORKPLACE

Policy Statement

It is always CASSI's objective to establish and maintain an environment for effective service provision. Because of the uniqueness of individuals, their background, values and areas of knowledge and expertise, there may be times when differences of opinion impinge on the effective provision of service delivery. It is our intention to facilitate the resolution of these differences in the workplace.

Objective

To establish and maintain a positive and effective workplace environment in which conflict is minimized and resolved where it occurs.

Strategies and Procedures

At CASSI we actively encourage a staff person who has a difficulty with another staff person to "Go Direct" and address the problem in a confident, collaborative and assertive manner. In the first instance, the staff person involved should "Go Direct" and discuss the matter with the other person involved; and importantly minimizing the size of the issue by only engaging with people who are directly involved.

If the matter is not resolved, the staff member raising the issue should approach the Service Manager or the Operations Manager to further facilitate the resolution of the matter.

If, at this meeting, no agreed resolution is found to the situation, the Operations Manager may decide on an alternative placement of staff so effective support of service users is maintained. In regard to alternate work, it should be noted that no staff member can be guaranteed work of the same hours should a resolution not be reached.

At all times, the needs of the service user must be paramount. The needs of a service user will be given pre-eminence in seeking alternate workplace locations as a result of a conflict between staff.

CONTINUOUS IMPROVEMENT

Policy Statement

All staff members will endeavor to constantly seek to improve all operations with the aim of improving quality and scope of the support we offer to the people who use our services.

Objective

The net effect of continuously improving our services is to improve the quality of our practice and the level of satisfaction that people with a disability have in using our services.

Strategies and Procedures

CASSI will work at achieving a culture and a practice of continuous improvement in a number of ways. These will include:

Regular analysis of management data.

Reviewing current procedures to refine processes and increase efficiency.

Obtain, analyse and act upon service user and staff recommendations and requests as is appropriate.

Encouraging the professional development of staff and volunteers in order to improve both individual and collective (team) skills.

Regular communication with government departments, service users and other disability support agencies.

Conducting independent service user satisfaction reviews every year. The survey may take the form of a postal questionnaire and or interview by the quality manager. The survey aims to involve all current service users/advocates, whose participation is voluntary.

COUNSELLING FOR STAFF

Policy Statement

There may be times when staff at CASSI experience emotional or psychological difficulties that will have a detrimental effect on their ability to perform their job roles; and CASSI recognizes that those issues may be resolved for the staff person through professional counselling.

Objective

All staff are responsible to recognize and identify when they are experiencing such difficulties. There may also be sometimes when the Service Manager for that person will identify that there is a problem that needs to be addressed and resolved. Addressing the matter will have the dual benefit of helping the staff person into a better frame of health and wellbeing; and it will also assist CASSI to offer more consistent care and support to our service users.

To that end CASSI will offer some limited financial assistance to the staff person to gain access to a professional counsellor, of their choice. It should be noted that CASSI does not have staff engaged as counsellors and so should not offer counselling advice or support.

Strategies and Procedures

Once it is recognised and acknowledged that a staff person does have such a difficulty the Service Manager for that person will be available to guide the staff person through the following process if that is requested. The procedure is as follows:

First there would need to be an agreement as to whether or not the staff person wishes to have their Service Manager assisting.

And it also essential to establish whether the staff person wishes to participate in the financial support program that CASSI offers for this purpose.

If assistance is requested, then the Service Manager will advise the staff person that there is a Medicare funded program available for psychological counselling. Access to that program is done through the staff person's own GP.

The Medicare program will offer financial costs for a limited number of counselling sessions over a period of time.

The staff person and the GP should consider the counsellors who are available, and it is they who should negotiate the referral. At no time will a CASSI employee be able to suggest a counsellor for the staff person. That choice must always remain as a private matter between the staff person and their GP.

Prior to the commencement of counselling, if CASSI is to be involved in offering financial assistance as is described in this policy, the staff person must advise their Service Manager of the planned counselling.

If there is a shortfall between the financial programs that Medicare will offer and the actual cost of the counselling CASSI will offer limited additional support, as follows. CASSI will provide a shortfall payment of up to \$100 for each session, for up to three counselling sessions only. Any counselling beyond that will not be subject to CASSI's assistance.

The payments process will only be by invoice from the counsellor to CASSI which identifies the total cost of each session, the amount that is being funded by Medicare and the total value of the shortfall.

It should be noted that this policy is not applicable for a staff person who is undertaking psychological counselling as a part of a Work Cover arrangement. That will be driven by the procedures and policies that are in place for Work Cover.

Web sites for more information

Medicare

<http://www.humanservices.gov.au/customer/dhs/medicare>

Lifeline

<http://www.lifeline.org.au/>

Beyond Blue

<http://www.beyondblue.org.au/>

CRIMINAL HISTORY SCREENING

Policy Statement

CASSI will always seek to only employ staff who do not have a criminal history that would make our service users vulnerable to such things as abuse, exploitation and neglect.

Objective

CASSI will always seek to comprehensively follow any available and formal processes to identify any staff or potential staff who would pose a risk to our service users. This includes the use of mandatory criminal history screening.

Strategies and Procedures

It is unlawful for a person to work at CASSI without undergoing a criminal history check and being issued with a positive notice and Yellow Card.

Currently all staff will be required to hold the appropriate cards as a clearance from the Criminal History prior to commencing duties.

Volunteers must await the outcome of their screening application (that is, a positive notice and Yellow Card must have been issued) prior to commencing duties within CASSI.

All CASSI employees and volunteers must undergo criminal history screening every 3 years.

A monitoring system with Queensland Police is in place whereby the department is notified if a Yellow Card holder is charged with an offence during the screening period. A cardholder charged with a serious offence of a sexual nature will have their Yellow Card suspended. Other cardholders with a change in criminal history undergo a reassessment process.

Criminal history screening is not required for service users or their advocates, tradespeople who are not employees, relatives of a consumer providing volunteer care for their relative and people engaged only to work outside of the hours that disability services are provided.

CASSI is responsible to not engage a paid employee or volunteer/student until they have been approved and issued with a positive notice and yellow card.

At the sign-up process to be an employee at CASSI, an application for criminal history screening must be completed before a person starts work at CASSI and they are not able to commence working until they have been issued with a positive notice and yellow card. For volunteers, a positive notice and Yellow Card must be issued before they can commence duties in the service outlet. CASSI must apply for a criminal history check on behalf of each engaged person. The service provider is also responsible for seeking the person's consent to conduct criminal history screening.

It is CASSI's responsibility to apply for a prescribed notice and obtain a person's consent for criminal history screening for each engaged person.

Criminal history screening will be conducted every 3 years for each person who continues to work at CASSI.

CASSI will submit application, either by mail or electronically. Applications must be on the approved forms and signed by the service provider and the engaged person.

The application will be forwarded to the Queensland Police Service for a national check of the person's criminal history.

The information will be used to determine whether or not a person should be engaged by CASSI. A decision to issue either a positive or negative notice will be made by the Director-General of the department.

A positive notice means that the prospective employee can be employed by CASSI.

A positive notice remains current for three years from the date of issue unless it is suspended or cancelled earlier due to a change in criminal history. CASSI will can apply to renew their positive notice and Yellow Card up to 3 months before its expiry date.

A negative notice will be referred to the CEO as CASSI cannot employ a person who holds a current negative notice.

Service providers can engage a paid employee once an application has been submitted. However, if a negative notice is issued, this will have an impact on the person's continued employment with CASSI.

CULTURAL AND LINGUISTIC DIVERSITY

Policy Statement

CASSI recognises that we work and live in a community which is culturally and linguistically diverse, CASSI supports, respects, and values the diversity of staff and service users.

Objective

CASSI will establish and maintain procedures and policies which are consistent with our recognition of our community's diversity.

Strategies and Procedures

To achieve this policy CASSI will continually develop and adapt a culture which integrates the following areas into policies and procedures:

Encourage and develop an understanding and informed respect for diversity among service users, staff and volunteers.

Ensure that all written and spoken language is free from stereotyping or bias.

Attract and retain people from equal employment opportunity target groups, youth and mature age workers and others who together will make up a diverse workforce.

Ensure that managers, coordinators, and staff attend programs to enhance sensitivity and communication in relation to the employment of staff from diverse backgrounds.

Ensure that relations are respectful of diversity and free of behaviour of a racist, sexist, or otherwise prejudicial or demeaning type.

Make reasonable provisions for the cultural and religious needs of service users, staff, and volunteers.

Web sites

<https://www.humanrights.gov.au/> This is the Australian Human Rights Commission.

<https://www.adcq.qld.gov.au/> This is the Anti-Discrimination Commission QLD

<http://www.nswccl.org.au/index.php> This is the NSW Council for Civil Liberties

DEATH OF A SERVICE USER

Policy Statement

The death of a service user will be responded to with dignity, promptness and sensitivity.

Objective

CASSI's procedures and approach at such times will be consistent with our culture in the way that we support people with a disability and their family.

Strategies and Procedures

In the event of the death of a service user, the attending staff member will immediately contact the service user's treating doctor, contact the CEO and as appropriate call for an ambulance and if necessary, the police.

The CEO will then contact next of kin / family members and other relevant people.

The CEO will also advise the relevant funding agency and follow their procedural requests. All notifications will be documented including date, time and person/s notified.

If the service user is living with family, the attending staff may assist the family with the arrangements if requested by the family.

The service manager or staff will inform the CEO of any perceived need for grief counseling.

When the death of a service user is anticipated staff will assist in the implementation of the Palliative Care Plan

The CEO will notify the President of the Management Committee of the death as soon as practicably possible (and within 24 hours of the death).

The CEO will provide the Management Committee with a written report on the circumstances surrounding the person's death, at their next meeting.

After the death of a service user there also be a number of matters for possible action and follow up. These actions can include such issues as:

The CEO will provide / arrange the necessary support for other service users and staff. This may include debriefing and ongoing support, if appropriate.

The CEO will offer support and assistance to the family of the deceased. This may include assistance with funeral arrangements, finalising the person's affairs and the provision of information about other services that provide bereavement care.

It is the responsibility of the deceased executors to meet the cost of the funeral. Often the names of the executors might not be known until after the funeral. In those cases, the responsibility usually falls on the deceased person's family. The person ordering the funeral is legally responsible for the cost in the first instance but may be entitled to reimbursement out of the estate.

Where the deceased has no family or the family is not able to meet the cost of the funeral, the matter is to be referred to the police, who are responsible for organizing assistance through the state Department of Health (for destitute burial). In a situation such as this the CEO will consider requesting that the Committee meet the cost of a reasonable funeral.

Where there was a guardianship order that relates to the deceased, the CEO will liaise with the Guardianship authorities to arrange the funeral. Family members will be offered the opportunity to be involved in the arrangements.

If the funeral is to be held locally the CEO or nominated Committee or staff member will attend the funeral and provide support to other staff who would like to attend the funeral.

The CEO will assist with the finalisation of the deceased person's affairs. This will include providing documentation of the deceased person's property and its return to or collection by the executor or the administrator of the estate.

Certain incidents that happen, in connection with the provision of supports or services by registered NDIS providers are known as reportable incidents. These incidents include the death of a person with disability. CASSI's CEO will also arrange to meet the NDIS Quality and Safeguards Commission requirements in the event of the death of a person being supported by CASSI.

DECISION MAKING AND CHOICE

Policy Statement

CASSI will consistently offer service users the opportunity and appropriate support to enable them to participate as fully as possible in making decisions about the service they receive.

Objective

The result of direct inclusion of service users in decision making and choice is to respond meaningfully to the expressed needs and aspirations of each person that we support.

Strategies and Procedures

Service users will always be actively encouraged to be directly involved in the decisions and choices that will affect the support and assistance that CASSI offers. A service user is also welcomed to include an advocate to assist in the making of decisions and choices about the services they receive.

The support we provide is appropriate to each person's needs and wishes, age, sex, cultural and religious background. Each service user has the right to either consent to or refuse a service.

At all times we respect the importance of the individual's right to make informed choices, take calculated risks and to learn from experience.

Our support structure ensures that reasonable care is taken to avoid foreseeable risks without limiting the individual's freedom of choice.

DISCRIMINATION IN THE WORKPLACE

Policy Statement

CASSI will always treat all staff and volunteers on their merits, without regard to race, age, gender, marital status or any other factor not applicable to the position.

Objective

When staff and volunteers are able to work in an environment that is free from discrimination and harassment, they will feel respected and it will be a work environment that will be based on equality and justice values.

Strategies and Procedures

Discrimination can include a very broad range of actions or behaviours; these can include such items as:

- Offensive jokes or comments about another worker's racial or ethnic background, gender, sexual preference, age, disability or physical appearance
- Display of pictures or posters which are offensive or derogatory
- Expressing negative stereotypes of particular groups
- Judging someone on their political or religious beliefs
- Using stereotypes or assumptions to guide decision-making about a person's career
- Undermining a person's authority or work performance because of their personal characteristics.

Where a staff member or a volunteer feels they are being discriminated against on the grounds of:

- Gender
- Marital Status
- Pregnancy
- Parental Status
- Age
- Gender

- Sexual Orientation
- Race
- Culture
- Impairment
- Religious Beliefs
- Political Beliefs
- Trade Union Membership

He / she should address the issue by following CASSI's Complaints Procedure. If the complaint involves the CEO the staff member or volunteer may contact the secretary to the management committee in writing.

No staff member or volunteer will be disadvantaged in their employment conditions or opportunities as a result of lodging a complaint.

Complaints must be lodged in writing.

Disciplinary action will be taken against anyone who discriminates against a co-worker or a volunteer. Discipline may involve a warning, formal counseling, demotion or dismissal, depending on the circumstances.

Websites

<https://www.humanrights.gov.au/our-work/legal/legislation> This is the website for the Human Rights Commission

<http://www.business.qld.gov.au/business/employing/employee-rights-awards-entitlements/anti-discrimination-eeo> This is an useful site regarding discrimination and equal opportunity in QLD

http://www.lawlink.nsw.gov.au/Lawlink/Corporate/ll_corporate.nsf/pages/attorney_generals_department_equal_employment_opportunity Information regarding the NSW equal opportunity and discrimination circumstances

DISCIPLINARY ACTION

Policy Statement

Disciplinary action is designed to resolve any situation where procedures are applied incorrectly, or when the actions or conduct of a staff member and is not conducive to the provision of disability support at a high quality and standard.

Objective

The clear objective of this policy is to have a service which is operated by staff who work positively to provide the best support service possible to the people who use our services. It is also the objective of this policy to use strategies and procedures which are structured to be fair to both the employee and the employer.

Strategies and Procedures

Our procedures in regard to these matters will always be consistent with those described in the relevant award and the National Employment Standards.

In all cases two Service Managers will be jointly responsible for an impartial and effective enquiry into the circumstance in question. Such an enquiry will be conducted without a notion of a foregone conclusion; but rather it will be undertaken in a thorough and detailed manner.

Where there have been very serious allegations then the matter will be the responsibility of the CEO or the Operations Manager in conjunction with a Service Manager. In a limited number of circumstances there may be grounds for summary dismissal of the employee. In most other serious cases the staff person involved may need to be stood down on pay during the period of investigation.

CASSI will always seek expert advice where the response to the circumstances is complex and in need of an external opinion. That expert advice will be from an employer association and / or from an independent consultant.

If, after a detailed investigation into the matter, it is concluded that the staff person involved will need to have formal counselling about work performance the following principles will be applied. The staff person will always be offered a reasonable opportunity

invite and arrange for a support person to attend counselling meetings, the outcome of the meeting will be provided to the staff person in writing, a copy of the outcome will be retained on the staff person's personnel file and the outcome will always include a clear summary of the areas of work performance that need to be improved.

Websites

<https://www.fwc.gov.au/> This is the website for the Fair Work Commission; where all awards are included.

<http://www.fairwork.gov.au/employment/national-employment-standards/pages/default.aspx>
This is the site to access the national employment standards.

DOCUMENT, DATA AND RECORD CONTROL

Policy Statement

In order that CASSI is able to offer a service and support approach which is consistently provided, and which uses the efficiencies to be gained from a Quality Management System we will also use a systematic approach to the control of documents, data and records.

Objective

The clear objective of maintaining this approach to the control of documents, data and records is to augment our service's consistency, efficiency and effectiveness.

Strategies and Procedures

Approval, Control and Review of Documents and Forms

All forms and documents relating to our Quality Management System, which are designed or written by the organisation, will be first approved by the Quality Review Committee prior to issue; their distribution will be subject to the control of the Quality Review Committee; and likewise, each of the documents and forms will be reviewed, from time to time, by the Quality Review Committee.

Documents Controlled for Content & Distribution

The content of all documents that are essential for organisational operations will be controlled.

Documents that are restricted in issue to individuals will be recorded in the Document Register. Examples of these documents are:

- External Policies
- Individual Quality Procedures
- Delegations and Authorities document
- Position Descriptions

- Risk Management plan
- Operations plan
- Strategic plan
- Business Continuity Plan
- Business Plan

These controlled documents may be accessed at the CASSI office by staff and other people as are approved by the CEO; however, they will not be copied or removed from the organisation without prior approval of the CEO. Copies of some of these documents may be accessed at other service locations as approved by the CEO.

All suggested new policies or amendments to existing policies, will be recorded and actioned on a Service Improvement Form.

The Quality Manager will ensure CASSI documents carry an issue status and the Quality Manager and or Service Manager will personally issue all approved documents and will recover all superseded, restricted or obsolete documents, thereby ensuring that only pertinent issues are available for use.

Documents Controlled for Content Only

Documents that are controlled for their content only can be distributed to individuals and organisations.

Examples of these documents are:

- CASSI Policies;
- Information and marketing brochures;
- Service user handbooks and information packs.

The CEO in conjunction with the Quality Manager will monitor the content of these documents.

Amending Quality Procedures

Amendments to quality procedures will require a re-issue of all amended pages of the relevant procedure.

Prior to approval, the Quality Review Committee members will review the amendment/s.

Raising, Amending and Review of Internal Documents and Forms

The Quality Manager will ensure the original authorised copies of all internal documents and forms used in this quality system are numbered and carry a revision status.

Staff, service users, volunteers or members requesting new, or amendments to, existing forms, will raise a Service Improvement Form which will be submitted together with a draft proposal to the Quality Review Committee through the Quality Manager.

The Quality Review Committee will review the final draft prior to issue.

The Quality Manager will retain a copy of the superseded and revised form on the server.

Amending External Documents and Forms

External documents and forms that are controlled in content and issue e.g., CHAP, Quality Standards, Disability Service Standards and the WH&S Act will be retrieved from the internet when revisions or updates are made, when required.

The Quality Manager will be responsible for remaining in contact with the originators of external documents and ensuring that all amendments are available; this especially through the relevant web sites.

Retention of Obsolete Documents & Forms

A copy of obsolete documents and forms which are held in hard copy format, are to be retained for legal or knowledge preservation purposes, will be stamped "Superseded" or archived on the server, by the Quality Manager.

Obsolete documents and forms will not be used for operational purposes and will be retained by the Quality Manager.

Organisation Reference Documents

General reference documents and publications that are not essential for day-to-day operations, will be retained in the CASSI office and will not be subject to document control procedure.

Quality System Records - General

All staff will ensure that handwritten and other forms of records are legible. When a Service User is registered with the service, the Service Manager or designate will raise a file that clearly details the Service User's name and personal information.

The Service User's file will be used for the safe storage of quality personal information. Forms that are completed for each Service User (quality records) will be stored in a secure location as approved by the CEO.

All non-service user specific records will be maintained within an appropriate protective folder that identifies the subject title.

Quality Records Register

The following quality record details will be recorded by the quality manager in the forms register:

- Form Title and Number
- Revision Number
- The retention period of records
- The physical location of the records
- Position (person) responsible for maintaining records

Quality System Records - Computer Based

Computer records will be maintained within the relevant files that will be stored digitally.

The person entering the data on the computer will ensure that all data entered is saved at the completion of the data entry process, regardless of the automatic saving parameters that are programmed into the system software.

Administration staff will manage and maintain a daily data backup system which includes data to be stored securely, off site.

Retention

Specific retention periods for each form (quality records) will be detailed on the forms register by the Quality Manager.

Document and Data Security & Access

Staff members will adhere to the requirements of the Australian Privacy Principles, with special reference to the amendments which have taken effect in March 2014.

Destruction of Data & Records

Staff will ensure that all drafts or obsolete quality records that detail personal information are destroyed by shredding.

Photocopies of obsolete quality records will be destroyed immediately and will not be stock piled.

Service User, Staff or Volunteer Access to Records

Service users and staff will have access to their own records. The CEO or designate will approve and control the manner in which service users and staff access their own records to ensure that the security of other non-related records is maintained.

Staff members will not release any service user record without receiving an Authority to Release Information Form from the person or organisation requesting the information.

Staff members will ensure that the Authority to Release Information is authorised by the service user or their legal advocate's signature.

DRESS CODE

Policy Statement

All staff and volunteers are expected to dress appropriately for their roles and responsibilities.

Objective

The way that staff and volunteers are dressed for their roles and responsibilities is indicative of a number of issues; these include safety issues, presentation of a positive image to the community, considering any relevant support issues for the service User that they will be supporting.

Strategies and Procedures

Footwear

In order to prevent accidents, staff working in a service user's home are required to wear footwear with covered in toes, strong heel support and non-slip sole.

Suitable footwear includes sneakers and slip-on shoes with adequate cover of the instep. Footwear that is not acceptable includes slip on backless scuffs, shoes with no toe coverage, high heeled shoes and slippers.

If staff are in doubt about the suitability of footwear, they should discuss the matter with their Service Manager or the Safety Advisor.

General dressing

Staff will ensure that they are well presented and suitably attired for required activities. Other items of dress should be appropriate for the occasion. The wearing of chains and dangling jewelry may constitute a hazard both to the service user and to the staff member. Staff should be aware of what is suitable for their particular location.

DRUGS and ALCOHOL

Policy Statement

CASSI have adopted a Drug and Alcohol Policy which ensures the safety and well-being of the people we support, our colleagues and our workplaces.

Objective

It is CASSI's policy that staff, volunteers, subcontractors and management have a clear and shared responsibility to ensure that all locations where CASSI provides support are environments which are safe.

It is within this context that this policy seeks to address the impact of drugs and alcohol. CASSI recognizes that drugs (legal and illegal) and alcohol may have a negative impact on our capacity to operate safely and with the well-being of all involved taken into consideration.

To that end this policy will outline our strategic responses which will include

- community standards in respect of drugs and alcohol
- the principle of active and shared responsibility
- assistance where appropriate
- resources available in the general community to respond to misuse of drugs and alcohol
- drug and alcohol testing
- when and how should such testing take place
- rehabilitation
- respectful use of privacy and confidentiality
- disciplinary actions

Strategies and Procedures

Community standards in respect of drugs and alcohol

The general community has established clear processes and associated information in regard to drugs and alcohol. Legal drugs (prescribed and “over the counter”) are made available along with written information about any possible negative impacts of those

drugs. In addition, where medication is prescribed there is also the treating doctor who is available to provide advice about the possible negative impacts of that medication.

Likewise, alcohol (on its labelling and packaging) also includes information about its responsible consumption. In addition, there is also community mandated acceptable norms about the levels of alcohol in a person's blood. That is, the level of alcohol (of varying strengths) which can be consumed over a certain period of time and not impede capacity to work.

CASSI endorses those community standards.

It is the responsibility of each employee to be aware of the available information and to take that into consideration about the possible impacts on safety and well-being in the workplace.

The principle of active and shared responsibility

While CASSI operates within a management structure linking roles and responsibilities, in the area of drugs and alcohol every employee is expected to accept an approach of active shared responsibility.

That is, we all have a role to play if we observe a colleague who is in the workplace and who is possibly negatively affected by drugs or alcohol. In the first instance a direct approach to the person involved is likely to be the most appropriate; plus, it is imperative that the service manager is advised immediately.

The service manager will liaise with the Operations Manager or CEO without delay; that person will decide on the most appropriate response and directly oversee its implementation.

Assistance where appropriate

CASSI has an approach to the well-being of all people who are a part of the CASSI community that is sympathetic to the individual needs of each person. So, in the area of drugs and alcohol CASSI is willing to take on a positive leadership role by providing information about appropriate support and services in the community. Participation in such support is a positive step towards self-responsibility.

Resources available in the general community to respond to excess use of drugs and alcohol

The Gold Coast and Nth NSW each have a number of support services for people who have problematic issues with drugs or alcohol. The most current contact details are available through an internet search of the Departments of Health in each area.

Drug and alcohol testing

CASSI recognizes that there are few main causes for undertaking drug and alcohol testing. These include causes which are known as “Reasonable Grounds”, also there are circumstances following an accident/incident “post incident” and the other will be a part of a random testing regime.

Testing would always be carried out by an independent and accredited company which is operating in accordance with the applicable Australian Standard.

CASSI will from time to time engage the services of an independent accredited company to undertake random testing; this will be of a limited number of employees of any classification. Random testing will be provided by an initial screening test by mouth swab to detect traces of drugs, and by BAC breath device to detect alcohol levels. If either of these tests show as a non-negative, then a further confirmation test will be required.

In the case of “Reasonable Grounds” where CASSI has noted and observed a number of indicators in regard to a specific employee’s behaviour, work practices, health patterns and social factors which could indicate the presence of drugs or alcohol CASSI will engage an independent accredited company to undertake testing by way of a urine specimen (in accordance with Australian Standard 4308: 2008). If this test shows as non-negative, then a further confirmation test will be required.

The same process detailed for Reasonable Grounds will be applied in relation to Post Incident testing. When an employee is involved in an incident such as a motor vehicle accident CASSI will request the employee to undertake testing by way of a urine specimen (in accordance with Australian Standard 4308: 2008). If this test shows as non-negative, then a further confirmation test will be required.

If an employee refuses to engage in Reasonable grounds, Random and or Post Incident testing this may lead to instant dismissal.

When and how such testing would take place

CASSI staff most often are working in the private homes of people with a disability; in respect of their privacy and dignity a more suitable location for testing to take place would be nominated by management.

CASSI will use a company for testing which has a properly set up mobile testing unit; and the testing would be undertaken in a way which is consistent with the Australian Standards.

Rehabilitation

If it is identified that a staff person or a volunteer has a problematic issue with drugs or alcohol, then positive access to support services and programs would be supported and

recommended. There are a number of suitable services and supports in Nth NSW and on the Gold Coast.

During such treatment, the employee would be stood down and unable to return to employment until there has been a suitable number of negative tests provided. This follow up testing regime is also conducted in accordance with the applicable Australian Standard.

Failure to take part or complete a rehabilitation program may result in disciplinary action up to and including dismissal.

Respectful use of privacy and confidentiality

Personal and private information will always be respected, and confidentiality maintained. Disclosure of information will only be provided to the appropriate member of the management team, and in so far as it directly relates to the employment status of the person being tested.

Discipline and performance counselling

Where it is deemed to be appropriate CASSI will use the policy that relates to the use of Disciplinary Action. The decision to act will be based on the severity and the degree of impact of the behaviour in question.

If an employee refuses to engage in Reasonable Grounds, Random and or Post Incident testing this may lead to instant dismissal.

Web Sites for more information

The QLD Department of Health web site includes a great deal of information that relates to this issue, along with links to support services on the Gold Coast.

<https://www.health.qld.gov.au/>

The NSW Department of Health also has a comprehensive range of information and links for services in Nth NSW.

<http://www.health.nsw.gov.au/>

DUTY OF CARE / DIGNITY OF RISK

Policy Statement

CASSI believes that all people have the right to take risks in order to seek experiences and opportunities. It is through the experience of risk that independence of thought and spirit can be demonstrated. CASSI will also need to be aware of the duty of care responsibilities that we have as a service provider to ensure the health and well-being of each person we support.

Objective

In this context, our objective as a service is to aim to strike a balance between those two (at times) conflicting principles of risk and care. This is so that we can meet our objective of maximising the independence and self-determination of each person we support while at the same time meeting our requirement to exercise a proper level of care.

Strategies and Procedures

At a formal level, these two principles will be described and captured for each person we support in the context of the planning and decision-making procedures of CASSI.

At an informal level it will be expressed in the ways that each person who uses our service is able to explore new ventures and experiences while at the same time being able to live in a safe environment which respects the care needs of each person.

CASSI will particularly need to be aware of each of these themes when discussing our support approaches with a service user's advocate; and to ensure that the themes of risk and care are held in balance and that neither consistently outweighs the other.

EPILEPSY

Policy Statement

CASSI will seek to be fully informed and advised about the current health issues for each service user, including the presence and incidence of epilepsy.

Objective

CASSI will seek to use the health information that we receive about each person we support to create a positive and responsive care and support environment. Importantly our support strategies, in these circumstances will be influenced by the advice of the current medical practitioner. And equally importantly this is a situation where the balance between the dignity of risk and the service's duty of care is apparent.

Strategies and Procedures

The definitions and diagnoses that are applicable here are largely guided by the direct advice of the medical practitioner. The medical practitioner will consider such issues as the causes of the seizures, the type of seizures, period of time since the last seizure and the effectiveness of medication and other support strategies.

CASSI will ensure all service user`s with epilepsy have a current epilepsy management plan.

Consideration of environmental risks to service users who experience seizures will also be investigated.

Ensure that all service users with ongoing seizures are to be directly supervised when bathing, showering and swimming (where that risk identified in epilepsy management plan).

All involved staff will be trained in the appropriate response to seizures; in the context of the required first aid training and also in respect of the specifics in the relevant management plan.

EXIT THE SERVICE

Policy Statement

There may be times when a service user wishes to not be supported by CASSI; and the service recognizes and respects that circumstance.

There may be other times when it is CASSI wishes to no longer support a service user.

Objective

The aim of this policy is to establish procedural fairness around decisions such as these. And to ensure that while such times can be challenging however CASSI staff will always act with professionalism and respectfully.

Strategies and Procedures

Service users may advise they do not require further support due to a change in personal circumstances e.g., change in medical condition, relocation or change in personal needs. In such cases and where the person's support is funded by government, then the relevant funding body must be directly involved in the procedures around the change in service provider.

The CEO will work actively and positively with the funding body to assist the service user to achieve the change in service provider; this process is also well defined within the guidelines of the NDIS, the Department of Health, the Department of Veteran Affairs and the QLD Department of Communities.

If, due to the service user's or advocate's actions, circumstances arise that significantly affect CASSI's ability to provide a meaningful service, the CEO may decide to cease support to that service user. Such a decision must always include discussion with the relevant Government funding body. The CEO will advise the service user of the decision and reasons for the decision, in writing and will record all details, relating to the matter, in file notes which will be retained in the service user's file.

CASSI will endeavour to ensure each service user exiting the service is provided with relevant advice and support, referral to other services and information about re-entering our service at a later date.

FAMILY RELATIONSHIPS

Policy Statement

Many of our service users will hold family as something that is valued highly; CASSI will respect those values and will support our service users in a way that will enable family connections to be maintained and enhanced.

Objective

Our policy aims to ensure that service users are encouraged to maintain family relationships and involve family members and significant others in their lives, where that is something that the service user values.

Strategies and Procedures

CASSI will endeavour to ensure each supported person receives a service that recognises the importance of preserving family relationships and informal social networks; and which is sensitive to the individual's cultural, religious, and linguistic environments.

The maintenance of each supported person's family and social relationships is consistently reviewed in the context of CASSI's planning documents and procedures.

FINANCIAL MANAGEMENT

Policy Statement

CASSI will manage its financial resources in a detailed and systematic manner which meets the applicable compliance regimes.

Objective

The aim of this policy is to be able to manage the support services that CASSI operates in an efficient and effective manner, including the financial sustainability of each program.

Strategies and Procedures

The CEO is responsible for the operations of an efficient and effective financial management system.

The CEO will report directly to the Committee of Management about the financial circumstances of the organisation.

The financial reporting and management systems will include annual budgets, year to date progress reports, delegations and authorities document, audited end of year financial statements and any other reports reasonably requested by the Committee.

The audited financial report for the full financial year will be tabled at CASSI's Annual General Meeting and any appropriate action will be undertaken, as directed by the Management Committee.

FIRST AID

Policy Statement

All staff at CASSI with a direct support responsibility will hold a current senior First Aid qualification.

Objective

The aim of this policy is to ensure that if staff who are providing support are in a situation where they will need to apply first aid, they will be suitably trained and qualified to do that.

Strategies and Procedures

It is a condition of employment that all Lifestyle Assistants, House Co-ordinators and Managers hold a current senior first aid certificate.

It is each staff member's responsibility to keep this qualification updated by attending an annual CPR refresher course and the senior first aid refresher every 3 years.

The administration staff will issue reminders to staff when certificates have expired. It should also be noted that many of the certifying / training institutions also provide a reminder when the training is due.

For Lifestyle Assistants and House Co-coordinators CASSI will reimburse the cost of the training only (not for the time of attendance at the training). Managers will be able to use paid hours to attend this training. To assist in this requirement CASSI holds an account with St John's First Aid Trainers.

CASSI must be provided with the original updated certificate to be retained in the staff training records.

CASSI will not reimburse staff for certificates obtained after the CPR / First Aid has expired. Staff who fail to renew the certification prior to expiry will not be rostered on shifts until they complete the senior first aid course.

HEALTH MANAGEMENT PLANS

Policy Statement

CASSI will seek to be fully informed and advised about the current health issues for each service user, including but not limited to presence and incidence of epilepsy, asthma, diabetes, PEG care.

Objective

CASSI will seek to use the health information that we receive about each person we support to create a positive and responsive care and support environment. Importantly our support strategies, in these circumstances will be influenced by the advice of the current medical practitioner. And equally importantly this is a situation where the balance between the dignity of risk and the service's duty of care is apparent.

Strategies and Procedures

The definitions and diagnoses that are applicable here are largely guided by the direct advice of the medical practitioner. The medical practitioner will consider such support strategies and health medical plans.

CASSI will ensure all service user`s will have health management plans to ensure quality of care.

All involved staff will be trained in the appropriate response to ensure the health and wellbeing of the service users we support; in the context of the required first aid training, appropriate hygiene and also in respect of the specifics in the relevant health management plan.

Training needs to be performed by a qualified health practitioner, the training will be delivered in accordance with the NDIS High Intensity Support Skills Descriptors and health management plans.

Each participant is involved in the assessment, development and management of plans. Service users' health status is subject to regular and timely review by an appropriately qualified health practitioner. The plan will identify how risks, incidents and emergencies will be managed, including required actions and escalation to ensure service user wellbeing.

In relation to service users who require high intensity support plans including but not limited to epilepsy, asthma, diabetes and PEG care, CASSI will ensure that there are appropriate policies and procedures are in place, including a training plan for staff, that relate to the support provided to each participant to support their needs and maintain their health and well-being.

All staff working with a service user who require high intensity support will be provided training, relating specifically to each service users' needs, type and regime, and high intensity support skills descriptor for care. This training will be delivered by an appropriately qualified health practitioner or person that meets the high intensity support skills descriptor.

INCIDENTS

Policy Statement

All incidents will be reported and investigated in a timely manner; and the outcomes of the reports and reviews will inform any relevant service improvements.

Objective

This policy is intended to capture and record all issues which are defined as incidents with the intention of ensuring that the optimal support can be provided and to also identify any opportunities to improve the operations of the service.

Strategies and Procedures

An incident of critical priority is to be reported to Management ASAP (when it is safe to do so and within 1 hour of the incident) by the staff person (s) who are at the location of the incident. If the incident occurs after hours, then the CASSI on-call Service Manager must be contacted.

For an incident that is noncritical it is vital that the incident report is completed, and advocates are notified (as per their completed Advocate Notification Form). This advocate notification along with the incident needs to be file noted and then the incident report and the file note need to be faxed to the office as soon as possible.

An incident which is of critical priority will include incidents which resulted in:

- Serious injury or death
- Missing person
- Medication error / unusual occurrence with medication
- Hospitalization/medical condition

An incident which is noncritical will include incidents which result in:

- Injury requiring medical attention but not hospitalization
- Injury not requiring medical attention
- An accident involving a vehicle(s)
- Property damage
- A “near miss” which could have resulted in injury to a person or damage to property

The incident reports, once received at the CASSI office, will receive a timely priority for investigation and review. The incident report will be first received by the CEO or the Operations Manager who will review and confirm the priority status of each report. The review / investigation will generally be undertaken by the relevant Service Manager. The outcome of the review will be overseen by the CEO or the Operations Manager. The report will then be passed on to the Quality Manager to be incorporated into the review work of the Quality Review Committee. The progress of these steps will be recorded and noted on the devised procedure.

In addition to our CASSI internal procedures regarding incidents, CASSI also has a range of requirements as defined by the NDIS Quality and Safeguards in regard to some types of incidents. For the Commission, certain incidents that happen, or are alleged to have happened, in connection with the provision of supports or services by registered NDIS providers are known as *reportable incidents*. These incidents include the death, serious injury, abuse, or neglect of a person with disability and the use of restrictive practices in particular circumstances.

If a reportable incident occurs, or is alleged to have occurred, the registered NDIS provider must give details about the incident to the Commissioner. Details of certain incidents (such as the death of a person with disability) must be notified within 24 hours, while others must be notified within 5 business days.

Registered NDIS providers must keep records about reportable incidents.

If the Commissioner is notified about a reportable incident, the Commissioner may take certain action, including requiring the provider to undertake specified remedial action, carry out an internal investigation about the incident or engage an independent expert to investigate and report on the incident.

The Commissioner has the power to authorise inquiries in relation to reportable incidents. An inquiry can be carried out even if a reportable incident has not been notified to the Commissioner.

The Commissioner can publish a report setting out his or her findings in relation to an inquiry.

Reportable incidents are defined according to the act as:

- a) the death of a person with disability; or
- b) serious injury of a person with disability; or
- c) abuse or neglect of a person with disability; or
- d) unlawful sexual or physical contact with, or assault of, a person with disability; or
- e) sexual misconduct committed against, or in the presence of, a person with disability, including grooming of the person for sexual activity; or
- f) the use of a restrictive practice in relation to a person with disability, other than where the use is in accordance with an authorisation (however described) of a State or Territory in relation to the person.

INDIVIDUAL NEEDS OF SERVICE USERS

Policy Statement

CASSI will always seek to provide services that assist service users in response to their individual values, needs and personal goals, in the least restrictive way available and with the resources that are provided for the purpose.

Objective

CASSI has always sought to operate our support service in a person-centred way; and focussing on the individual values, needs and goals of each person that we support is the foundation upon which we build our person-centred approach.

Strategies and Procedures

When providing our services, we:

- respect each service user's right to choose to experience a broad range of opportunities and to take calculated risks in an environment that provides relevant information, support, and care,
- provide support that is appropriate to each person's needs and wishes, age, sex, cultural and religious background,
- recognise that if our services are unable to meet an individual's needs, we will encourage and support the person in gaining access to more appropriate services,
- where service users need to share support and housing (usually in response to the constraints of the funding that is made available) the complexities and circumstances of compatibility will always be explored fully; and where compatibility is demonstrated to not be present then CASSI will support the service users to explore other support arrangements.

INDIVIDUAL PLANNING

Policy Statement

CASSI will engage in planning in a person centered and individual way with each service user in order to better identify and understand each person's own values, needs and goals.

Objective

The objective of this policy approach is to enable CASSI to operate in a way which is respectful of each individual person that is supported by the service; and to provide the information and understanding of each person which is needed in order to provide a service that is of a high quality and standard.

Strategies and Procedures

The various planning tools and processes which are available for use at CASSI will be used to explore the following:

- The individual values, needs and personal goals of each person,
- The resource levels which are available; and whether those resources are actually available to use to apply to the identified needs and goals of each service user,
- The ways in which a service can be designed and delivered to meet the needs and personal goals of each individual,
- Finding ways in which each service user has the opportunity to participate as fully as possible within his or her capacity in making decisions in relation to the services he or she receives,
- Looking to ensure that each service user's right to privacy, dignity and confidentiality in all aspects of his or her life is recognized and respected, in the ways that supports can be provided,
- Each service user has the opportunity to develop and maintain skills and to participate in activities that allow him or her to achieve valued roles in the community.

At each time during the process of planning and exploring, CASSI may need additional personal information relating to a service user. Whenever this need arises, CASSI will ensure that the service user or advocate's approval is obtained and recorded on the appropriate Authority to Release or Authority to Obtain Information form prior to proceeding with the release or acquisition of the information.

During all meetings with service users, it is most important that the service user is not rushed or placed under any stress. All staff members will use their professional skills to determine the number of interviews and the duration of these interviews to best meet the service user's needs.

The Individual Lifestyle Support Plan will detail a service code and title for each service activity. Service activities will be grouped into the following service categories:

- home based
- community access
- personal care.

The Individual Lifestyle Support Plan in a record of the agreed support approaches to be taken; as such it will only be operational when it has been approved by the service user / advocate, the CEO and the Service Manager.

Service activities are recorded by the end of each shift, by the Lifestyle Assistant, on the Personal Service Delivery form. This form will record the delivery of the supports which have been agreed in the Individual Lifestyle Support Plan. Staff are to complete this record by initialing each activity as it is completed. Any changes or additions to the record are to be detailed in a file note and file note number recorded on the service delivery record.

An Individual Program Plan will be developed by the service user, advocate and service manager / house coordinator. This plan incorporates the service user's long- and short-term goals. This plan covers the following areas:

- Health & Medical
- Self-Care
- Communication
- Vocational/Educational
- Leisure & Recreation
- Tenancy/Co-tenancy
- Family Interaction
- Mobility
- Financial Skills
- Social Interaction/Friendships
- Behaviour Management
- Domestic Skills

Each plan, the Individual Lifestyle Support Plan and Individual Program Plan development will reflect the support practices provided to each service user. In order to ensure their currency and relevance, each plan will be reviewed and re-written as needed; and a total review will occur once every 12 months; or sooner if required.

All staff members will record every action and occurrence on current authorised issues of the forms referenced in this procedure. These forms will provide the service with an auditable record of the history of the supports provided to the service user, by activity and enable validation of outcomes.

INVASIVE PROCEDURES POLICY

Policy Statement

CASSI has a longstanding Invasive Procedures Policy which ensures the safety and well-being of the people we support and our workplaces.

Objective

It is CASSI's policy that staff, volunteers and management have a clear and shared responsibility to ensure that all locations where CASSI provides support are environments which are safe.

It is within this context that this policy seeks to address that many people that we support have a complex range of invasive health care procedures to maintain their health and well-being.

To that end this policy will outline procedures that are invasive and therefore are deemed to be beyond the scope of our position as Lifestyle Assistants.

The following list is not an exclusive list, but examples of such invasive procedures can include:

- podiatrist care or cutting of toenails where specialised podiatrist care is deemed necessary.
- the administration of rectal anticonvulsants or enemas
- ventilator and tracheal suction
- specialised management of non-oral feeding
- manual extraction of the bowel
- the insertion of creams internally

Strategies and Procedures

CASSI develops plans that are person-centered and to meet their individualised needs. All CASSI staff, volunteers and management are required to work in a manner that is consistent with CASSI policy and procedures.

It is policy that CASSI staff are required to work within the scope of their training and are not able to perform any procedure outside of the training or as detailed in an individual's support plan.

At all times CASSI will assist our service users to gain access to suitably trained, qualified and professionally supervised personnel to perform these tasks.

Web Sites for more information

The QLD Department of Health web site includes a great deal of information that relates to this issue, along with links to support services on the Gold Coast.

<https://www.health.qld.gov.au/>

The NSW Department of Health also has a comprehensive range of information and links for services in Nth NSW.

<http://www.health.nsw.gov.au/>

LEAVE FLEXIBILITY

Policy Statement

CASSI is keen to be a flexible employer in respect of leave entitlements for all employees. This policy seeks to highlight our approach to a number of occasions where staff may seek to take leave

Objective

CASSI seeks to be an employer of choice in that staff are rewarded well and supported to approach leave entitlements as flexibly as possible. It should also be noted that this policy should be read in conjunction with the leave provisions outlined in the applicable modern award (Social, Community, Home Care and Disability Services Award).

Strategies and Procedures

Ceremonial Leave: A CASSI employee who is legitimately required by Aboriginal tradition to be absent from work for Aboriginal ceremonial purposes will be entitled up to ten working days unpaid leave in any one year. Reasonable evidence in support of such a claim for leave will need to be provided.

Community Service Leave: An employee of CASSI may need to take leave for community service leave for a number of reasons. These can include the following:

- **Jury Service:** CASSI recognizes that Jury Service is a legitimate part of our responsibilities as a citizen. Jury service is required by or under law of the Commonwealth, a State or a Territory. In support of this, CASSI will provide “make up pay” to full time and part time employees for a period of up to ten days, at the base ordinary rate for ordinary hours of work, when they are engaged in Jury Service. This is in addition to the payments that are made available to members of a jury by the relevant Government Department.
- **Eligible Community Service Activity:** Any CASSI employee who engages in an eligible community service activity is entitled to be absent without pay from work for a period when they are engaged in the activity, reasonable travelling time associated

with the activity and reasonable rest time immediately following the activity. A CASSI employee who wishes to be absent from work for such purposes, must give notice of the absence as soon as practicable and must advise of the period or expected period of the absence. The CASSI employee must give notice of absence and give evidence that would satisfy a reasonable person that the absence is because the employee has been or will be engaging in an eligible community service activity.

- What are eligible community service activities? These are voluntary emergency management activities that involve dealing with an emergency or natural disaster. Typically, a person involved in such activities would be a regular participant of an association or a recognised emergency management body.

Family and Domestic Violence Leave:

- All employees are entitled to 5 days unpaid leave each year to deal with family and domestic violence.
- Family and domestic violence means violent, threatening or other abusive behaviour by an employee's close relative that:
 - seeks to coerce or control the employee
 - causes them harm or fear
- A close relative is an employee's:
 - spouse or former spouse
 - de facto partner
 - child
 - parent
 - grandparent
 - grandchild
 - sibling
 - an employee's current or former spouse or de facto partners child, parent, grandparent, grandchild or sibling
 - a person related to the employee according to Aboriginal or Torres Strait Islander kinship rules

LOCKING OF GATES, DOORS OR WINDOWS

Policy Statement

CASSI has a policy of locking gates, doors, or windows in some of the homes of service users, when necessary.

Objective

The purpose of this policy is to safeguard service users with an intellectual or cognitive disability, where the service user has a skills deficit that might otherwise place them at risk of harm.

Strategies and Procedures

These practices may be applied where the service user requires supervision to exit the premises safely, and when the adult cannot exit the premises without supervision because the service user:

- does not have the required road safety skills
- is vulnerable to abuse or exploitation
- does not have the skills to find their way back to the premises
- does not have other safety skills

Such practices are referred to as locking gates, doors, or windows, and include:

- perimeter gates
- internal or external doors and/or windows while the service user and others are inside the building, restricting exit from the building

Locking gates, doors, or windows where the only reason is to prevent physical harm being caused to the service user with a skills deficit is not a restrictive practice.

The difference between a restrictive practice and the policy of locking gates, doors or windows is that restrictive practice is used to respond to the behaviour that causes harm displayed by the service user. Whereas if gates, doors, or windows are locked only in response to the need to safeguard the service user from harm, due to the adult's skills deficit, it is not a restrictive practice.

The implementation of this policy, by CASSI staff, will always be based on an awareness and application of honesty and duty of care. Staff will always ensure the gates, doors and/or windows are locked in compliance with this policy.

Staff will also take reasonable steps to minimise the impact of locking the gates, doors or windows on a service user living at the premises who is not a service user with a skills deficit

An assessment should be conducted where there are concerns about the service users' ability to conduct themselves outside their home without supervision. If the decision is made to lock gates, doors, or windows at a location in order to respond to a skills deficit and safeguard the service user from harm, this should be documented in a plan, steps should be taken to minimise the impact upon other service users without a skills deficit who share the premises. This should be monitored and reviewed regularly.

MANAGEMENT AND GOVERNANCE

Policy Statement

The CEO will assume the executive responsibility and authority for the establishment, implementation and maintenance of the operations of the service as defined and described through the quality system. The primary responsibility will be the provision of system performance reports by the CEO to the Management Committee, in its role as governor.

Objective

This policy has the effect of delineating the separation between the governance roles and responsibilities of the Management Committee on the one hand, and the operational roles and responsibilities of CEO, on the other.

Strategies and Procedures

All Management Committee members will be informed of their obligations, responsibilities and roles as described in the Committee of Management Induction Guidelines

The conduct expected of each member of the Management Committee is that they are individually and collectively:

- act honestly and in good faith;
- act with care and diligence;
- act with loyalty and avoid conflicts of interest;
- avoid abuse of information;
- act in the best interests of the organisation; and
- exercise powers for their proper use.

The President or Secretary of the Management Committee will formally endorse all service contracts / agreements entered into by the organisation and will show evidence of this endorsement by signing the appropriate document.

The President will ensure the information received from the CEO confirms compliance with all existing service contracts / agreements.

The President and CEO will ensure the organisation maintains regular communication and cooperation with other organisations dedicated to providing support to people with a disability.

The Management Committee will ensure all funds received from any source or ventures are used in ways that are consistent with the organisation's stated objectives and purposes; in summary that is in providing services for people with a disability.

The Management Committee meetings will be conducted on a day and at a time that the Committee deems suitable and will be in accordance with the Rules of Association or as required. The CEO will report to the Management Committee on all activities pertaining to the organisation's operations.

Accurate minutes of the meeting will be maintained. The Chairperson will confirm the minutes at the subsequent meeting of the committee.

CASSI will generally convene meetings at times and in locations that are mutually convenient and appropriate to the participants. The cost of facilities (e.g., room, administrative support, refreshments etc.) are to be met by CASSI.

MANUAL HANDLING

Policy Statement

The safety of our service users and staff, in respect of manual handling protocols, is a high priority for CASSI.

Objective

The objective of this policy is for a manual handling protocol to be established and followed at all times by staff and service users. There will usually be a protocol designed by an external independent consultant, particularly where the service user has a physical disability or limitation to movement.

Strategies and Procedures

Staff safety, training and wellbeing is critical to organisational success. In achieving a common standard of training and knowledge in this area, CASSI has a number of strategies and procedures:

- All staff will be trained in correct and appropriate techniques by a suitably experienced member of staff prior to being involved in any manual handling and transferring. That training will be consistent with the established manual handling protocol and will be provided before staff are rostered on to work at the applicable location,
- CASSI will also ensure staff have the opportunity to be trained in general principles and practices of manual handling. That will include the correct use of hoists, equipment and mobility aids. That training will be organized on an annual basis for all current staff; plus “catch up” training for staff who are engaged after the annual training has been provided,
- All direct care staff have a responsibility to participate in manual handling training to ensure they are confident and competent in this area,
- The service user and CASSI will engage in effective strategies to ensure that the necessary hoists and other equipment is available for use by direct care staff,
- Wherever the use of equipment is defined as being necessary it is CASSI's firm policy that this equipment be used,

- CASSI has a “no lift” policy in that staff are not to physically support the weight of people that they are assisting to transfer or move,
- If a service user is unsteady and gets to a point when a fall is most likely going to occur, we advise staff that if they can steady the resident without a risk of injury to themselves or the service user then it is up to them to assess the situation. If they are unsure or not 100% positive, they are able to assist safely without a risk of injury, they are to stand back and not “catch” a falling service user. The jerky movement associated with “catching” a falling service user is a well-known cause of injury within the healthcare industry. The staff member then has an obligation to manage the post fall situation according to organisational guidelines.
- The ability of staff to “steady” an “unsteady” service user will be variable according to the staff member and the service user. Ultimately, the staff member has a duty of care to assess the task and ensure they are following the plan and ensuring they do not take any risks that would place themselves or the service user at risk (there is legislation available that lists the duty of care of healthcare workers and the duty of care of employers).
- Where there is only one staff member on duty and there are no appropriate aids to facilitate transfers, an ambulance should be called to assist. On such occasions the staff person involved will always contact the Service Manager or the On Call Service Manager prior to any alternate arrangements being undertaken.

Staff who fail to actively and positively adhere to the established manual handling protocol and the policies that CASSI has in these areas could be subject to disciplinary action.

MEDICATION

Policy Statement

Whenever CASSI staff are needed to assist a service user in the administration of medication then the medication must be supplied with written directions from a medical practitioner or other health practitioner; and the items must be supplied in a Webster Pack.

Objective

The objective of this approach is to ensure that CASSI service users get proper access to the therapeutic benefits that come from medications, as prescribed, and that CASSI staff are confident that where they are helping in the administration of medication it is within the directions provided by a duly qualified person.

Strategies and Procedures

Staff will only administer medication if it is clearly identified in a Webster pack provided by a pharmacist.

All prescribed medications taken on a daily basis and PRN are to be dispensed into a Webster Pack by a pharmacist. Reserve supplies and prescriptions of medications for each service user are to be retained by the pharmacist.

Staff are to administer only according to current medication regime, PRN Plan and Webster pack.

In circumstances where medication cannot be webster packaged due to the medication not being suitable e.g., Movicol, a Non-Webster Packaged Medication form must be completed.

Additional medication such as antibiotics needs to be recorded on an Additional Medication Record.

Medication chart is to be signed and time noted immediately after staff have administered medication.

The administration of PRN medication is to be recorded on the PRN Chart, incident reports and if applicable behaviour recording sheets and reported to the office.

Where there are two staff on duty in the one location administration of medication should be cross checked and witnessed by both parties.

When medication is handed to or from a third party, on behalf of a service user, this must be acknowledged on Medication to / from a Third-Party form.

In circumstances where service users self-medicate, staff may be required to prompt a service user to take medications at the required times.

Any changes to service user medication must be as described in written directions from a medical practitioner or other health practitioner before changes / variations in medication for prescription type drugs can be implemented.

All staff should be aware that the written directions referred to above may include:

- all directions issued by a medical practitioner or other health practitioner by way of a prescription must be prepared and dispensed into a Webster pack by a pharmacist,
- a copy of the prescription, and / or
- a separate letter of advice from the medical practitioner or other health practitioner.

When a service user's medication is varied or changed by a medical practitioner or other legal prescriber, the staff member assisting the service user at that time will be responsible for ensuring that the variation or change is recorded:

- on the service user's medication chart (Routine Medication Record);
- on a file note;
- cross referenced in the diary;
- on the service user's cover sheet;
- Medical and Allied Health Record; and
- Medical Treatment Record (where necessary).
- PRN Medication Support Plan

The service user and / or staff member will only dispose of any unneeded medication by returning to the dispensing chemist and completing a Disposal of Medication Form.

Complementary Therapies can include herbal medicine, Chinese medicine, acupuncture, homeopathy, naturopathy, iridology, aromatherapy, Reiki, meditation and relaxation techniques as well as dietary therapies, herbs, vitamins and minerals. Complementary medicines can interact with prescribed medication. If staff are to administer or assist in administering such therapies, then the service user will be required to have consulted with a medical practitioner about this situation.

If accompanying service users to a complementary therapist, staff must (after permission to do so) inform the therapist of the service user's medical conditions and current prescribed medications. The service user's GP should be informed (after permission to

do so) of any recommendations involving the administration of therapeutic substances or changes to the service user's diet or lifestyle before undergoing any treatments.

There may at times be variations or changes experienced in the administration of medication such as:

- a staff member has some difficulty in assisting a service user to administer the medication;
- an adverse reaction to the medication is observed (seek medical treatment); or
- medication is not taken or given for any reason.

If at any time there have been variations or changes in administering medication (that is any event that does not clearly follow the prescription) these concerns should be drawn to the attention of the service manager, at the earliest opportunity, in order that appropriate actions can be initiated. These actions may include:

- contacting the medical practitioner;
- contacting the pharmacist;
- contacting poisons information; and
- contacting the advocate.

The above actions will be recorded on an Incident Report. In addition, these events will also be noted:

- on the service user's medication chart;
- on a file note; and
- cross referenced to the diary.

Failure to comply with the policies and procedures detailed above or not reporting any knowledge of noncompliance with policies and procedures may result in severe disciplinary action, including possible dismissal.

MEETINGS

Policy Statement

There are a number of types of regular meetings which are convened by CASSI; the purpose, frequency and participation in which is established by this policy.

Objective

A strong service is built in part of solid communication practices; that includes the establishment of meaningful and purposeful meeting processes.

Strategies and Procedures

In accordance with the provision of the SCHADS award, participation in any meeting convened by CASSI is to be paid.

CASSI has five different levels of staff meetings. All are scheduled regularly throughout the year. These include:

Appraisal and performance management, planning, direct supervision including professional development. These meetings are intended to provide an opportunity for staff members to engage positively with their supervising managers to review their work performance and to identify areas of success and well as areas that will require improvement or development. That can include training and development opportunities both within CASSI and in the broader services sector,

Team meetings which occur on a bi-monthly basis. They are designed for staff to deal with specific issues relevant to the service users supported by that team. Attendance at these meetings is compulsory. The structure of these meetings is as per an approved agenda format.

Quality Review meetings which are generally attended by the CEO, Quality Manager, Operations Manager, Service Managers, Administration Team and the Safety Advisor. These are designed to review the quality management procedures and implement improvements to the service provided.

Within the management area there are also regular meetings designed to review and coordinate the work areas that this team is responsible for. The meetings include Administration meetings, Service Manager meetings, Community Inclusion meetings and more general meetings of all who work in the CASSI office.

Service user meetings will be conducted as required by management or on request of two or more service users or their advocates at any one location. These meetings will be arranged by the service manager and can include appropriate nominated staff.

Minutes of the meetings will be maintained by the nominated chairperson.

NDIS QUALITY AND SAFEGUARDS COMMISSION

Policy Statement

It is CASSI's intention to continue to be a disability support service with a strong focus on assisting people with high and complex support needs.

Objective

Our objective is work in a sustainable and high-quality way to support people with a disability to live well in their community.

Strategies and Procedures

This policy will outline how CASSI will continue to deliver high quality support services under The National Disability Insurance Scheme and to also work effectively within the expectations of the NDIS Quality and Safeguard Commission.

CASSI is a registered as a provider under the National Disability Insurance Scheme. With the transition to this new funding body, CASSI will continue to provide quality support to people with a disability to live well in their community.

The National Disability Insurance Scheme (NDIS) represents a fundamental change to how supports for persons with disability are funded and delivered across Australia.

The NDIS is operationally complemented by another new organisation, the NDIS Quality and Safeguards Commission. The NDIS Quality and Safeguards Commission is responsible for a range of functions under the National Quality and Safeguarding framework. This aims at protecting and preventing harm to people with disability, who are being supported with funding from the NDIS. It is the Commission's intention to build the capability of NDIS participants and providers to uphold the rights of people with disability; and thereby realise the benefits of the NDIS. The rules are intended to support participants to be informed purchasers and consumers of NDIS supports and services and to live free from abuse, neglect, violence, and exploitation.

The Commissioner of the NDIS Quality and Safeguards Commission will provide leadership in relation to behaviour support, and in the reduction and elimination of the use of regulated restrictive practices by NDIS providers.

NUTRITION AND SWALLOWING POLICY

Policy Statement

CASSI provides support to people with disability that is consistent with the achievement of good nutritional health, with a view also to the safety of the service user.

Objective

There are a great deal of positive benefits and experiences that come from the achievement of good nutritional health. CASSI's objective is to assist service users to enjoy those benefits. And to also have his or her capacity to swallow safely and effectively assessed by duly qualified specialists, where there is a concern about the safety for an individual service user.

Strategies and Procedures

CASSI will provide staff who are skilled and committed to the achievement of good nutritional health. Staff will value and promote the person's right to a safe and healthy diet; they will also monitor and assist in the management of risks in the context of nutritional needs.

The implementation of our nutrition and swallowing policy will also require an ability to positively engage in the balancing of personal choice and self-determination with duty of care.

Where there has been observed an issue of concern regarding the ability of an individual service user to swallow safely, then CASSI will work sensitively and with initiative to seek to have that person's swallowing capacity assessed by a duly qualified specialist. The outcome of that assessment will form the basis of decisions that may need to be made, always in direct consultation with the service user and advocate.

The implementation of this policy will also be sensitive to each service user's cultural and religious backgrounds and beliefs.

CASSI will ensure that service users have access to a range of health and clinical services when nutritional risks have been identified.

The policy requires services to ensure that all people being supported have their nutritional support needs checked annually (in the context of the CHAP: Comprehensive Health Assessment Plan) and more frequently if the support needs of the person change.

CASSI's best practice approach requires that eating and drinking plans or mealtime management plans are developed by the relevant health professionals.

Eating and drinking plans or mealtime management plans are kept in the service user's active folder so that it is accessible and familiar to the support staff.

It is expected that wherever possible individuals will be able to express their likes and dislikes about foods and recognised with the daily food selections, menu planning and food purchases.

ON - CALL SYSTEM

Policy Statement

CASSI will provide a system or process that will enable after hours contact with a Service Manager for urgent matters that need resolution.

Objective

CASSI is a 24 / 7 operation and so there will be times when service users, advocates or staff will need to be in contact with a Service Manager outside of regular business hours.

Strategies and Procedures

CASSI has an afterhours mobile phone (that will always be operated by a Service Manager on a rotating roster basis) for staff, service users or advocates to call in the event of an emergency and in the following situations.

In summary, the sort of reasons to call this number are:

- an unplanned shift change, whereby rostered staff has tried unsuccessfully or unable to find a replacement staff for their shift,
- the need to urgently clarify a policy or a procedure,
- notification of an emergency,
- notification of a serious incident,
- seek permission for additional hours or changes to shift.

If the on-call person is unable to assist in the reported situation, they will contact the relevant Service Manager, Operations Manager or CEO.

The on-call number is 0447 729 580

PETTY CASH

Policy Statement

CASSI will operate a Petty Cash system that will be used to manage relatively small amounts of money in an accountable manner.

Objective

The aim of this system is to better enable access to cash for office and support staff, cash floats for service users and other small floats for other purposes.

Strategies and Procedures

CASSI has a few systems in which the petty cash is managed. These include:

Cash for support staff and office staff. This will generally operate on the basis of reimbursement of funds spent. There is a preference that the funds are reimbursed up to the sum of \$100. Reimbursement amount is at the discretion of Administration staff and there will be no reimbursement without supporting documentation.

If the funds to be reimbursed are over the sum of \$100 other methods of payment will be arranged e.g., Reimbursement placed in staff account.

Administration officers are able to reimburse up to \$100 as per receipts provided. Both parties need to sign off on the transaction.

Service users' cash floats. This system will be used to assist service users at some locations and only where such an approach is applicable and appropriate.

For this to be in place there must also be a working agreement of the float amount among relevant parties. (Advocate / Guardian / Public Trust / Service Manager)

Funds are reimbursed only once support staff brings all cash flow sheets and all receipts since the last reimbursement to be reconciled. Both parties are required to sign and confirm this transaction.

Administration staff are to reimburse float to the value of the “shortfall” and keep a copy of the cash flow sheet. The reimbursements which are made will only be able to return the float to the agreed amount.

Other funds or purposes. There may be other circumstances where it is agreed that holding a float within the office is the least restrictive and most positive option available. These funds will be kept separate in the safe. There is a sign in/ sign out form for the safe which needs to be signed off by both parties.

The limit that is to be held in the safe is as agreed by the involved parties.

Reconciliation of the Petty Cash float is regularly undertaken in order to ensure that all money is accounted for and there is appropriate documentation to support this.

Reconciliation is completed by Administration staff and co-signed by the CEO.

The minimum balance is to be no less than \$500 and the prescribed reconciliation form is to be utilized.

PRIVACY, DIGNITY & CONFIDENTIALITY

Policy Statement

CASSI will always obtain, manage, and store information about service users, staff and volunteers in ways that respect each person's privacy, dignity, and confidentiality.

Objective

This policy area will also be seeking to meet each of CASSI's responsibilities regarding privacy, dignity, and confidentiality; including direct reference to the Privacy Act (as administered by the Office of the Australian Information Commissioner).

Strategies and Procedures

In accordance with the values and mission of CASSI, as well as the Privacy Act, our organisation recognises and respects each service user's, staff member and volunteer's rights to privacy and confidentiality. CASSI extends that recognition also to the contractors and other agencies with whom we work.

CASSI regards it as a right of any service user, staff member or volunteer to access their own personal records held by the organisation.

While this policy is designed to describe the ways in which CASSI will meet its responsibilities in this area; the most up to date information that guides our policy and practice is to be found on the web site of Office of the Australian Information Commissioner; this is at www.oaic.gov.au

It is also necessary to obtain personal information that is reasonably necessary to assess needs and for the provision of service and support. Some of the kinds of information that may be collected for this purpose are:

- contact details
- personal details
- employment details
- service needs
- previous service history

- relevant health related information
- sensitive information

In the case of a service user this information may be collected directly from the service manager, family, advocate and / or referring agency. In the case of a staff member or volunteer such information may also need to be sought from previous employers and professional referees.

Information regarding a service user, a staff member or a volunteer can only be obtained or released when a current “Authority to Release Information” form or “Authority to Obtain Information” form has been completed by the service user / advocate, staff member or volunteer concerned. The authority is current only for the period nominated on the form. In general, that period should not exceed twelve months.

There will be times where disclosing information may be necessary. Including the following circumstances:

- non-identifying data required by funding bodies / government departments for planning purposes,
- where disclosure is required or authorised by law (such as court subpoena or staff testifying under oath),
- where it is reasonable that the disclosure is necessary to prevent or lessen serious threat to the life or health of the service user or another person,
- where it is reasonable that disclosure is necessary for the enforcement of criminal law or for a law imposing a fine or the protection of public revenue,
- where information disclosed may only be used for the purpose for which it was disclosed.

If a service user or staff member wishes to access their personal records or need to make any amendments to any existing records, it will be made possible with the supervision of an appropriate member of staff, as nominated by the CEO.

CASSI supports and will conscientiously implement the guidelines that the OAIC has implemented regarding breaches of privacy. The OAIC has described and defined in detail what such a breach of privacy is. There are considerations of the cause, impact, possible harm, and risks that may result. There are also expectations for CASSI about when such breaches occur, of how and by when to correct the cause, whether there should be a disclosure to affected parties and on which occasions are such breaches required to be reported to the OAIC itself. Again, the most correct and detailed information regarding the issues associated with breaches of privacy are described on the OIAC web site at www.oaic.gov.au

In the case of service users, CASSI needs such information, so we can:

- better understand each individual’s support needs,

- assist each individual to access the services and resources in the community,
- design our support strategies to better meet the needs of each individual,
- effectively manage the resources available to CASSI to provide support.

In the case of staff and volunteers, CASSI needs such information, so we can:

- ensure that we recruit staff and volunteers with suitable skills, experience and qualifications,
- offer staff and volunteers suitable professional development opportunities,
- improve and develop the quality of our service,
- effectively manage and administer our responsibilities as a support service and as employer.

In the case of others such as contractors and other agencies, CASSI needs such information, so we can:

- design our support strategies, whether these be implemented by CASSI or contractors, to better meet the needs of each individual,
- effectively manage the resources available to CASSI and our contractors, to provide support
- ensure that contractors and other agencies recruit staff and volunteers with suitable skills, experience and qualifications,
- improve and develop the quality of our service,
- effectively manage and administer our responsibilities as a support service.

All people who are supported by CASSI, and staff and volunteers who are engaged by CASSI, should be aware that no personal information will be disclosed by CASSI to a third party without specific and clear permission being given.

If there should be a breach of privacy, as described by the Office of the Australian Information Commissioner, then that breach will be duly handled, and affected parties notified as the Commissioner has outlined.

CASSI stores all such information in a private and secure manner. If you wish to gain access to the information that has been obtained or retained about you, then contact the CASSI CEO on 5562 3800.

If an individual is concerned that there has been a breach of the privacy policy, they are able to register a record of complaint form through the Quality Management System. The complaint will be responded to in writing in a timely manner. All complaints are to be handled privately and confidentially without fear of retribution.

CASSI stores information in secure ways, usually in one of four locations. That is, in the CASSI office, in some support locations, in our long-term secure storage unit or through

Australian based Cloud services. Such information is retained and destroyed in accordance with community standards.

PRIVACY STATEMENT

CASSI respects the privacy and confidentiality of all people who use our services, staff and volunteers who work for CASSI and others associated with our service. To this end we have implemented the requirements of the Privacy Act (as administered by the Office of the Australian Information Commissioner).

CASSI is an incorporated association that provides accommodation support to people with a disability.

In order to provide effective and appropriate support for people with a disability we need to collect and retain information that is generally considered to be private and confidential.

In the case of service users, CASSI needs such information, so we can:

- better understand each individual's support needs,
- assist each individual to access the services and resources in the community,
- design our support strategies to better meet the needs of each individual,
- effectively manage the resources available to CASSI to provide support.

In the case of staff and volunteers, CASSI needs such information, so we can:

- ensure that we recruit staff and volunteers with suitable skills, experience and qualifications,
- offer staff and volunteers suitable professional development opportunities,
- improve and develop the quality of our service,
- effectively manage and administer our responsibilities as a support service and as employer.

In the case of others such as contractors and other agencies, CASSI needs such information, so we can:

- design our support strategies, whether these be implemented by CASSI or contractors, to better meet the needs of each individual,
- effectively manage the resources available to CASSI and our contractors, to provide support
- ensure that contractors and other agencies recruit staff and volunteers with suitable skills, experience and qualifications,
- improve and develop the quality of our service,
- effectively manage and administer our responsibilities as a support service.

All people who are supported by CASSI, and staff and volunteers who are engaged by CASSI, should be aware that no personal information will be disclosed by CASSI to a third party without specific and clear permission being given.

If there should be a breach of privacy, as described by the Office of the Australian Information Commissioner, then that breach will be duly handled, and affected parties notified as the Commissioner has outlined.

CASSI stores all such information in a private and secure manner. If you wish to gain access to the information that has been obtained or retained about you, then contact the CASSI CEO on 5562 3800.

QUALITY MANAGEMENT SYSTEMS

Policy Statement

It CASSI's intention to maintain a level of support to people with a disability that is characterised by quality, effectiveness and consistency. To that end our organisation will use an accredited Quality Management System which will assist in meeting that objective.

Objective

We aim to achieve a high standard of compliance and consistency with international quality management system requirements, government acts and standards and the requirements within the funding agreements with government. The achievement of our service users objectives, and of our quality objectives, is the primary focus of our staff's activities.

Strategies and Procedures

The accredited Quality Management System that will be used by CASSI, in this context, will be determined by the CEO.

CASSI utilizes and applies its available resources and funds in ways that aim to achieve our underlying objective of always putting quality in service delivery first.

CASSI will establish and maintain a quality management system which incorporates all of the operations that involve the organisation and delivery of services to our service users.

One of the benefits of our quality management system is that it provides an improved level of accountability to our service users, their carers, families, our fund providers, and the community. To this end our procedures provide a clear auditable trail of:

- the services provided,
- who received what service,
- Service user's/advocate involvement and approval of each service provided,
- outcomes of the services provided,
- budget and fiscal control,

- management review and best use of resources.

Quality Review Committee meetings will be conducted bi-monthly or when deemed appropriate by the CEO. The meetings will address the agenda detailed in this procedure:

- Service Improvement Forms - follow up of previous items and new proposals
- QMS Maintenance
- Audits/Reviews and related Information
- Staff Training
- Service Manager Reports
- CASSI Handbook Review Schedule
- Workplace Health & Safety Reports
- Funding Submissions
- Potential Clients
- Complaints
- Incident Reports
- Hazard Reports

The Quality Review Committee meeting will be chaired by the CEO or nominee, and attended by:

- Quality Manager
- Operations Manager
- Support Specialist
- Service Managers
- Safety Advisor
- Senior Administration Officer
- Administration Officer
- Other staff as required

Minutes of the meetings will be maintained and distributed by the Quality Manager.

RESOURCES AND PURCHASING

Policy Statement

The use, acquisition, and replacement of all resources at CASSI will be undertaken in a systematic and structured way which will maximise the benefit to the purposes of the organisation.

Objective

The purpose of this approach is to draw the maximum benefit and use from all resources that are available to CASSI in undertaking our purpose of providing support services which will enrich the lives of people with a disability.

Strategies and Procedures

At all times, the purchase and replacement of resources at CASSI will be undertaken in ways which are consistent with the Delegations and Authorities document which is current and approved by the Committee of Management.

All resources will be deployed in ways which are also consistent with the mission of our organisation; that is to provide services which will enrich the lives of people with a disability.

RESTRICTIVE PRACTICES

Policy Statement

CASSI will engage in the use of restrictive practices only when it is applied in the context of a positive behaviour support plan that is properly approved and also only when those practices are the least restrictive option available.

Objective

CASSI will only engage in the use of a restrictive practice in an effort to reduce the likelihood of a person harming him, herself or others. The practices used will only be those which are likely to be effective and respectful of the person that CASSI is supporting.

Strategies and Procedures

A restrictive practice may include such approaches as physical restraint, chemical restraint, mechanical restraint, restricting access to objects, seclusion and containment.

The NDIS Quality and Safeguards Commission also has a layer of accountability and reporting in regard to the use of restrictive practices. CASSI will, in the case of NDIS funded service users, follow the parameters of that agencies expectations.

The NDIS rules require that there be a current, state-based approval, for each person involved in a restrictive practice. The approval will be sought based on the state in which the restrictive practice is used.

There are very complex strategic approaches and responses to the use restrictive practices, in Queensland and in NSW. The approaches required in each state are detailed, complex and inconsistent with the other state. The inconsistencies will require that CASSI be well informed of the practices in each jurisdiction; for example, in QLD the requirements only apply to adults who are in funded support and who have an intellectual disability. In NDSW their requirements apply to adults and children and are applicable to all such people (with and without an intellectual disability).

CASSI will always follow those QLD expectations and guidelines. There is a separate and very detailed document that prescribes the procedures that are required for restrictive practice use in that state. A copy of the procedural guidelines for these practices is on the CASSI website.

Websites

<https://www.qcat.qld.gov.au/matter-types/guardianship-for-adults-matters/guardian-for-restrictive-practices/restrictive-practice-types> This is the QLD approach to restrictive practices.

<https://www.facs.nsw.gov.au/providers/deliver-disability-services/restrictive-practices-authorisation-portal> This is the NSW FACS approach to restrictive practices.

<https://www.ndiscommission.gov.au/providers/behaviour-support> This is the NDIS Commission approach described.

RISK MANAGEMENT

Policy Statement

CASSI is dedicated to establishing an organisational philosophy and culture that ensures risk management is an integral part of all activities. However, it should be noted that risk management should be one of the planning frameworks available to CASSI's operational and management decisions and it should not be used as a leverage position to inhibit reasonable choice by the people who use our services.

Objective

The purpose of this policy is to highlight and respond to the areas in which CASSI operational and management decisions need to be aware of risks that can be responded to reasonably; all the while keeping the value of self-determination by our service users.

Strategies and Procedures

CASSI's approach to the management of risk is captured by the following principles:

- Risk management is an integral part of CASSI service delivery; and it will sit within a broader context of other considerations involving dignity of risk, self-determination of service users, the diversity of values within the community as well as the more standard considerations of protection of the services resources and the exposure to liability by CASSI,
- The CEO and the Management Committee will embrace this balanced approach to risk management which places it within the total context of service delivery,
- All employees and volunteers are to manage risks proactively and also in ways that are sensitive to the needs of each service user. It is part of CASSI's objectives to encourage employees and volunteers to minimise risks to their own health and well-being,
- All risks are to be managed to an acceptable level. Treatment of risks aims to manage the risks at a tolerable or acceptable level. All risks cannot be removed, and it is the aim of risk management to manage risks to a reasonable limit,
- Informed choice and accurate information will be at the centre of all decisions that are designed to manage risks. Risk management allows CASSI to take advantage of opportunities to achieve improved results by ensuring that the management of any

risk is based on informed decision-making, realistic and measurable objectives and analysis of outcomes.

The approach to risk management can be further clarified by these approach frameworks:

- Establish the context: This component includes identification of objectives, legislation and policy requirements and stakeholder expectations,
- Identify the risks: This can be done through a variety of ways. For example, through brainstorming, questionnaires, interviews, reviewing incidents, scenario analysis and operational modeling,
- Analyse the risks: The consequences and likelihood of the risk is analysed by CASSI Management, from a detailed and operational perspective,
- Evaluate the risks: This component includes identifying the current strategies in place to control the risk and identifying additional strategies required to manage the risk to an acceptable level,
- Treat the risks: The preferred strategies for management of the risk are outlined together with identification of a staff member who is responsible for implementation of the strategy,
- Communicate and Consult: All key stakeholders are involved throughout the process.

ROSTERING ARRANGEMENTS

Policy Statement

CASSI's direct care support staff are employed on a roster system (as continuous shift workers) in order to ensure stability of support for service users.

Objective

CASSI aims to provide support to each service user in an individualized way and in response to each person's the agreed support plan. To facilitate this CASSI also aims to provide information to direct care staff about their upcoming shifts, in a roster format, at least seven days before the commencement of the roster period.

Strategies and Procedures

Direct care staff and service management have a number of responsibilities to ensure the smooth and efficient running of a rostered support arrangement. These include the following procedures.

If a staff member, for any reason, is unable to attend work as rostered, or will be late to commence a shift, it is that person's responsibility to contact either the service user or staff member on duty to advise of arrival time. This advice will be provided before the scheduled commencement time. The staff member will also immediately advise the service manager or the manager who is on-call.

In the event that a staff member has not arrived for work, and prior advice has not been provided, then the service user or the staff person on duty (within 15 minutes of shift commencement time) should first try to contact the staff member to ascertain what has happened. If the person cannot be contacted, the staff member on duty should contact other staff members to provide relief or replacement. If replacement staff cannot be sourced the on-duty staff is to contact the service manager or on call manager.

Pending the arrival of the relief person the on-duty staff will remain on duty until the arrival of the relief staff. If a relief staff member is arranged, and the person originally rostered

eventually turns up, then preference for completing the shift (and being paid for such) will go to the person who has agreed to relieve.

Appropriate changes should be made to the working roster to reflect who actually worked and what hours they worked. Unless specifically approved by a Service Manager no service user is to be left without staff.

Direct care staff may request their Service Manager to change their rostered shift/s, provided that any such requests, are made a reasonable time in advance. It must be noted that consideration of any such requests will also include the support needs of the service user (s) that are affected.

Rostered hours that are regularly in place, and any arrangements for temporary changes, must include consideration of the impact of excessive working hours for direct care staff.

The modern award (SCHADS) and any applicable Individual Agreements will contain detailed descriptions of such issues as span of hours, days to be worked and the like. Staff should use those resources to make themselves familiar with the relevant provisions.

SERVICE DELIVERY

Policy Statement

CASSI maintains a detailed service delivery record for each service user in order to provide a systematic and accountable process of identifying the supports and assistance that each service user requires and also a record of the supports that were provided.

Objective

The aim of this policy is to ensure that there is a direct and accountable link between what CASSI has agreed to provide to each service user, and what is actually provided.

Strategies and Procedures

All direct care staff are required to follow this working outline of CASSI's service delivery approach:

- Read and sign the diary from last shift worked, at the beginning of each shift and complete a brief report when their shift finishes,
- Read and sign file notes from last shift worked,
- Record on their timesheet, at the end of each shift, the details of the actual times worked,
- Complete all relevant service user records,
- Complete all relevant household records,
- Adhere to all CASSI policies and procedures when delivering service and support,
- Ensure all equipment is in sound working order, and if necessary, report any potential problem to Service Manager, on-call Manager or Safety Advisor both verbally and on an Incident or Hazard Report Form,
- abide by all safety and emergency procedures as determined by CASSI.

The relevant Service Manager will obtain a copy of each service users' Individual Lifestyle Support Plans and develop a Personal Service Delivery Record. The service manager, house coordinator and direct care staff will deliver the required service in accordance with service user's agreed Individual Lifestyle Support Plan.

Staff members will ensure that they endorse their name and initials on each page of the service users' weekly Personal Service Delivery Record.

The staff member who has delivered the service will endorse each activity code on the weekly Personal Service Delivery record and initial each activity, as it is completed. The service manager or the house coordinator will confirm and sign the record on completion of the week's activities.

Staff members will record any significant outcomes of the service delivery on a file note and cross reference to the diary.

The diary will also include details of other occurrences that are to be communicated to on-coming staff members and the service manager or house coordinator.

All diary entries will be signed by the staff member making the entry.

All direct care staff will also provide a written shift report, following guidelines that will be made available from time to time, in the location diary at the completion of the shift.

SERVICE USER FINANCES

Policy Statement

CASSI will support and assist service users to manage their personal funds, within an appropriate framework.

Objective

The people that are supported by CASSI have a range of abilities in regard to the management of their personal finances. CASSI will assist them in this task and will always seek to have a formal or recognised arrangement in place to better protect the financial well-being of each person.

Strategies and Procedures

Where it is appropriate, CASSI will participate in a planning process to set in place a personal budget. This to be usually included in the context of the Individual Planning meeting for each service user. It should be noted that a good budget will look to the scope of income to be received, living / household expenses, personal requirements and a savings plan.

In circumstances where CASSI provides support to a service user in managing their finances, the following procedures may need to be included:

- Service Users who pay rent to a landlord will pay fortnightly by way of direct debit from their bank accounts to the landlord's bank account. Service users should be encouraged / reminded to record this payment on any record of expenditure they may care to maintain,
- Where there is a Household Joint Account in use, such an arrangement is subject to it being acceptable to all service users involved. In general, such an account will be provided with an agreed amount each fortnight by each service user. Such an account is very useful for the payment of regular accounts e.g., weekly groceries, power, other utilities,
- A cash float may also be established and stored in a secure location in the house. The cash float is maintained by drawing from the Household Joint Account and is to be used to purchase small, incidental items needed for the household. All expenditures are

to be supported by receipts and are to be recorded on the Fortnightly Housekeeping Budget,

- After each item of expenditure, a new cash balance must be entered which should reconcile with the cash remaining in hand. These funds must be reconciled at the nominated shift changeover. Any discrepancies should immediately be reported to the service manager,
- Under no circumstances are staff members to borrow or use housekeeping funds for other than official housekeeping purposes.

When a service user's Individual Program Plan identifies a need for support in financial management of personal funds, the service manager will ensure that the following procedures / forms are utilized for each service user. Budget details and budget chart, Service User fortnightly cash flow and Handover reconciliation record. Staff members will ensure that these procedures and forms are used and updated as appropriate.

The service manager will ensure any request for information from a person responsible for the service users' finances, e.g., Public Trustee or person responsible is actioned in a timely manner.

Service users are encouraged to maintain a bank account against which only they can withdraw.

Service users should be encouraged to hold in cash, only sufficient funds to meet their immediate needs. Such cash funds should be held by the service user if capable of managing own funds or kept in a secure location for staff to access on behalf of the service user.

The staff member will record all expenditures, including receipts, made by the service user on the Fortnightly Cash flow.

Where money is handed to a third party on behalf of a service user, this must be acknowledged on a Money to a Third-Party form. When anything is purchased by the third party on behalf of a service user, a receipt is to be presented. This receipt is to be attached to the service user's budget sheet.

When an amount of over \$300 is needed for purchases made on behalf of a service user, a Request for the Release of a service user's funds to a third party (over \$300) form is to be filled out and is subject to the approved of the CEO.

SHIFT HANDOVER

Policy Statement

Staff members going off duty, and who will be immediately followed by another staff person must ensure that they communicate about the issues of the shift and the other issues that relate to the support being provided by CASSI.

Objective

It is crucial that staff who provide support on a rostered arrangement are able to gain the benefit of pertinent information about the occurrences of the shift that preceded and the shift that will follow. That is in order to achieve consistency, continuity and effectiveness of support.

Strategies and Procedures

Typical issues that will need to be covered during a shift handover will include:

- appointments for service users for next or subsequent shifts,
- shopping needs,
- daily activities,
- unusual occurrences,
- general health and well-being,
- medications given / to be given,
- food / fluid intake,
- common tasks / personal tasks outstanding,
- any other matters relevant to the well-being of the service users and the good functioning of their home

Any duties not completed within the shift are to be documented in a file note and cross referenced to the service delivery and diary. This information is to also be passed on verbally to oncoming staff.

Each staff member completing / commencing their shift, where appropriate, or unless instructed otherwise, must complete a Handover Reconciliation Record. This procedure

includes two very important elements; to ensure that all funds are reconciled and accounted for, and that all medications have been appropriately administered.

There are a number of steps involved in conducting a detailed handover reconciliation. Typically, these will include:

- each staff member, counts all funds “on hand”, including household and service user funds (where appropriate),
- the amount is recorded on the relevant house handover reconciliation record,
- this amount is checked against pre-existing balance on personal and household budget sheets,
- any discrepancies are to be investigated by cross checking current receipts and entries on budget sheet. If discrepancy is not resolved staff are required to immediately report to the service manager and complete an Incident Report,
- staff are to check Webster packs and medication charts and to count all medications to ensure medications have been correctly administered. This is to be indicated by writing “yes” in the administration of medication column on the Handover Reconciliation Form and staff initial as completed,
- any discrepancies are to be reported to the service manager and an Incident Report completed,
- staff are to check that all entries have been completed,
- all entries are then signed by the staff member and co-signed by a second staff member where possible.

SMOKING

Policy Statement

CASSI's policy on staff smoking is in the context of clear evidence that both smoking and passive smoking are a risk to health. The primary concern of this policy is to limit the opportunity for service users or staff to be exposed to the impact of passive smoking. The policy also recognises the fact that smoking is an addictive behaviour which is very powerful in its effect on the smoker

Objective

The overall objective for this policy is to strike a balance between the knowledge that smoking is hazardous to the health of the smoker, that we work in private homes and CASSI also has a workplace health and safety obligation to our staff.

Strategies and Procedures

Under no circumstance are CASSI staff to smoke whilst providing support to a service user while out in the community. Under no circumstance are CASSI staff to smoke while in a CASSI vehicle or in another vehicle being used for CASSI business.

In each location that CASSI staff provide support, a designated smoking area (in accordance with current community expectations) will be provided subject to the approval of all CASSI service users (and advocates) living at that particular location. Only one staff member at a time may be in the designated smoking area.

Where a service user lives alone and chooses to smoke in his or her own home CASSI staff have the right to leave the premises, while the service user is smoking.

There are a number of organisations in the community who can provide resources to assist smokers to quit. If you require assistance to quit smoking you can contact the QLD Cancer Fund. The National Heart Foundation. Queensland Health or Quit Line 24 hour stop-smoking counselling service.

SOCIAL MEDIA

Policy Statement

CASSI seeks to be represented to the community in a positive way that demonstrates our commitment to our mission.

Objective

This policy area seeks to consider the use of contemporary methods of communication, social media, and how CASSI is represented to the community. It also includes consideration of privacy and confidentiality.

Strategies and Procedures

In the realm of social media, and how staff and volunteers represent CASSI, there are at least five key areas of concern:

- Whether confidentiality has been breached;
- Whether the privacy of service users has been breached;
- If the information which is published is misleading or deceptive;
- If what has been published could be considered to be defamatory with an impact on CASSI;
- And if social media has been used to bully service users, staff or volunteers at CASSI.

The use of social media can also highlight the blurred space between a person's private life and that same person's relationship with CASSI. The immediacy of social media and the easy access to it (e.g., via a smart phone) can also make private comments about a public circumstance both possible and probable. While there is a blurred space present; it is expected that staff and volunteers at CASSI maintain a vigilant awareness of the implications of a failure to separate those two areas.

To assist in this separation staff and volunteers will need to consider perspectives such as these:

- Would comments made on social media, without justification, diminish the positive reputation of CASSI in the community,

- Are the comments made in line with the community's expectations of the proper behaviour and approach of staff and volunteers at CASSI,
- Are the comments lawful? For example, are they compliant with anti-discrimination legislation,
- Would you be comfortable if your line manager read the comments?

If you identify yourself as a staff member or a volunteer at CASSI you must also be aware that comments are searchable, even by people who are not your "friends" or your "followers". There may be real even if unintended implications from comments that are made without this in mind.

It is not permitted to use information within social media, about CASSI, that is not in the public domain. The confidentiality of all other information must be maintained and privacy respected; that is, of the service users, the staff, volunteers and the service itself.

STANDARD PRECAUTIONS

Policy Statement

The use of Standard Precautions is an effective approach to infection control in a community-based disability support service such as CASSI. At CASSI we follow this infection control approach to protect the well-being of the people who use our services as well as the staff who are engaged to provide that support.

Objective

CASSI staff must engage in training about the proper and effective use of Standard Precautions and follow the appropriate guidelines and techniques at all times.

It should also be noted that Standard Precautions are a firm minimum standard; that is, CASSI will always operate at least at the levels described in this approach. However, there may be some service users who will require additional procedures for infection control. In those cases, these will also be provided.

Strategies and Procedures

Providing personal care to people with a disability is a standard and expected requirement of employment in a community-based service such as CASSI. That care must always be provided in a safe and effective manner, as described in the principles of Standard Precautions.

An important element of this approach is that it assumes that any service user or staff member could potentially carry an infection which is transmissible. It is not based on known diagnoses but rather on the safe practices for all people at all times.

CASSI will provide annual, compulsory training for all direct care staff in the principles, use and techniques of Standard Precautions as applied in a community-based disability service context. It is a requirement that all staff actively participate in such training, as it

is organised, each year. Such participation in this training is a pre-requisite for being employed in a direct care role at CASSI.

CASSI's approach to the use of Standard Precautions is demonstrated by the thorough nature of the strategies that are undertaken by the organisation. It should be noted however, that there is a shared responsibility for the effective implementation of this policy. Every member of staff is expected to be vigilant in this area. Each member of staff is directly responsible for the proper use of the techniques described in Standard Precautions; and every member of staff who observes a colleague not following those proper practices must report that lapse to their immediate supervisor. Failure to report such a lapse will in itself become the subject of work performance management and review.

While staff will all be trained annually in Standard Precautions there are a number of key issues that will be highlighted here.

Hand washing is said to be the single most important measure to reduce the transmission of microbes from one person to another. Staff must wash their hands:

- before providing personal care and assistance to each service user
- following contact with blood & body fluids (even when wearing gloves)
- between service user contact
- immediately after gloves removed
- between tasks and procedures with the same service user

Personal protective equipment (i.e. gloves in this case) are essential to be used. Disposable gloves must be worn when:

- handling rubbish
- applying or adjusting dressings
- washing and changing clothes or linen
- doing household chores which may cause infection
- administering first aid
- delivering all personal care needs
- dealing with any blood or body fluids

Any surfaces which have had blood or body fluids should be cleaned with detergent and water and disposable materials e.g., paper towel

It is important to pay particular attention to doorknobs and handles. These must be regularly cleaned as they are identified as the potential site of infected material.

Staff must cover any cuts, abrasions or other skin conditions when delivering personal care or handling food. Such coverings must be of a proper standard and done prior to the commencement of work; and they must be replaced during a shift if that becomes necessary to maintain a proper cover.

Should staff come into contact with blood or body fluids they should wash the fluid away as soon as possible using soap and water. If the contact is in eyes, nose or mouth the area should be rinsed with plenty of water.

Staff must seek medical advice immediately if accidental exposure occurs. An incident report should be submitted to the office and the service manager contacted.

Staff are encouraged to maintain their immunity to Hepatitis A & B both for their personal protection and for prevention of cross-infection.

STAFF TRAINING (*compulsory*)

Policy Statement

There are certain training programs required by all direct care staff, as a prerequisite to maintain employment at CASSI.

Objective

The objective of maintaining certain training programs for all direct care staff is designed to recognise that there are certain core skills that will make CASSI a more effective support service and which will also make CASSI a safer workplace.

Strategies and Procedures

Through the structure of the Quality Review Committee, from time-to-time training programs will be identified as being a prerequisite for all direct care staff in order to be employed at CASSI. Those training programs are:

- Manual Handling; this training is directly organised by CASSI and your attendance at the annual training is compulsory.
- First Aid as it applies in direct care in the disability sector; this training is provided by registered training organisations. CASSI will provide reminders when your qualification is due for renewal.
- CPR; this training is provided by registered training organisations. CASSI will provide reminders when your qualification is due for renewal.
- Standard Precautions; this training is directly organised by CASSI and your attendance at the annual training is compulsory.

Staff who do not maintain this training requirement will be deemed to be not available for rostered direct care work until the training is completed.

Any staff who are experiencing difficulty in maintaining the required training should seek to discuss the issues with their Service Manager without delay.

STORM AND DISASTER RESPONSE

Policy Statement

CASSI will undertake to maintain our responsibilities as a support service in the event of a storm or a disaster.

Objective

The objective of this policy is to maintain our service's capacity to continue to operate effectively as a disability support service during the period of time when there is a storm or a disaster in our region of operation. Service User and staff safety is our primary principle in this area of policy.

Strategies and Procedures

The main detail of the strategic approaches in these circumstances is contained in CASSI's current Business Continuity Plan. Much of that plan includes confidential information about the people that CASSI supports (such as name, address, location, contact details, capacity to share housing in an emergency) which is critical for use during such an emergency; however, it is not suitable for publication in the content of this policy document. The Business Continuity Plan is made available to the appropriate managers at the time of an emergency by the CEO and / or the Operations Manager.

Some of the non-confidential elements of the Business Continuity Plan include:

That every day the weather in our region of operations is monitored by the CEO and the Operations Manager during business hours; and by the duty staff person in the CASSI After Hours Service. That monitoring is intended to be aware of any storm events that are entering our region of operations; when such a storm is noted then all staff are advised to delay or cancel planned outings with service users; the staff are advised of when it danger period has passed.

There is emergency equipment stored and maintained in preparation for use in such an event; Inflatable beds and sleeping bags (12) in the CASSI lockup in Varsity Lakes;

torches with fresh batteries (10) in the Varsity Lakes lock up; fully maintained and securely stored generators (one at 36 Fadden Close Arundel and the other at 1 Warrego Place Terranora).

STRATEGIC PLANNING

Policy Statement

CASSI will develop a strategic plan annually that offers direction for the medium term to the organisation based on the mission and values, of the organisation.

Objective

CASSI values the clarity, the sense of purpose and the operational focus that can come from a well-developed strategic plan; especially when the plan is directly linked to our mission and values.

Strategies and Procedures

CASSI will conduct a process of examining our strategic direction annually.

The strategic planning process will either be conducted or facilitated by senior staff or by an externally appointed consultant.

The process will be built on direct consultations that include service users, their advocates, members of the Committee, staff, management, representatives of the funding bodies and other appropriate members of the community.

The result of this process will generally include:

- A review of the previous plan and its outcomes
- A review of the organisation's mission and vision
- Establishing the guiding principles for the new plan
- Identifying planned actions and objectives for the coming year.

The plan once devised is subject to the review, amendment and endorsement of the Management Committee. The plan will then become the basis for the operational objectives of the service and of the Management Committee.

The planning process, the plan and the objectives of the organisation will be made available to all relevant parties and be appropriately circulated in the community.

STRUCTURE AND FACILITIES

Policy Statement

CASSI's organisational structure and the facilities that it operates will be responsive to the specific needs of people with a disability.

Objective

Our objective in this area is to have a structure and facilities which are consistent and coherent with the vision CASSI; that is, to have a service which positively enhances the lives of people with a disability.

Strategies and Procedures

The CEO will ensure the organisation's offices and other facilities are of a high standard and presenting a positive image to the community of people with a disability. In summary they will be:

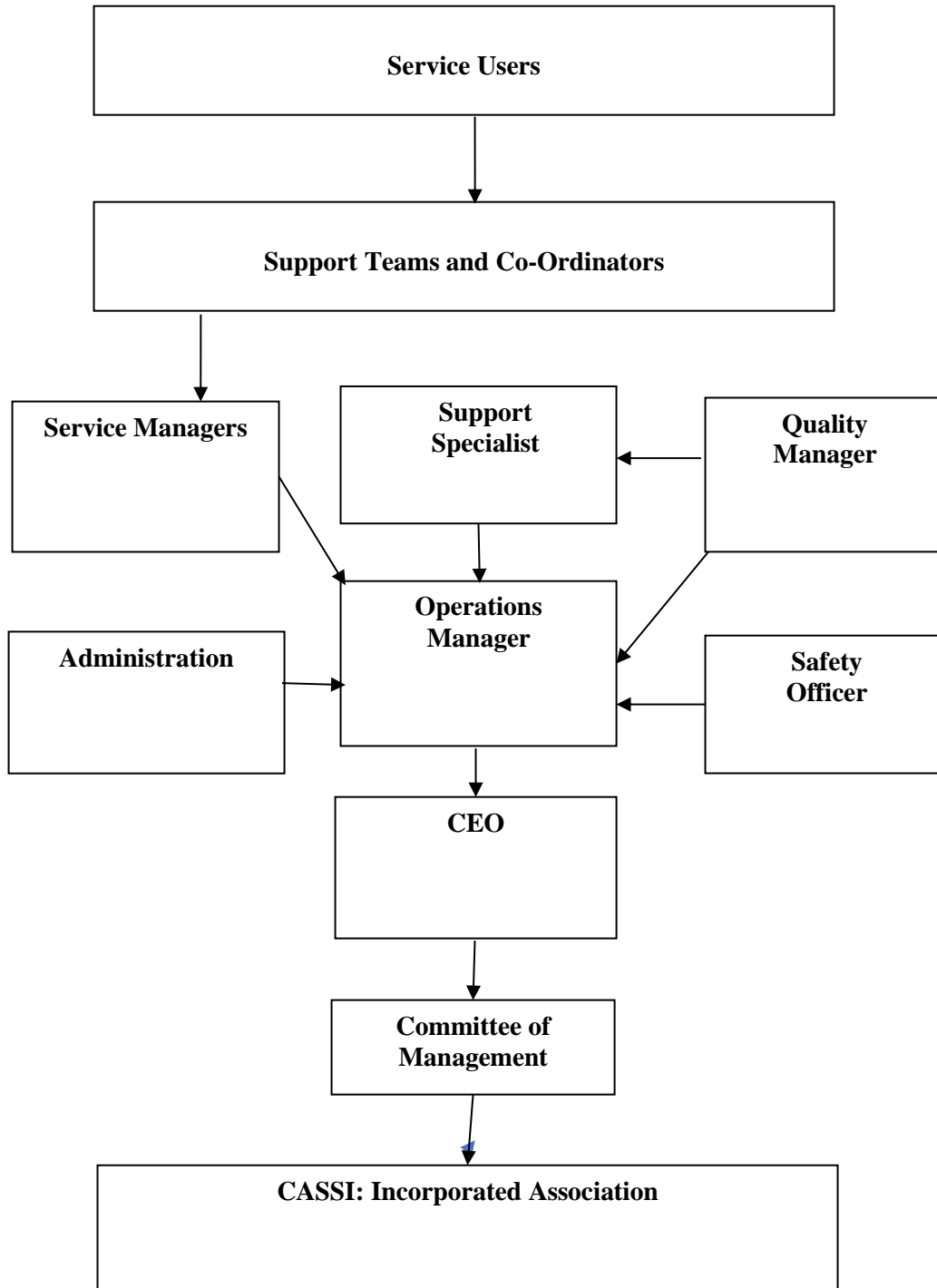
- Of a high standard and quality
- Providing a balance of professional standards as well as a comfortable and welcoming layout
- Space for private meetings
- Supporting collaborative working styles
- Including well-appointed meals and refreshment area

The service's organisational structure likewise will have a prominent place for the people with a disability that CASSI supports, as they are the reason that the organisation exists.

The organisational structure will reflect CASSI's activities as a high quality and high standard service that has a professional approach to the work and responsibilities that will underpin those objectives of high quality and standards.

The organisational chart will be supported by separate position descriptions for all staff members who manage or perform our internal procedures.

The Organisational Chart



VEHICLES

Policy Statement

CASSI will where possible provide vehicles for the use of designated service users and staff.

Objective

The objective of the provision of vehicles by CASSI is to add to and augment the vehicles and modes of transport which are available in the community. It is not the intention of CASSI to provide an exclusive or separate mode of transport.

Strategies and Procedures

CASSI vehicles are provided for official purposes only and are not to be used for private purposes by staff members without the specific approval of the CEO.

Vehicles are provided on a shared basis; that is, they may be used across the service by a number of support locations, on an agreed rostered basis.

Each vehicle will be provided with a logbook which must be completed by the driver at the beginning and end of each journey.

All vehicles are to be serviced at regular intervals in accordance with the manufacturer's specifications. It will be the responsibility of the staff to bring the need for such service and/or any other needed maintenance or repairs to the attention of the service manager / house coordinator in order that appropriate action may be initiated.

The Safety Advisor will conduct a structured check of CASSI vehicles as part of the six-monthly safety inspections at each service location.

In most cases the vehicles used by CASSI are leased; and in some cases, the vehicles are owned. The decision to own or to lease is made by the CEO in consultation with the Committee of Management.

All vehicles are to be driven in accordance with the prevailing traffic laws. Seat belts and other restraint devices, where appropriate, are to be worn at all times.

When not in use all CASSI motor vehicles should be either garaged or accommodated 'off street'.

All CASSI employees who are in possession of a current driver's license, upon production of that license, are duly authorised to drive CASSI vehicles in accordance with the policy. Any staff person who has been penalized by loss of license must advise his or her service manager immediately.

Traffic and parking fines are to be the responsibility of individual drivers.

It will be responsibility of all staff to ensure all vehicles are maintained in a clean and tidy manner.

All fuel and oil supplies should be purchased through CASSI's fuel contractor (currently Caltex) and may only be used for official purposes.

Each official CASSI vehicle is provided with a "Caltex Fuel Card"

All fuel and oil supplies for CASSI motor vehicles are to be purchased from Caltex service stations, utilizing the charge card.

With permission from the CEO or delegate, private vehicles may be used in certain circumstances on CASSI business. Where such permission is granted, it is on the explicit understanding that the vehicle is registered, in a roadworthy condition and has current comprehensive insurance.

WHISTLE-BLOWER

Policy Statement

A whistle-blower is a person who provides information about a person or an organisation to expose conduct that they consider is illegal, dishonest or unethical.

CASSI is committed to the highest standards of conduct, professional support and ethical behaviour. It is within this context that CASSI has established this policy in regard to whistle-blowers.

Objective

The objective of this policy is to encourage reporting of wrongdoing that is of legitimate concern by providing an effective and prudent reporting mechanism; and that there be appropriate supports for the person making the concern known.

The effective and steadfast use of this policy will also serve to ensure that CASSI has a policy, practice and procedure in this area which is a demonstration of our commitment to the values of our organisation.

Strategies and Procedures

How to make a report? If you become aware of conduct that you reasonably suspect or know is fraudulent, illegal, improper or contrary to established CASSI policies it should be reported as soon as possible.

To whom such reports should be made, is at times explicitly identified in the relevant CASSI policy (for example, an allegation of abuse must always be made directly to the CEO). Where it is not so identified, then the report should be made to the CEO or to the Operations Manager, as soon as is possible.

The implementation of this policy will generally be done in conjunction with other key policies at CASSI. Those policies describe key behaviour and approaches to support by direct care staff, key behaviour and approaches to supervision by Management staff, the management and accounting of funds received, expended and retained, the approaches

to governance by members of the Committee of Management. These policies include and are not limited to the following:

- Complaints,
- Code of Conduct,
- Position Descriptions for direct care, administration and supervisory staff,
- Abuse, Harassment, Assault or Neglect,
- Administration Procedures,
- Audits of Service Delivery,
- Discrimination in the Workplace,
- Drugs and Alcohol,
- Incidents,
- Management and Governance,
- Medication,
- Nutrition and Swallowing,
- Privacy, Dignity and Confidentiality,
- Service User Finances,
- Social Media.

People who are working within CASSI or who are associated with CASSI by other arrangements are the people who are most likely to realise that there may be something seriously wrong.

However, they may not wish to speak up for fear of appearing disloyal or may be concerned about being victimised or subject to reprisals for reporting wrongdoing.

CASSI seeks to encourage that any instances of suspected unethical, illegal, fraudulent or undesirable conduct, that involves CASSI, be reported.

- CASSI will protect the confidentiality of the person making such a report so that such people will be able to do so without fear of intimidation, disadvantage or reprisal. To this end when a person makes a disclosure:
 - Their identity must remain confidential,
 - They will be protected from reprisal, discrimination, harassment or victimisation for making the disclosure,
 - A duly constituted internal inquiry or investigation will be conducted
 - Matters that are identified as being inconsistent with CASSI's policies will be addressed with a view to an effective resolution,
 - The initial whistle blower will be informed about the outcome,
 - Any reprisal for having made the disclosure will be treated as serious wrongdoing under this policy.

This policy is established in order to protect and support a whistle-blower who discloses wrongdoing that is made with reasonable grounds to believe it is true. The policy is not

in place to protect people who may make trivial or vexatious reports that have no substance. In such cases this will be treated in the same manner as a false report and may itself constitute wrongdoing; the consequence of making such a report could include disciplinary action or termination of employment (or of contractual arrangements where these are in place).

A whistle-blower must provide his known information to assist any inquiry or investigation into the alleged wrongdoing.

Making a disclosure may not protect the whistle-blower from the consequences flowing from his involvement in the wrongdoing itself. A person's liability for their own conduct is not affected by their report of that conduct under this policy. However active cooperation in the investigation, an admission and remorse may be considered when considering disciplinary or other action.

WORKPLACE HEALTH AND SAFETY

Policy Statement

CASSI will have a systemic approach to providing a safe and healthy support service and workplace.

Objective

CASSI's approach workplace health and safety will be mindful of the fact that we will be working in the private homes of people with a disability; and so, a sense of balancing those two imperatives is important in this policy area.

Strategies and Procedures

To assist and support CASSI with this policy area a Safety Advisor will be appointed. That person will support the Service Managers in their endeavors to provide a safe and healthy support service and workplace. CASSI's Safety Advisor conducts structured safety inspections at least once a year at each service location. Inspections are also conducted on an as needed basis.

Our approach to workplace health and safety is to endeavor to reduce and minimize the risk of accidents and injuries; and to promote a healthy work environment for all our employees.

All staff and service users have a responsibility to:

- follow policies and procedures when delivering service,
- report conditions / procedures that appear to be unsafe or unhealthy,
- use protective equipment provided for the safety and health of all staff and service users,
- use all equipment provided for the safe transferring and mobilization of service users.

CASSI is committed to providing and maintaining a safe and healthy working environment. Hazards to health and safety will be removed or, where this is not

practicable, they will be managed so as to prevent injury, illness and dangerous occurrences. This latter approach is an essential part of the risk management process.

All staff are to make themselves familiar with the emergency and evacuation procedures pertaining to their workplace/s and service locations.

The Safety Advisor conducts or facilitates annual emergency evacuation exercises at each service location; or more frequently if required.

Where fire extinguishers and fire blankets are located in the workplace, they must not be tampered with. Staff are to ensure they know the location of this equipment and how to use it. All fire equipment is checked in accordance with established schedules by the external, expert companies.

Any hazard is to be documented on a Hazard Report Form which will be forwarded promptly to the office for follow up purposes. Staff members are to report immediately any defective equipment, particularly electrical equipment, to their service manager.

Resolving or fixing a hazard can often be achieved by acting locally at the service location; and reporting the same on the Hazard Report form.

In the event that a service user sustains a medical problem or injury that causes concern to a staff member, they should:

- initiate appropriate first aid measures,
- telephone for an ambulance / seek medical attention as required,
- telephone service manager
- telephone relatives / advocates.
- Note that whenever a CASSI service user goes to hospital for treatment, then it is our intention that a CASSI staff person also goes to the hospital,

In the event a staff member is injured at work, it is their responsibility to:

- seek appropriate medical treatment and
- obtain a Workcover medical certificate
- report the injury to the service manager
- complete an Incident or Hazard Report and give to service manager within three (3) days

All staff will participate in training on health and safety issues as they relate to their area of responsibility. This training is to inform staff of the safety policies and practices of CASSI and the responsibility of all staff in promoting and maintaining a safe and healthy work environment.

WORKPLACE REHABILITATION

CASSI recognises that effective rehabilitation is in the best interest of the individual staff member and the organisation and acknowledges that early return to work after an injury/illness can assist the healing process and help to restore the individual's normal function sooner.

CASSI is firmly committed to providing an effective Rehabilitation Program based on the following principles:

- Preventing injury and illness through providing safe and healthy working environments.
- Ensuring rehabilitation is a normal practice and expectation within this workplace.
- Ensuring the process of workplace rehabilitation commences as soon as practicable after an injury and with the approval of the worker's treating Doctor.
- Providing an injured worker with suitable duties for a set period of time where practicable as an integral part of the rehabilitation process.
- The goal through rehabilitation plan is to return the injured person to their usual duties.
- A team approach to rehabilitation is used with co-operation, consultation and confidentiality being key requirements for all persons involved.
- At all times the rights, welfare and confidentiality of the worker are respected.

This rehabilitation policy and procedures and overall results of our program are regularly reviewed and continuously improved.

Aim

CASSI's policy is to ensure:

- A process exists to support an early safe return to work program for the worker who has experienced an injury/illness.
- The position of the Workplace Rehabilitation Coordinator/s is adequately resourced.
- Adequate storage is provided for confidential files.

Suitable Duties Program

Specially selected duties offer a supervised and gradual return to usual duties. They are matched to the capabilities of the worker and suitability of the service location. These duties are regularly reviewed and upgraded according to the level of recovery.

The following issues will be considered when selecting a suitable duties program:

- The worker's pre-injury duties, nature of incapacity and rate of recovery.
- The treating Doctor's approval must be obtained, and the duties must comply with the restrictions and limitations specified by the Doctor.
- The worker's skills and work experience.
- Duties must be meaningful and have regard to the objectives of the worker's rehabilitation plan.
- Suitable Duties Programs may be either fully funded by Work Cover QLD/NSW Insurers QBE or partially funded by both CASSI and Work Cover or QBE.

Injured Worker's Responsibilities

- To report injury to service manager and or workplace rehabilitation coordinator.
- To apply for Worker's Compensation.
- To ask the treating Doctor to complete the Suitable Duties Checklist.
- To advise the treating Doctor of the availability of a Rehabilitation Plan.
- To minimize the cost of the injury by actively participating in workplace rehabilitation.

It is the right of the worker:

- To choose their own Doctor and to confidentiality of personal medical information. CASSI must obtain the worker's authority before obtaining or releasing medical information and maintain confidentiality with medical information.
- To be consulted in the development of a Rehabilitation Plan.
- To be provided with suitable duties, if practicable, as part of a plan to return to usual duties.
- To ask for a review of any decision with which they do not agree.

Management Responsibilities

- To actively assist the Workplace Rehabilitation Coordinator/s in identifying suitable duties to develop return-to-work plans.
- To adjust workplace procedures, rosters and workflow to enable successful implementation of the plan, monitor the injured person's progress and to generally offer support and encouragement to the injured person.
- To educate team members on their role and responsibilities for rehabilitation. To ensure this knowledge is part of the induction process.

Treating Doctor's Role

- To approve all Rehabilitation Plans and amendments by signing them.

Workplace Rehabilitation Coordinator/s and Service Manager's Responsibilities

- To ensure an efficient system exists for the immediate reporting of injuries to the Workplace Rehabilitation Coordinator to enable early worker to contact regarding rehabilitation and to comply with the employer's duty to report injury to Work Cover/QBE.
- To develop, co-ordinate and monitor all Rehabilitation Plans for injured workers.
- To educate all workers about the Workplace Rehabilitation Policy and Procedures and what to expect when an injury occurs.
- To educate management on their roles and responsibilities for rehabilitation. To ensure this knowledge is part of the induction process.
- To promote CASSI's Workplace Rehabilitation Program internally, to maintain staff commitment, and externally to treating professionals to build a good working relationship and gain their trust and assistance.
- To keep a file for each worker undertaking rehabilitation, including all documents, correspondence and accounts and to ensure confidentiality of all information received.
- To keep accurate and objective case notes of all communication, actions, decisions and reasons for actions and decisions and to sign and date each notation.
- To maintain relevant records:
 - Duration of claims
 - Average cost of claims
 - Time between injury and first case notation
 - Evaluation of system by injured worker
- To ensure currency of the Workplace Rehabilitation Policy and Procedures.

When an Injury Occurs

1. Initiate and maintain contact with the worker as soon as possible after the injury has occurred:
 - Advise to seek medical attention as quickly as possible
 - Advise to lodge a Work Cover claim form during Doctors visit if required
 - Explain the Rehabilitation Program and return to work options.
 - Liaise with Administrative Officer regarding wages.
 - Try to identify need for early referral to other rehabilitation providers e.g., physiotherapist, occupational therapist, psychologist all of which require the treating Doctors written referral.
 - Offer ongoing assistance, encouragement, support and information.

2. Co-ordinate and liaise with the injured person, Doctor, management, co-workers, rehabilitation providers (if any) and Work Cover Queensland and/or QBE NSW to:
 - Determine suitable duties (from the Suitable Duties checklist on the medical certificate).
 - Develop a written Rehabilitation Plan in consultation with the injured worker.
 - Implement and co-ordinate the Rehabilitation plan after obtaining the treating Doctor's approval and information from Work Cover/QBE.
 - Monitor and evaluate progress and keep all parties informed, with the goal of returning the injured worker to usual duties.
 - Review plans and adjust duties – always with the treating Doctor's approval indicated by their signature on the plan.
 - Obtain worker's feedback by conducting a debriefing interview on completion of each case to evaluate the system and ensure its effectiveness.

Grievance Procedure in these cases

In the event that any issues associated with the implementation of the rehabilitation process cannot be resolved between CASSI and the worker, the worker has access to the relevant Work Cover Rehabilitation Counsellor.

DOCUMENTS

Letter to Doctor rework capability
Rehabilitation Plan
Wage Information
Work Capability Checklist
Suitable Duties
Return to Work Advice
Work Cover/QBE Checklist
Worker Evaluation Form
Incident Report
Hazard Report
Workplace Inspection Checklist
Employee Authorisation for Exchange of Info
New Service Users Safety Checklist
Incident/Hazard Report Form
Diary
Work Cover / and NSW Insurance notification

RECORDS

On appropriate file
Service User file
Staff file
Work Cover/QBE file
Workplace Health & Safety file

CROSS REFERENCES

Risk management
Workplace Health & Safety