



Core Standards Policy Manual for Participants

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Table of Contents

Section 1: Rights and Responsibilities	3
Aboriginal and Torres Strait Islander People Policy and Procedures	4
Person-Centred Supports Policy and Participant Service Charter of Right	7
Advocacy Support Policy and Procedure	13
Independence and Informed-Choice Decision-Making Policy	19
Violence, Abuse, Neglect, Exploitation and Discrimination	24
Section 2: Provider Governance and Operational Management	36
Corporate Governance Policy	37
Information Management Policy and Procedure	52
Consent Policy and Procedure	64
Complaints and Feedback Policy	68
Section 3: Provision of Supports	76
Access to Supports Policy and Procedures	78
Responsive Support Provision and Management Policy and Procedure	83
Service Agreement with Participants Policy and Procedure	88
Transition or Exit Policy and Procedure	91

Section 1: Rights and Responsibilities

<p>1.1 Person-Centred Supports</p>	<p>Aboriginal and Torres Strait Islander Policy and Procedure Person-Centred Supports Policy and Procedure Participant’s Charter of Rights Advocacy Policy and Procedure</p>
<p>1.4 Independence and Informed Choice</p>	<p>Independence and Informed Choice Decision-Making Policy and Procedure</p>
<p>1.5 Violence, Abuse, Neglect, Exploitation and Discrimination</p>	<p>Violence, Abuse, Neglect, Exploitation and Discrimination Policy and Procedure</p>

Aboriginal and Torres Strait Islander People Policy and Procedures

1.0 PURPOSE

- The Lakeside Rooms wishes to recognise the Traditional Owners of the Land and the Aboriginal Communities served by our service.
- The Lakeside Rooms will provide services and supports that meet the needs of Aboriginal and Torres Strait Islander people.
- To work cohesively with local Aboriginal and/or Torres Strait Islander people.
- The Lakeside Rooms to ensure workers are trained in culturally appropriate actions and requirements.

2.0 SCOPE

This policy is applicable to all persons who may have any contact with our participants.

3.0 POLICY

It is the policy of The Lakeside Rooms to create a safe and welcoming environment for all people. The intent of this policy is to ensure that individuals have the right to engage with their Aboriginal and Torres Strait Islander community members and to access the support required to meet their individual needs. If required frontline workers will collaborate with Aboriginal and Torres Strait Islander community members to support participants in the development and review of their support plans and activities.

4.0 PROCEDURE

Our inclusive approach will promote the cultural safety of Aboriginal and/or Torres Strait Islander People through engaging with the participant, their community and relevant stakeholders. Processes are designed to meet the needs and requirements of the participant.

A variety of procedures may be implemented as per the list below:

- Designing and using images that reflect indigenous symbols or pictures into brochures, on the website or located in the environment.
- Displaying a Statement of Traditional Owners.
- Clarifying if participants identify as an Aboriginal and Torres Strait Islander.
- Contacting and maintaining networks with local Aboriginal and Torres Strait Islander communities.
- Working with community networks for the benefit and support of the participant.
- Contacting the participant's family, extended family and community.
- Establishing communication processes for maintaining an individual's indigenous supports.
- Working with other services in a coordinated manner to enhance supports for the participant.
- Planning will include actions that promote cultural safety and connectedness and respect the cultural and spiritual identity of Aboriginal and Torres Strait Islanders.
- Encouraging and researching community events for the participants, then sharing this information with workers.
- Working with the local communities in the provision of services, referrals, consortia involvement and memorandums of understanding.

4.1 Advocacy information

All files of participants who identify as Aboriginal and Torres Strait Islander will be reviewed to ensure that we meet our inclusive approach obligations. The review will determine if:

1. Service access and support strategies are relevant for Aboriginal and/or Torres Strait Islander People.
2. Service involvement and links with the Aboriginal community and Aboriginal services are being provided, as relevant.
3. Their cultural needs are being documented in their support plans.
4. Strategies and supports are being implemented as per their individual plan.
5. Feedback is being gathered from Aboriginal and Torres Strait Islander people and frontline workers. Feedback will be related to the cultural competence of our service provision.

4.2 Workers and Volunteer Training

The Lakeside Rooms will train all workers and volunteers to ensure that all frontline workers are able to competently implement Aboriginal or Torres Strait Islander cultural competence strategies. The training aims to increase access to the service by Aboriginal and Torres Strait Islander people.

5.0 REFERENCES

- Human Rights and Equal Opportunity Commission Act 1986
- Disability Discrimination Act 1992 (Commonwealth)
- Racial Discrimination Act 1975
- Sex Discrimination Act 1984
- Privacy Act (1988)

NDIS Practice Standards and Quality Indicators 2018

Person-Centred Supports Policy and Participant Service Charter of Right

1.0 PURPOSE

The NDIS Commission aims to uphold the rights of people with disabilities, including the right to dignity and respect, and to live free from abuse, exploitation, and violence. This is in keeping [with Australia's commitment to the United Nations Convention on the Rights of Persons with Disabilities](#). [Our organisation has used this statement as the basis of our policy.](#)

The purpose of this policy is to empower people with disabilities to exercise choice and control in the support services they receive while ensuring appropriate protections are in place; and building the capacity of people with disabilities, their families, and their carers to make informed decisions about NDIS providers.

2.0 SCOPE

The policy applies to all workers and participants. It is aimed at informing participants of the rights.

3.0 POLICY

The Lakeside Rooms will provide supports that promotes, upholds and respects individual rights to freedom of expression, self-determination and decision-making. The Participant Service Charter outlines your rights, how you will be treated, and what you can expect from The Lakeside Rooms. This Charter also sets out your responsibilities, and how you can give feedback on any aspect of the service.

The Lakeside Rooms takes a person-centred and evidence-based approach to any services that we provide, where the participant, family or their advocate is primary to any decisions being made.

The Lakeside Rooms aims to work with our participants, their advocates, family members and other service providers as relevant, to provide the services to meet our participant's need, within the scope of our services.

We will provide support and work with community groups or education programs directly, or in partnership with other services. You can find information about our services on our website, The Lakeside Rooms or by asking one of our workers.

The Lakeside Rooms will work with other groups, services and programs either directly or in partnership to ensure that relevant supports are provided.

Our Charter of Rights will be given to participants in the form of an Information Pack and Easy Read Format using simple terminologies such as Your Rights, Your Responsibilities and Our Responsibilities are available by asking one of our workers and/or accessing on our website.

4.0 CHARTER OF RIGHTS

4.1 Your Rights

As an individual using our support services, you have many rights that you should be aware of. We recognise your rights and are here to support and assist you in exercising these rights and in achieving your goals. The Lakeside Rooms adopts a policy of non-discrimination regarding eligibility and entry to services, and in the provision of our support services to individuals.

You have the right to:

- Have access and supports that promote, uphold and respect your legal and human rights.
- Exercise informed choice and control.
- Freedom of expression, self-determination and decision-making.
- Access supports that respect your culture, diversity, values and beliefs.
- A service that respects your right to privacy and dignity.
- Be supported to make informed choices which will maximise independence.
- Access supports free from violence, abuse, neglect, exploitation or discrimination.
- Receive supports which are overseen by strong operational management.

- Access services which are safeguarded by The Lakeside Rooms well-managed risk and incident management system.
- Receive services from workers who are competent, qualified and have expertise in providing person-centred supports.
- Consent to the sharing of information between providers during the transition.
- Opt-out of giving information as required by NDIS.

4.2 Your Responsibilities

As an individual using our support services, there are a few things that we ask of you. The information below explains the responsibilities you have when using our services. We ask that you:

- Respect the rights of workers, ensuring their workplace is safe and healthy and free from harassment.
- Abide by the terms of your agreement with us.
- Understand that your needs may change, and with this, your services may need to change to meet your needs
- Accept responsibility for your actions and choices even though some decisions may involve risk.
- Tell us if you have problems with either our workers or services that you are receiving.
- Give us enough information to develop, deliver and review your Support Plan.
- Care for your own health and wellbeing as much as you are able.
- Provide us with information that will help us better meet your needs.
- Provide us with a minimum of 24 hours' notice when you will not be attending your appointment.
- Be aware that our workers are only authorised to perform the agreed number of hours and tasks outlined in your service agreement.
- Participate in safety assessments of your home, if support is provided in your home.
- Ensure pets are controlled during service provision, if support is provided in your home.
- Provide a smoke-free working environment, if support is provided in your home.
- Pay the agreed amount for the services provided.
- Tell us in writing (where able) and give us notice as per your Service Agreement that you intend to stop receiving services from us.

- To inform workers if you wish to opt-out when asked.

4.3 Your Right to give Feedback

The Lakeside Rooms values your feedback. This may be on something that we did well or something that we need to do better. Do not be silent; let us know you are not happy with the service you have received or believe you have not been treated fairly.

Here are several ways that you can do this:

1. Completing a Complaint/Feedback form or Client Feedback form
2. Talking directly to a worker
3. Ask to speak to a more senior person
4. Contacting the office on the phone
5. Anonymously

The Lakeside Rooms will resolve complaints openly, honestly and quickly. Your complaint and a response will be acknowledged within one (1) working day. (See our Complaints/ Feedback Policy and Procedures for our detailed process).

If you are not satisfied with the resolution of your complaint, you may contact an independent body such as:

Ph: 1800 035 544 (free call from landlines) or TTY 133 677.

<https://forms.business.gov.au/smartforms/servlet/SmartForm.html?formCode=PRD00-OCF>

4.4 NDIS Code of Conduct

Our team will provide supports or services to the participants, and will provide a quality service if you and your family and advocate;

- Provide complete and accurate information about yourself, and your situation
- Explain if there is a change in your health.
- Let your workers know if things change, or if you cannot keep an appointment or commitment.
- Complete consent forms, so we can work with your advocate (if applicable).

- Act respectfully and safely towards other people using the service, and towards our frontline workers.
- Provide feedback about the service, and how you think we could do things better for you.
- Report back to us if unhappy with our services, or if there is any matter of concern.

4.5 Our commitment to participants

The Lakeside Rooms takes a strengths-based, person-centred, holistic approach to care and support, where the participant or their advocate is primary to any decisions being made. Our team will ensure that your services are managed with respect and in consultation with you. When you are in contact with our organisation, we will:

- Always treat you with respect .
- Treat you fairly and without discrimination.
- Inform you of your rights and responsibilities through our orientation process, easy read documents and Information Packs.
- Protect your personal information and only use it for the right reasons.
- Involve you in decisions about the services that you access.
- Support you to connect with other services if needed.
- Tell you how to provide us with feedback on our service,
- Ensure your safety and undertake practices that prevent injury to you and others.
- Help you to access and use our services.
- Comply with your signed Service Agreement.
- Inform you of your rights and responsibilities.
- Arrange for an interpreter or other language services, if you need this.
- Be polite and respect your views, opinions, personal circumstances and cultural diversity.
- Provide you with advice and different options on other supports and services that may be available.
- Provide workers that have the appropriate skills and competencies to meet your needs.
- Treat you with dignity, fairness and respect, without discrimination or victimisation.
- Inform you how you can make a complaint and provide information on how we will respond to that complaint.
- Provide support and care that recognises and acknowledges each person's preferences, choices, interests, and capability.

- Support your rights to receive quality care, and support in an appropriate environment which promotes your participation.
- Provide services that meet or exceed relevant industry standards such as the NDIS Practice Standards and Quality Indicators, NDIS Rules and the Charter of Rights.

5.0 REFERENCES

- Participant Information Pack
- Easy Read Documents

6.0 LEGISLATION

- NDIS Practice Standards and Quality Indicators 2018
- NDIS Code of Practice Rules 2018
- NDIS (Complaints Management and Resolution) Rules 2019
- Convention on the Rights of Person with Disabilities

Advocacy Support Policy and Procedure

1.0 PURPOSE

The Lakeside Rooms recognises the importance of ensuring the participant's right to use an advocate or representative of their choice is maintained. Both participants and potential participants have the right to select and involve an advocate, or a representative of their choice, to participate or act on their behalf at any time.

2.0 SCOPE

This policy applies to all participants, workers, volunteers and stakeholders.

3.0 DEFINITION

Advocacy: is the active support for a cause or position and, in this context, it is an expression of support for a person who may find it difficult to speak for him or herself. It may include matters such as achieving social justice, improving a person's well-being, prevention of abusive and/or discriminatory treatment or stopping unjust and unfair treatment so that a person's fundamental needs and interests can be met.

Below is a list of types of advocacy:

1. *Individual Advocacy:* a one-on-one approach, aiming to prevent or address instances of discrimination or abuse.
2. *Systemic Advocacy:* working to influence or secure long-term changes to ensure the collective rights and interests of people with disabilities.
3. *Family Advocacy:* a parent or family member advocates with and on behalf of a family member with a disability.
4. *Citizen Advocacy:* matches people with disabilities with volunteers.
5. *Legal Advocacy:* upholds the rights and interests of individual people with disabilities by addressing the legal aspects of discrimination, abuse and neglect.
6. *Self-Advocacy:* supports people with disabilities to advocate for themselves, or as a group.

4.0 POLICY

All participants have the right to use an advocate of their choice to represent their interests and speak on their behalf regarding any aspect of the supports or services that they receive.

Workers will work cooperatively with the participant's nominated advocate and will show the same respect to the advocate as is shown to the participant. Where participants cannot advocate for themselves, it is The Lakeside Rooms' policy to ensure that the participant's interests are represented and supported using a substitute decision-maker.

4.1 Advocacy Principles

- The Lakeside Rooms will ensure that all workers receive training in the use of advocates.
- The Lakeside Rooms will maintain printed material on advocacy and advocacy services.
- The Lakeside Rooms will maintain local advocacy resource/contact lists.
- The Lakeside Rooms will work cooperatively with any nominated advocate chosen by the participant and show the same respect to the advocate, as is shown to the participant.
- The Lakeside Rooms will utilise a governance system to enable The Lakeside Rooms to identify where a Participant needs advocacy.

5.0 PROCEDURE

5.1 Initial Assessment (Participant without an Advocate)

- Discuss the participant's right to appoint an advocate at any time and to have an advocate present to speak on their behalf.
- Provide the participant with advocacy information.
- Explain to the participant their rights regarding advocacy as per the The Lakeside Rooms' Service Agreement and Charter of Rights, and the NDIS Practice Standards and Quality Indicators 2018.

- Advise the Participant that if they wish to utilise advocacy services, then The Lakeside Rooms can assist them in contacting any of these services.
- Provide the form; "Authority to Act as an Advocate" to the Participant. In the event that they decide to utilise the services of an advocate. The completed and signed form is kept in the participant's file.
- Discuss and document any specific communication issues or protocols to be used; between the service and the advocate (such as email, phone or any other method).
- Inform the participant that they can withdraw approval for an advocate to act on their behalf at any time.

5.2 Initial Assessment (Participants with Advocates/Representatives)

- Prior to Initial Assessment
 - At initial contact with the participant ensure that the person is informed of their right to an advocate and record the advocate's details if the individual has an advocate.
 - Advise the Participant of the need to complete the Authority to Act as an Advocate form and provide this form to the Participant.
 - Contact the advocate to ensure they are aware that they have been nominated as an advocate and agree to do so.
 - The completed Authority to Act as an Advocate form is kept in the participant's file.
 - Ensure the potential participant is aware of their advocacy rights, including the right to have an advocate present for all assessments, meetings and communication between the Participant and The Lakeside Rooms.
 - Schedule the Participant's initial assessment at a time and date that will enable the advocate to be present.
 - Ensure an identified Advocate is present at the assessment.
- At initial assessment
 - If not already received, request the completion of the Authority to Act as an Advocate form. Explain that this must be completed for The Lakeside Rooms to formally recognise the nominated person as the Participant's advocate.
 - Gather information about the advocate, such as contact details and methodology.

- Explain that the Participant has the right to change their advocate at any time. Changes should be documented with written confirmation from the Participant using the Authority to Act as an Advocate form.

5.3 Working with Advocates

- Clearly identify the existence of an Advocate on the Participant's file.
- Discuss and document any specific communication issues or protocols to be used; between the service and the advocate.
- Communicate with a Participant's advocate and involve them in the process of goal setting, planning service responses, and / or referrals for additional or alternative services.
- Provide the Advocate with ongoing information regarding the health and well-being of the Participant; as agreed.

5.4 Continuing work with Advocates

- Remind Participants of their right to have (or change) an advocate by providing them written and verbal information during reassessments, visits or meetings.
- Remind the participants of their right to have (or change) an advocate, during each annual review of services or via written communication.
- Communicate and work cooperatively with the advocate.
- Refer Participants who are assessed as "not able to manage their service" and who have no other advocate to the Department of Justice and Attorney General, Office of the Public Advocate as appropriate

Note: there is a web-link to access advocacy services which require the input of a postcode. The Lakeside Rooms will guide and assist participants in this matter.

<https://disabilityadvocacyfinder.dss.gov.au/disability/ndap/>

6.0 RELATED DOCUMENTS

- Authority to Act as an Advocate

7.0 REFERENCES

- National Disability Insurance Agency
- NDIS Practice Standards and Quality Indicators 2018
- Disability Inclusion Act and Regulation 2014
- Disability Inclusion Act 2014 (NSW)
- Privacy Act (1988)

8.0 ADVOCACY INFORMATION

- Australian Centre for Disability Law – disabilitylaw.org.au
- Autism Asperger’s Advocacy Australia (A4) - a4.org.au
- The Autistic Self Advocacy Network of Australia and New Zealand - www.asan-au.org
- Blind Citizens Australia - bca.org.au
- Brain Injury Australia - braininjuryaustralia.org.au
- Children with Disability Australia - cda.org.au
- Deaf Australia - deafau.org.au
- Deafness Forum of Australia - deafnessforum.org.au
- Disability Advocacy Network Australia (DANA) - dana.org.au
- First Peoples Disability Network (FPDN) - fpdn.org.au
- Human Rights Council of Australia – hrca.org.au
- Intellectual Disability Rights Service (IDRS) - idrs.org.au
- Mental Health Australia - mhaustralia.org
- National Council on Intellectual Disability (NCID) - ncid.org.au
- National Ethnic Disability Alliance (NEDA) - neda.org.au
- Physical Disability Australia (PDA) - pda.org.au

- People with disabilities Australia pwd.org.au
- Short Statured People of Australia - sspa.org.au
- Women with Disabilities Australia (WWDA) - wwda.org.au

8.1 Queensland Advocacy Providers

- Amparo Advocacy Inc.—Building 1, Level 2, 53 Prospect Road, Gaythorne, QLD; Tel: (07) 3354 4900
- Capricorn Citizen Advocacy Inc.—Shop 3/118 George Street, Rockhampton, QLD; Tel: (07) 4922 0299
- Down Syndrome Association Of Qld Inc.—282 Workersord Road, Workersord, QLD; Tel: (07) 3356 6655
- Gold Coast Disability Advocacy Inc.—Shop 6 18 Ferry Street (65.49 km) 4211 Nerang, QLD; (07) 5564 0355
- Independent Advocacy In The Tropics Inc.—Office 2/179-181 Ross River Road Mundingburra, QLD; Tel: (07) 4725 2505
- Ipswich Regional Advocacy Services Inc.—40 South St, Ipswich QLD 4305; Tel: (07) 3281 5409
- Mackay Advocacy Inc.—78 Victoria Street, Mackay, QLD; Tel: (07) 49578710
- Queenslanders With Disability Network Inc.—338 Turbot Street, Spring Hill, QLD; Tel: (07) 3252 8566
- Rights In Action Inc.—Ground Floor, Professional House, 88 Abbott St, Cairns, QLD; Tel: (07) 4031 7377
- Speaking Up For You Inc.—The Precinct, Unit F2, 1st Floor, 12 Browning St, West End, QLD; Tel: (07) 3255 3638
- Spinal Life Australia Ltd.—109 Logan Rd, Woolloongabba, QLD; Tel: 1300 774 625
- Synapse Australia Ltd.—Level 1/262 Montague Rd, West End, QLD; Tel: 1800 673 074
- TASC National Ltd.—223 Hume Street, Toowoomba, QLD; Tel: 1300 008 272
- Aged and Disability Advocacy Australia Limited—121 Copperfield Street, Geebung, QLD; Tel: 1800 818 338

Independence and Informed-Choice Decision-Making Policy

1.0 PURPOSE

To ensure that The Lakeside Rooms policy is underpinned by international, national and state obligations in relation to the human rights of people with disabilities. Article 12 of the *United Nations Convention on the Rights of Persons with Disabilities* is the critical driver behind supported decision-making.

To support participants to make informed choices, exercise control and maximise their independence relating to the supports provided.

Quality decision-making will underpin the long-term effectiveness of the participant's supports and agreements. It facilitates the achievement of strategic goals, the maximising of participant involvement, well-being and productivity of workers, and the enhancement of participant outcomes.

2.0 SCOPE

This policy applies to all The Lakeside Rooms workers and participants accessing our services.

3.0 POLICY

This policy assumes that each participant has decision-making capacity, unless proven otherwise, and acknowledges that each participant's capacity varies for each decision and situation. All participants have the dignity of risk to make their own decisions.

In instances where a participant's decision-making capacity is in doubt, this policy provides direction regarding the determination of capacity and consent, supporting and facilitating decision-making, and making a decision on behalf of that person where required.

This policy will eliminate the risk of decisions being made about a participant’s life without their involvement or against their actual or anticipated wishes. Decisions must be made with the consent of the participant.

The Lakeside Rooms puts choice and control squarely in the hands of people with disabilities, their families and carers.

The Lakeside Rooms will provide information in an easy read format for participants who require this communication style.

4.0 DEFINITION

Terms	Definition
Decision-making	The action or process of making important decisions Process of identifying and choosing alternatives based on the values, preferences and beliefs of the decision-maker
Informed-choice	A person chooses services based on knowledge of diagnostic tests or treatments, knowing the details benefits, risks and expected outcomes of their choice
Dignity of Risk	The right to take risks when engaging in life experiences and the right to fail in taking these
Advocate	A person who puts a case on someone else's behalf
Autonomy	The capacity to decide for oneself and pursue a course of action in one's life, often regardless of any moral content

5.0 PROCEDURE

5.1 Advocate

The Lakeside Rooms will inform all participants from their initial booking with The Lakeside Rooms that they have the right to access an advocate (including an independent advocate) of their choosing. They will be informed that it is their right to have the advocate present at any time that they are in contact with The Lakeside Rooms.

5.2 Decision-making and Choice

During the development of the Service Agreement and during all ongoing interactions with each participant, The Lakeside Rooms workers will:

- Inform the participants and their advocate of their options regarding their supports.
- Inform the participants and their advocate of any risks to themselves or others regarding their options.
- Consult and collaborate with the participant and their advocates by providing current and relevant information to allow the participant to make decisions.
- Give the participant enough time to absorb and understand all relevant information before and during the decision-making process.
- Provide information in an Easy Read format, when appropriate.
- Assess the participant's service requirements against their NDIS Plan, to plan and provide proper support and design appropriate strategies with the participant, family and advocate.
- Undertake review meetings where the participant, family and advocates have input.
- Plan with the participant, family and advocates when the participant decides to exit from The Lakeside Rooms.

The Lakeside Rooms recognises that participants have the right to dignity of risk in their decision-making.

Participants will be informed of:

- The various relevant options that may support their needs, prior to any decisions being made.

- The benefits of each of the relevant options.
- Any of the risks linked to each of the relevant options.

Participants will be given time to be able to absorb and make the appropriate decisions based on the risks involved. If the participant wishes to undertake an activity that has been deemed by The Lakeside Rooms as a risk to the health and safety of the participant then, our team will:

- Inform the participant that if they wish to continue that this is their choice.
- Develop a Risk Management Strategy to reduce the possible risk.
- Notes are kept in the participant's file, stating that they were informed that activity has risks that may be dangerous.

5.3 Autonomy

All participants have the right to autonomy, which is respect by all workers. Participants can make decisions for themselves and pursue the actions that they wish. Participants have the right to make choices based on who they are and what they want to do. Frontline workers must allow the participant their right to intimacy and sexual expression (in the context of lawful behaviour).

5.4 Time

The Lakeside Rooms recognises that some decisions require time to review the different options. Participants will need to seek advice from their networks and relevant stakeholders. Workers will not rush participants at any stage during the support provision and decision-making process.

5.5 Documentation

The Lakeside Rooms requires workers to record all information and options given to each participant. Decisions are to be recorded in the participant's file.

6.0 RELATED DOCUMENTS

- Support Plan

- Participant File Notes
- Transition and Exit Policy and Procedure
- Access to Supports Policy and Procedure
- Support Plan Policy and Procedure
- Responsive Support Provision and Support Management Policy and Procedure

7.0 REFERENCES

- National Disability Insurance Scheme (Practice Standards and Quality Indicators) 2018
- United Nations Convention on the Rights of Persons with Disabilities

Violence, Abuse, Neglect, Exploitation and Discrimination

1.0 PURPOSE

The Lakeside Rooms recognises the right of participants to feel safe and to live in an environment where they are protected from assault, neglect, exploitation, discrimination or any other form of abuse. People with disabilities, children and young people are one of the most vulnerable groups in our society. It is essential that The Lakeside Rooms identify, consult and respond to instances where persons with disabilities, children or young persons are at risk of significant harm.

Common reasons for people with disabilities, children and young people to be at risk of significant harm include:

- Domestic and family violence
- Physical, sexual and/or emotional abuse
- Neglect.

The impact of violence, abuse and neglect can span across all domains of a person's development and life experiences. People who experience violence, abuse and neglect are more likely to have problems with:

- Learning and development
- Physical and mental health
- Behaviour

The purpose of this policy is to prevent and mitigate the effects of violence, abuse and neglect on participants through training and implementing process to inform workers and protect participants what are at risk of significant harm.

2.0 SCOPE

The Lakeside Rooms will encourage and support any person who has witnessed the abuse of a service user or, who suspects that abuse has occurred, to make a report and be confident of doing so without fear of retribution.

3.0 DEFINITIONS

	Description
Abuse and Neglect	Any behaviour that is outside the norms of conduct and entails a substantial risk of causing physical or emotional harm to a person. Such behaviours may be intentional or unintentional and can include acts of omission (i.e. neglect) and commission (i.e. abuse).
Discrimination	Treating, or proposing to treat someone unfavourably because of a personal characteristic protected by the law. Discrimination includes bullying someone because of a protected characteristic.
Exploitation	The action or fact of mistreating someone to benefit from their work. The action of making use of and benefiting from resources.
Violence	Violent behaviour by a person towards another can include abusive behaviour that is physical, sexual, intimidating and forceful. People with a disability are more likely to experience violence from a carer or family member.

3.1 Types of Abuse

	Signs and Symptoms	Causes
Physical Abuse	Bruising, lacerations, welts, rashes, broken or healing bones, burns, weight loss, facial swelling, missing teeth, pain or restricted movements, crying, acting fearful, agitation, drowsiness, hair loss and/or poor physical well-being	Hitting, slapping, pushing, punching and/or burning, which entails an incident that is non-accidental resulting in pain or injury.
Psychological / Emotional Abuse	Loss of interest in self-care, helplessness, withdrawn, apathy, insomnia, fearfulness, reluctant to communicate openly, chooses not to maintain eye contact, paranoia and confusion.	Intimidation, humiliation, harassment, threatening, sleep deprivation, withholding affection, and/or not allowing the person to maintain their decision-making powers, which leads to a pattern repeated over time.
Sexual Abuse	Unexplained sexual transmitted disease, vaginal/anal bleeding, fearful of certain people or places, bruising to genital areas inner thigh or around breasts, anxiety, torn or bloody underclothes, difficulty in walking or sitting, change in sleep pattern and repeating nightmares.	Rape (penetration and/or oral-genital contact), interest in older person's bodies, inappropriate comments and sexual references, inappropriate (possibly painful) administration of enemas or genital cleansing, indecent assault, sexual harassment which is mainly about violence and power over another person, rather than sexual pleasure

Neglect	Poor hygiene or personal care, unkempt appearance, lack of personal items, absence of health aids, weight loss, agitation, inappropriate clothing and/or lack of food.	The intentional failure to provide basic life necessities.
Domestic and family abuse	Any type of controlling, bullying, threatening or violent behaviour between people in a relationship including emotional, physical, sexual, financial or psychological abuse.	Many experts believe psychopathology . Witnessing abuse as the norm, or being abused, destroys the child's ability to trust others and undermines his or her ability to control emotion

4.0 POLICY

This policy aims to:

- Take a preventative, proactive and participatory approach to participant safety;
- Value and empower the participant to contribute to decisions which affect their lives;
- Foster a culture of openness that supports all persons to disclose the risks of harm to participant safety.
- Respect diversity in cultures and child-rearing practices while keeping the participant's safety paramount;
- Provide training to Workers on appropriate conduct and behaviour towards participants;
- Engage only the most suitable people to work with participants and have high-quality Workers, volunteer supervision and professional development;
- Ensure the participants know whom to talk with if they are worried or are feeling unsafe and that they are comfortable and encouraged to raise such issues;
- Report suspected abuse, neglect or mistreatment promptly to the appropriate authorities;
- Share information appropriately and lawfully with other organisations where the safety and wellbeing of the participant is at risk; and
- Value the input of and communicate regularly with families and advocates.

All incidents that meet the criteria of a Reportable Incident, the Reportable Incident, Accident and Emergency Policy and Procedure will apply.

4.1 Statement of Commitment to Safety

The Lakeside Rooms is committed to the safety and wellbeing of all participants. This commitment is the primary focus of our support and decision-making. The Lakeside Rooms is committed to providing a safe environment where participants are safe and feel safe. Their voices are heard and included in decisions that affect their lives. Attention is to be paid to the cultural safety of participant from culturally and/or linguistically diverse backgrounds.

Every person involved in The Lakeside Rooms has a responsibility to understand the critical and specific role they play both, individually and collectively, to ensure that the wellbeing and safety of all participant and young people are at the forefront of all they do and every decision they make.

4.2 Safe Code of Conduct

The Lakeside Rooms is committed to the safety and wellbeing of participants. Our business recognises the importance of, and responsibility for, ensuring our environment is a safe, supportive and enriching environment which respects and fosters the dignity and self-esteem of all people, and enables them to thrive.

This Code of Conduct aims to protect both and participants and to reduce any opportunities for abuse or harm to occur. It also assists in understanding how to avoid or better manage risky behaviours and situations. It is intended to complement child protection legislation, disability legislation, policies and procedures and professional standards, codes or ethics as these apply to workers and other personnel.

The Lakeside Rooms management support implementation and monitoring of the Code of Conduct and will plan, implement and monitor arrangements to provide inclusive and safe environments.

All Workers, Volunteers and any other community members involved in participant-related work are required to comply with the Code of Conduct by observing expectations for appropriate behaviour below. The Code of Conduct applies in all situations, including planned activities and the use of digital technology and social media.

4.3 Acceptable Behaviours

Workers or any other persons involved with participant-related work are responsible for supporting and promoting the safety of participant by:

- Always upholding the Lakeside Rooms Statement of Commitment to the participant's safety.
- Treating the participant and their families and advocates with respect both within the environment and outside activities as part of normal social and community activities.
- Listening and responding to the views and concerns of the participant, particularly if they are informing that they or another person has been abused; or that they are worried about their safety or the safety of another participant.
- Promoting the cultural safety, participation and empowerment of Aboriginal and Torres Strait Islander students through interactions with their community leaders and members.
- Promoting the cultural safety, participation and empowerment of people with culturally and/or linguistically diverse backgrounds through engagement with the community accessing the service.
- Promoting the safety, participation and empowerment of people with disabilities
- Reporting any allegations of abuse or any personal safety concerns to management.
- Understanding and complying with all reporting or disclosure obligations (including State Mandatory Reporting) as they relate to protecting the participant from harm or abuse.
- Maintaining the right to live in a safe environment by promoting and informing the participants of their rights.
- If abuse is suspected, ensuring as quickly as possible that the participants are safe and protected from harm.
- Identify self upon entering premises and using required identification.

4.4 Unacceptable Behaviours

As frontline workers, volunteers and any community member involved in participant-related work, we must not:

- Ignore or disregard any concerns, suspicions or disclosures of abuse.
- Develop a relationship with any participant that could be viewed as favouritism or amount to 'grooming' behaviour (for example, offering gifts).
-

- Exhibit behaviours or engage in activities with participants that may be interpreted as abusive and not justified by the educational, therapeutic, or service delivery context.
- Ignore behaviours by other adults towards young participants when they are overly familiar or inappropriate.
- Discuss the content of an intimate nature or use sexual innuendo with participants, except where it occurs relevantly in the context of parental guidance or a therapeutic setting.
- Treat a participant unfavourably because of their disability, age, gender, race, culture, vulnerability, sexuality or ethnicity.
- Communicate directly with an underage participant through personal or private contact channels (including by social media, email, instant messaging, texting) except where that communication is reasonable in all the circumstances, related to work or activities or where there is a safety concern or other urgent matter.

4.5 Screening, Supervising, Training and Human Resource Practices to Reduce Risk

The Workers will be required to undertake checks including both Disability Worker Checks, relevant Police and Working with Children Checks, and Mandatory Worker Orientation Module. Records are maintained in their personnel file.

5.0 PROCEDURE

5.1 Strategies to Identify and Reduce or Remove Risk of Harm

The Lakeside Rooms recognise that creating a safe organisation begins with a clear understanding of the potential risks to the participant and other participants in an organisation's setting, including what could go wrong, and what you can do to reduce or remove these risks.

To reduce the likelihood of harm The Lakeside Rooms will consider, define and acted against its organisational risks.

These strategies include:

- Thinking about the organisation, its activities and the services it provides to participants,

- Planning how to make activities as safe as possible,
- Develop a safety plan for individuals who require additional supports,
- Supporting participants with disabilities to understand plans and safety procedures in a manner that supports their understanding,
- Informing participants that have the right to live in a safe environment,
- Being proactive to reduce the likelihood of risks.

5.2 Reporting Violence, Abuse, Neglect, Exploitation and Discrimination

A report must be made if:

- A participant shows a change in behaviour or mood that may indicate they are being abused.
- You observe someone behaving towards a participant in a way that makes you feel uncomfortable.
- A participant tells you that they are being abused by another person.
- A person tells you that they are abusing a participant.
- A participant or visitor tells you that they have observed abusive acts.
- A participant informs that they feel discriminated against. (e.g. language and actions)
- A participant presents as unkempt or seeking food.
- There is evidence of unexplained bruising or similar.
- You observe an action or inaction that may be considered abusive.
- You suspect or have any reason to believe a participant is being abused

Failure to report an abusive situation may result in a Criminal Offence

5.3 How to Report

Practice Manager will review the information and phone the Police to inform them of abuse. Note: for children see Working the Children Policy and Procedure for all other participants, the Police will be contacted.

5.4 Details to Provide

The Practice Manager will give the following information to the authorities, including all the current information:

- Participant's name, age, date of birth, address
- Description of injury, abuse and/or neglect (current and previous)
- The participant's current situation
- The location of the participant and alleged perpetrator (if known)
- Explanation of when and how did you find out about the abuse.

5.5 Investigating Allegation or Incident

The Practice Manager undertakes a review of the allegation or incident by:

1. Gathering data from relevant workers/worker
2. Analyse by determining what occurred, how it occurred, and who was involved.
3. Determine the effect on the participant
4. Consult with relevant stakeholders – do not seek information from children (this is a specialist role within the authorities to whom the incident is reported).
5. Inform the participant or their family that they can access an advocate for support.
6. Review the outcome against practices
7. Undertake action to prevent the incident from occurring

5.6 Support the Participant

Reported allegations or incidents require the Practice Manager to gather all the relevant information and make a report to the relevant authority such as the Police or via the State's reporting process.

Offer support to the participant relevant to the allegation or incident. Discuss with the participant if they would like to have an advocate.

5.7 Documentation

- Record all allegations and incidents in the Incident Register
- Complete Incident Investigation Form if required

- Reports to be included in the participant's file
- Maintain records for seven (7) years.

6.0 RELATED DOCUMENTS

- Incident Form
- Code of Ethics and Conduct Form
- Participant Notes
- Risk Management Form
- Zero Tolerance Policies and Procedures
- Working with Children Policy and Procedure

7.0 REFERENCES

- United Nations Convention on the Rights of the Child 1989
- The National Framework for Protecting Australia's Children
- NDIS Quality and Safeguards Practice Standards and Quality Indicators
- NDIS (Incident Management and Reportable Incidents) Rules 2018

Section 2: Provider Governance and Operational Management

2.1 Governance and Operational Management	Corporate Governance Policy
2.4 Information Management (3.2 Support Planning)	Information Management Policy and Procedure Consent Policy and Procedure
2.5 Feedback and Complaints Management	Complaints and Feedback Policy and Procedure

Corporate Governance Policy

1.0 PURPOSE

Corporate governance is a driver of the performance of the company. Governance refers to the framework of rules, relationships, systems and processes by which an enterprise is directed, controlled and held to account and whereby authority within an organisation is exercised and maintained.

The Lakeside Rooms acknowledges that the company is privately held and the liability of the shareholders to pay the debts of the company is limited by the number of shares.

The Lakeside Rooms is committed to providing a high-quality service to participants and maintaining business practices that demonstrate high standards of corporate governance.

The purpose of this policy is to:

- Ensure the Company's business operates in accordance with legal, regulatory and company standards.
- Establish a framework for corporate governance that promotes transparency and safeguards against individual's unethical or unlawful practice.
- Outline control measures that govern the internal and external actions of managers, Workers, Contractors and / or any person who is conducting business with The Lakeside Rooms.

2.0 SCOPE

Principal accountability and approaches to corporate governance are to:

- Fulfil its duty to all The Lakeside Rooms' stakeholders including Participants, Participant's Representatives, Workers, Contractors and any person conducting business with the Lakeside Rooms.
- Provide services of value to its Participants.
- Provide meaningful employment for workers, and
- Contribute to the welfare of the community

3.0 COMPANY DETAILS

3.1 The Lakeside Rooms Business Details

Business Name:	The Lakeside Rooms
Date Registered:	5.12.2000
ABN:	54 095 303 361
Domain name:	www.lakesiderooms.com.au
Licences and Permits:	NDIS Registered Service Provider
Products/services:	Therapeutic Supports; Specialist Positive Behaviour Support; Support Coordination; Assistance In Coordinating Or Managing Life Stages, Transitions And Supports; Management of Funding for Supports
Premises:	Level 3, Building 3 Lakehouse Corporate Space 337/34-36 Glenferrie Drive ROBINA QLD 4226
Is this premises rented or owned?	Rented

3.2 Insurance

Workers compensation:	Workcover Queensland
Public liability insurance:	AIG Australia Limited
Professional indemnity:	various

3.3 Business Focus

3.3.1 Vision and Mission

OUR VISION IS:

The aim of the Lakeside Rooms is to provide a welcoming, safe, private and comfortable environment for clients and professionals. Its philosophy is to support ethical, collaborative clinical practice. The Lakeside Rooms intends to build upon the high quality services offered, participate in innovative research and the provision of group programs.

MISSION STATEMENT (the vision of the organisation is underpinned by the following):

To maintain provision of quality rooms for long term, stable independent practitioners and their clients.

3.3.2 Commitment to Quality:

The Lakeside Rooms is committed to providing high-quality services to its participants in a supportive environment. This commitment is in line with the National Disability Insurance Service requirements.

The Lakeside Rooms will use information from the management of Continuous Improvement, Complaints and Feedback, Incidents, Work Health and Safety, Information Feedback and Risk Management to adjust our policies and practices to ensure that we meet participant's and community's requirements.

The Lakeside Rooms will seek feedback from participants and community to ensure that we are meeting their requirements and to provide high quality and responsive service.

3.3.3 Target Group

There are two (2) target groups within the community in which we work. These include the participants and the service providers, including:

1. Individual with special needs, that require support.
2. Disability services organisations that are looking for support for their participants.

3. General Public
4. Organisations that are looking for support for their clients.

3.3.4 Services Provided

The Lakeside Rooms provides the following support services for Participants with a disability:

- Therapeutic Supports; Specialist Positive Behaviour Support; Support Coordination; Assistance In Coordinating Or Managing Life Stages, Transitions And Supports; Management of Funding for Supports

3.4 Management and Reporting Structure

All reporting is based on the management structure as outlined in the organisation chart shown below.

3.5 Key Personnel

The following workers are employed / contracted in our organisation:

- Practice Manager
- Administration workers
- Support Coordination workers
- Plan Manager
- Therapists

In addition, we engage specialist consultants, contractors to support business functions and assist with a range of Participant Support services, respectively.

Knowledge, skills and experiences of all partners and key personnel who have an influence on the company are reviewed, to ascertain if any additional training is to be undertaken. Any additional training will address the identified gaps. All roles would be risk assessed to meet NDIS requirements.

3.6 Performance Planning and Review

The planning and review process will be input into Human Resource Policies and Procedures. The Lakeside Rooms will monitor and review the performance of workers on an annual basis to:

- Determine performance matching the current role description.
- Evaluate that worker's performance meets the needs of the participants.
- Establish additional training to meet changes in contemporary practices.
- Provide support to workers to meet the required level of supports, and
- Match skills and knowledge to the target audience.

3.7 Conflict of Interest

All key personnel and workers must inform The Lakeside Rooms' management regarding any situation in which that person will derive personal benefit from actions or decisions made in their official capacity. The person concerned must complete a Conflict of Interest form.

4.0 PROCEDURE

4.1 Corporate Governance Principles

- The Lakeside Rooms recognises that the company is privately held and the liability of the shareholders to pay the debts of the company is limited by the number of shares.
- The Lakeside Rooms will be managed to ensure the best interests of the shareholders to remain viable and productive.
- Services are monitored, reviewed and improved.
- Risk management is undertaken and reviewed.
- Continuous improvement strategies are undertaken and implemented.
- Review and audit systems, policies and procedures.
- The planning process to include community engagement.
- Manage human resource requirement to ensure that our services meet the participant and community requirements including NDIS risk assessed role requirements.
- Provide additional training and supervision to our workers as needed.

- Meet all contractual obligations.
- Financial and funding arrangements are managed and met

4.2 Financial Management

The Lakeside Rooms will undertake all requirements linked to contractual arrangements.

The Lakeside Rooms meets both legal and contractual requirements. This may include an Audited Financial Report and Annual Acquittal Statement and, if required, six-monthly Financial Acquittal Statements.

An Asset Register will be maintained with a list of all current assets. This will allow for additional purchases as required. Building and property will be reviewed to ensure that premises meet the current requirements of their business. If additional sites are required, then an analysis of costing will be undertaken

4.2.1 Business Financial Management

Roles and Tasks:

- Financial roles and responsibilities are determined by The Lakeside Rooms.
- An accountant will be accessed to complete the required financial compliance and obligations.
- Financial decisions are the responsibility of The Lakeside Rooms.

4.2.2 Business Financial Management Practices

The following practices apply to financial management, including the recording of the business earning separately and being documented as a legitimate enterprise, with a clear revenue stream and records of deductible business expenses. As documentation and organisation of information about company transactions will be used to facilitate financial management for tax purposes.

4.2.2.1 Bank accounts

All bank accounts are maintained. Separate bank accounts are maintained for business and private purposes.

4.2.2.2 Credit Cards

Cardholders must only use a The Lakeside Rooms Corporate Credit Card for official The Lakeside Rooms business activities only.

4.2.2.3 Budget

An annual budget is developed by The Lakeside Rooms, supported by the financial advisor.

4.2.2.4 Books of Accounts

The Lakeside Rooms is responsible for maintaining accounts, assisting the financial advisor in the preparation of the annual budget and for preparing monthly, quarterly and annual financial reports.

The Lakeside Rooms or their delegate is responsible for processing all receipts and payments.

4.2.2.5 Income

All monies received are receipted and recorded in the electronic financial system. Receipts and a banking statement are printed from the electronic financial system.

4.2.2.6 Payments

All payments (except petty cash) are made by electronic transfer.

4.2.2.7 Recurrent payments

Recurrent payments; wherever possible, are made electronically.

4.2.2.8 Supplier accounts

Wherever accounts are established with suppliers and purchases charged to the accounts. Accounts are paid in full, within the required terms for payment, on receipt of the statement or invoice.

4.2.2.9 Asset Register

The Asset Register will list the assets owned by The Lakeside Rooms. It will contain pertinent details about each fixed asset to track their value and physical location. The register will show the quantity and value of items such as office equipment, motor vehicles, furniture, computers, communications systems and equipment. (see "Asset Register" form)

4.2.2.10 Reconciliations and ATO reports

The following reconciliations and ATO reports are completed at the end of each month:

- All banks accounts are reconciled against bank statements.
- The Instalment Activity Statement is completed and forwarded to the ATO.

The following reconciliations and ATO reports are completed at the end of each quarter:

- The Business Activity Statement is completed and forwarded to the ATO.
- Superannuation Guarantee contributions are reconciled, and payments made.

The following reconciliations and ATO reports are completed at the end of each year:

- Books of accounts are balanced and closed off.
- Wages are reconciled, and Payment Summaries completed and forwarded to workers and the ATO.
- Audit reports are prepared.

4.2.2.11 Audit

Annual Acquittal Statements and Audited Financial Reports will be forwarded as per contractual requirements to the relevant government bodies. If the business grows to more than \$50 000 000.00, then Financial Acquittal Statements will be forwarded to relevant authorities and an annual audit may undertaken each year by a qualified external Auditor.

4.2.2.12 Applying for Funds

The following applies to all applications for funding:

- The Lakeside Rooms must adhere to the NDIA Price Guide or any other Agency pricing arrangements and guidelines as in force from time to time.
- The Lakeside Rooms must declare relevant prices, any notice periods or cancellation terms to Participants before delivering a service. Participants are not bound to engage the services of The Lakeside Rooms after their prices have been stated.
- The Lakeside Rooms can make a payment request once that support has been delivered or provided.
- No other charges are to be added to the cost of the support, including credit card surcharges, or any additional fees including any 'gap' fees, late payment fees or cancellation fees. These requirements apply to all The Lakeside Rooms, regardless of whether the participant self-manages their funds, or managed by The Lakeside Rooms, or managed by the Agency.
- A claim for payment is to be submitted within a reasonable time (and no later than 60 days from the end of the Service Booking) to the Participant or the NDIS.
- The Lakeside Rooms will not charge cancellation fees, except when provided explicitly in the NDIA Price Guide.
- The Lakeside Rooms and Participants (except for those that are self-managing) cannot contract out of the Price Guide. Where there are any inconsistencies between the Service Agreement and the Price Guide, the Price Guide prevails.
- Wherever required The Lakeside Rooms will obtain a quote for services and have this approved by the Participant.

4.2.2.13 Participant Fees and Payments

4.2.2.13.1 Payments and Pricing (NDIS)

- The Lakeside Rooms must adhere to the NDIA Price Guide or any other Agency pricing arrangements and guidelines as in force from time to time.

- The Lakeside Rooms must declare relevant prices, any notice periods or cancellation terms to Participants before delivering a service. Participants are not bound to engage the services of The Lakeside Rooms after their prices have been declared.
- The Lakeside Rooms can make a payment request once that support has been delivered or provided.
- No other charges are to be added to the cost of the support, including credit card surcharges, or any additional fees including any 'gap' fees, late payment fees or cancellation fees. These requirements apply to all The Lakeside Rooms participants whether the participant self-manages their funds, or it is managed by a Plan Manager or the Agency.
- A claim for payment is to be submitted within a reasonable time (and no later than 60 days from the end of the Service Booking) to the Participant or the NDIS.
- The Lakeside Rooms will not charge cancellation fees except when provided explicitly in the NDIA Price Guide.
- The Lakeside Rooms and Participants (except for those that are self-managing) cannot contract out of the Price Guide. Where there are any inconsistencies between the Service Agreement and the Price Guide, the Price Guide prevails.
- Where required The Lakeside Rooms will obtain a quote for services and have this approved by the Participant.

4.3 Monitoring, Evaluation and Reporting

The Lakeside Rooms exhibits a continuous improvement culture to facilitate the improvement of its services and processes. Stakeholder's input is pursued and, when received, it is reviewed immediately.

All The Lakeside Rooms' policies are reviewed annually and take into account the input from all stakeholders. Policy reviews also take into account the results attained through monitoring and evaluation and changes in legislation.

4.4 Strategic Plan

The planning process involves:

Planning Activity	Notes	When
Evaluation	<p>Review against the vision of creating unique cultural environment, community environment with authentic care and support, focusing locally, developing workers.</p> <p>Review of the current political climate and its influence on business practices and forward planning.</p> <p>Organisation's performance including risk and continuous improvement.</p> <p>Undertake situational analysis as per Risks and Continuous Improvement.</p>	Every three years
Planning	<p>Problem identification and problem resolution processes to identify key organisational challenges, goals, strategies, timeframes, persons responsible and evaluation methods.</p> <p>Consultation is undertaken with the community and community priorities are considered in line with the organisation's vision and mission.</p> <p>Use evaluations to adjust forward planning - political, social, financial Continuous improvement recommendations are to be fed back into plan</p> <p>Ensure that any planning and future planning matches our mission of creating unique cultural environment, community environment with authentic care and support, focusing locally, developing workers</p>	Every three years

Planning Activity	Notes	When
Development	<p>Plan is developed by The Lakeside Rooms.</p> <p>Feedback obtained from stakeholders including community members, employees, participants, advocates and networks.</p> <p>Using feedback to improve services and develop new services based on needs of community and individuals</p>	Every three years
Approval	Plan approved	Every three years
Implementation	The details of the Plan are shared with Workers and other stakeholders as relevant	Ongoing
Review	<p>Achievements against the plan are reviewed monthly</p> <p>The Lakeside Rooms documents achievements and timeframes completed within the Plan</p>	Monthly

4.5 Risk Management

The Lakeside Rooms will review risks and ensure that these are either eliminated or reduced.

Potential Risks may include:

Risk	Likelihood	Impact	Strategy
Non-compliance with NDIS	Likely	High	Internal review of policies, procedures, financial structures Workers training
Competitors	Likely	High	Provide high quality service that encourages loyalty
Key Personnel Risk	Likely	High	Locate and train a support person in managing and implementing business needs.

4.6 MARKETING

4.6.1 Market Targets

- Participants
- Individuals
- Legal guardian
- Plan Managers
- Small organisations that seek reliable support for their participant(s).

4.6.2 Marketing Strategy

- Contacting local network and communities to provide information about the services that we provide.

- Work with the community and other services which are coordinating services for a participant to inform of them of our services and costings.
- Development of our website and written information in community languages.
- Provide one point of contact to give clear, relevant and accurate information.

5.0 RELATED DOCUMENTS

- Participant Information Pack
- Staff and Practitioners Manuals
- The Lakeside Rooms 's Participant Agreement
- Workers Agreement
- Practitioners Agreement
- Quality Schedule
- Strategic Plan
- Marketing Plan
- Asset Register
- Conflict of Interest
- Risk Management Policy
- Continuous Improvement Policy
- Incident, Accident and Emergency Policy
- Quality Management Policy

6.0 REFERENCES

- Work Health and Safety Act 2011
- Anti-Discrimination Act 1991 (Queensland)
- Disability Discrimination Action 1992 (Commonwealth)
- National Disability Insurance Scheme (Practice Standards and Quality Indicators)
- Privacy Act (1988)
- Work Health and Safety Act 2011

- Corporations Act 2001
- Privacy Act (1988)

Information Management Policy and Procedure

1.0 PURPOSE

- To ensure The Lakeside Rooms operates effective communication processes and information management systems
- To maintain information systems and practices in accordance with legislative, regulatory compliance and organisational standards

2.0 SCOPE

It is the policy of The Lakeside Rooms that all Participants, Workers, Volunteers and Contractors of The Lakeside Rooms will have records established upon entry to the service and maintained whilst active at The Lakeside Rooms

3.0 POLICY

- The Lakeside Rooms will maintain effective information management systems that keep appropriate controls of privacy and confidentiality for stakeholders
- The Lakeside Rooms' Policies and Procedures are kept as read-only documents in the Policies and Procedures folder on the shared drive.
- The Lakeside Rooms is responsible for maintaining the currency of this information with assistance from the Practice Managers and other workers as required
- The involvement of all workers is encouraged to ensure The Lakeside Rooms' Policies and Procedures reflect practice and to foster ownership and familiarity with the material.
- A copy of each form used by our organisation is maintained in the shared drive in the sub-folder; entitled "Forms".
- All workers can access the Policies and Procedures at The Lakeside Rooms' Office in paper-based or electronic format.
- Policies and procedures are reviewed every three years at a minimum, or as required.
- All superseded policies and procedures are removed from The Lakeside Rooms'

- Policy and Procedure folder and electronically archived by the Practice Managers or their delegate.

4.0 PROCEDURES

4.1 The Lakeside Rooms Information Management System

4.1.1 Participant Documentation Procedure

- Confidentiality of participant's records is maintained.
- All The Lakeside Rooms' workers and volunteers responsible for providing, directing or coordinating Participant support, must document their activities.
- Participant's files will provide accurate information regarding their services and support and will contain, but is not limited to:
 - Participant's personal details.
 - Referral information.
 - Assessments.
 - Support plans and goals.
 - Participant's reviews.
 - Details regarding service responses.
- Original participant documentation will be stored in the participant's central file.
- Information relating to participant's ongoing situation, including changes to their situation (i.e. increased confusion, deteriorating health, increased risks, etc.) is to be documented in the participant's notes.
- All The Lakeside Rooms' workers required to document the activities relating to support of participants will be appropriately trained in documentation and record-keeping.
- Individuals are not permitted to document on behalf of another person.
- Participant's records will be audited regularly to ensure documentation is thorough, appropriate and of high quality.
- Participant records will be stored in a safe and secure location with access available to authorised persons only.
- Agreements with brokerage agencies will include a requirement for brokerage workers to document their activities regularly.

- Workers must ensure that all relevant information about the progress of or support provided to a Participant is entered into that person's file notes in a factual, accurate, complete and timely manner.
- Workers must only use information collected from a participant for the purpose for which it was collected.
- Participants should be advised that data which has been collected but which does not identify any participant may be used by the organisation for the purposes of a service promotion, planning and evaluation.
- Participants, family and advocates have a right to access any of their personal information that has been collected. Workers will support such persons to access their personal information as requested.

4.1.2 Entering The Lakeside Rooms' Service

- Create a Participant file to act as the central repository of all Participant's service information and interactions. This will only contain material relevant to the management of services or support needs, including but not limited to:
 - Enquiry form
 - Copy of signed agreement
 - Assessments
 - Support Plan
 - Participant Intake form
 - Communication notes
 - Privacy statement, and
 - Complaint information
- Assign a unique identifier for each participant for documentation and record-keeping purposes.
- Collect initial information using The Lakeside Rooms' Participant Intake form.
- Collect only personal information necessary to assess and manage the participant's support needs.
- The Lakeside Rooms' Practice Manager will work with the Participant, their advocates(s) and any other family or service providers/individuals to develop and document a Participant Support Plan. This will be recorded using The Lakeside Rooms' Support Plan.

4.1.2 Ongoing Documentation Procedures

- Maintain participant information in the electronic "Participant Management System" in accordance with system practices.
- Document participant's information and service activities only on The Lakeside Rooms' approved forms or tools.
- Ensure other service agencies and health professionals involved with the care or support of The Lakeside Rooms' Participant provide adequate documentation of their activities and the participant's well-being or condition.
- Clearly document:
 - The outcomes of all ongoing participant's assessments and reassessment.
 - Changes or redevelopment of Participant's Support Plans, including revised goals or preferences.
 - Any critical incidents or significant changes in the participant's health or well-being.
 - Conversations (in person or via telephone) with the participant, family members, their representative or advocate.
 - Conversations regarding the participant, with any other providers, agencies, health/ medical professionals, family members or other individuals with interest in the participant.
 - Activities associated with the participant's admission and exit, including referrals.

4.1.3 Setting up and Maintaining Files for Participants

- Once the personal file for the participants has been established, workers must maintain that file to ensure that all information is accurate, up-to-date and complete.
- Workers must document in the person's file, significant issues and events that arise during their work with the participants as those events and problems occur.
- As information in the personal file becomes non-current (that is, information that no longer has any bearing on the services being provided to the participant), workers will establish an archival file, and progressively cull such non-current information into that file for storage in a secure place.
- The Practice Manager must regularly audit the files of participants to ensure that:
 - The file is up to date.
 - All forms are being used appropriately.
 - Non-current information is being culled and stored in the archival file.
 - The progress/file notes are factual, accurate, complete and in chronological order.

- When a participant leaves the service, his/her personal file and archival file are to be stored in a secure place such as a locked area, or password-protected folder on a computer; all under the control of The Lakeside Rooms

4.1.4 Participant's file formats in hard copy

The files of Participants will be established and maintained in the following format:

- The file will consist of a standard manilla folder or another similar folder or held in a secure electronic format with password access.
- The forms must be based on the current formats which have been approved by The Lakeside Rooms
- Archival files may be in the form of lever-arch folders or archive boxes and multiple in number; as required.
- If files are held in an electronic format, the forms/domains and formats must similarly be approved.
- For ease of access materials in the archival file should be listed chronologically with each page numbered in order and in groups of similar forms.

4.1.5 Security of Files and Participant information

- All current hard copy files for participants must be kept in a secure area, such as a lockable cabinet to ensure that only authorised personnel can gain access to personal information of a participant.
- Authorised personnel include The Lakeside Rooms' workers who are employed or engaged to provide support to the participants.
- All electronic files must be password protected to ensure confidentiality and security.
- Workers must not undertake any of the following actions without the express approval of the Practice Manager:
 - Photocopy any confidential document, form or record.
 - Copy any confidential or financial computer data to any other computer, USB or storage system such as google docs.
 - Convey any confidential data to any unauthorised worker or to any other person(s).

4.1.6 Transporting Hard Copy Files of Participants

If for any reason the files of participants need to be transported from one location to another, such as from their usual site to a doctor, the files must be carried in a locked document container, such as a briefcase or attaché case.

4.1.7 Communication / file notes for Participants

- Communication/file notes for Participants must include the following components:
 - The date of each entry is made.
 - The nature of the event in a factual, accurate, complete and timely manner.
 - The initials or name of the person making the entry.
- Workers must ensure that all relevant information about the participant is entered into the person's file notes in a factual, accurate, complete and timely manner.
- The file notes for each participant should be written when a significant event occurs or to record the type of support provided while working. The definition of a significant event will vary from person to person and should relate to the support required by the person-centred plan.
- It is required that workers make an entry in the file notes on each workday even when the person's day has gone according to plan and without the occurrence of unusual or extraordinary events.
- All entries made into file notes should be placed on the next available line. Under no circumstances should blank spaces be left on the file notes sheet.

4.1.8 Access to Participant's Files

- Participants and/or their guardians must have access to their own records on request - the Worker responsible for delivering the service should approve and control the way participants access their files to ensure that the security of other non-related information is maintained.
- Access to the participant's files is the direct responsibility of the Worker responsible for delivering the service. When access is requested by anyone other than workers employed or engaged by The Lakeside Rooms it will only be granted when the Practice Manager is satisfied with that the policies and procedures of The Lakeside Rooms has been followed, and access to the file is in the best interest of the participant. Such access will only be granted when consent has been given by the appropriate person.

- All the participant's administration files are the property of The Lakeside Rooms and, although participants and their guardians can access the file, it cannot be taken by the participants or their guardian or be transferred to any service external to The Lakeside Rooms without permission of the Practice Manager.
- All the participant's clinical files are the property of the Worker responsible for delivering the service and, although participants and their guardians can access the file, it cannot be taken by the participants or their guardian or be transferred to any service external to The Lakeside Rooms without permission of the Practice Manager.
- The proper procedure for releasing information about participants to persons or services that are external to The Lakeside Rooms is to proceed as per the "Consent Policy and Procedure."
- Any students on placement at The Lakeside Rooms may only access files with the consent of the participant or their guardian. Students will be required to provide a written undertaking that they will always maintain confidentiality and only use non-identifying information. The contract is to specify what information is to be used for and that any written compositions containing the information will be given to the Practice Manager for approval.

4.2 Workers Records

Workers files are kept in a password protected electronic file and are available only to the Practice Manager.

4.3 Minutes of Meetings

Minutes of meetings are maintained electronically and are sent via email to those concerned and available upon request.

4.4 Other Administrative Information

Individual workers are responsible for organising and maintaining the filing of general information in accordance with their job descriptions.

Administrative information including funding information, financial information and general filing are maintained electronically.

4.5 Electronic Information Management

4.5.1 Data Storage

- All data is stored in the shared drive of the server.

4.5.2 Backup

- All computer data (including emails) is backed up every night to an external hard drive that is secured in a fireproof safe.
- Periodic testing of backed-up data is undertaken to check the reliability of this system.

4.5.3 External Programs

- No programs, external data or utilities are installed onto any workstation without the permission of the Practice Manager

4.5.4 Log-in Credentials

- Assigned by the Practice Manager or their delegate.

4.5.5 Email

- Workers may send and receive minimal personal emails.
- All emails are filed in the appropriate folders set up by the Practice Manager.
- Pornographic, sex-related or other junk email received is to be deleted immediately. Under no circumstances are workers allowed to respond to junk emails.

4.5.6 Internet

- Internet access is restricted to work-related purposes.
- Under no circumstances are workers allowed to access pornographic or sex-related sites.

4.5.7 Getting Help and Reporting Problems

- Our organisation maintains an ongoing IT support agreement.
- If workers experience problems with a program or computer or any other piece of equipment, they can, in the first instance, contact the Practice Manager
- If necessary, the Practice Manager will arrange for the IT Consultant(s) to help.

4.5.8 Social Media

We are aware that social media (social networking sites; Facebook, Twitter or similar, video and photo-sharing sites, blogs, forums, discussion boards and websites) promotes communication and information sharing

Workers who work in our organisation are required to ensure the privacy and confidentiality of the organisation's information and the privacy and confidentiality of the participant's information. Workers must not access inappropriate information or share any information related to their work through social media sites

Workers are required to seek clarification from the Practice Manager if in doubt as to the appropriateness of sharing any information related to their work on social media sites

4.6 Monitoring Information Management Processes and Systems

Information management processes and systems are regularly audited as part of our audit program. Workers, Participants and other stakeholders are encouraged to provide ongoing feedback on issues and areas where improvements can be made.

4.7 Archival and Storage

All records after their active time must be kept in archive files for an additional period. This retention period is determined by regulatory, statutory, legislative requirements and /or defined by The Lakeside Rooms as best practice. (Please See "Disposal and Archiving of Documents" (Attachment 1) for a guide to retention periods.)

Records in the archive must be identified and stored in a way that allows for easy access and retrieval when required. Archived records in hard copy must be stored in an environment which minimises deterioration and damage, i.e. not exposed to direct sunlight, moisture, extremes of temperature, pests, dust, fire hazards, etc.

4.8 Destruction of Records

- The following procedures apply for the destruction of record:
 - Junk mail and instructional post-it notes may be placed in recycling bins or other bins as required.
- All other The Lakeside Rooms' records/documents for destruction are to be:
 - Shredded first and then placed in recycling bins, or
 - Sent off-site to be securely pulped, or
 - Deleted from the network.

5.0 REFERENCES

- Disability Discrimination Act 1992 (Commonwealth)
- Privacy Act (1988)
- Work Health and Safety Act 2011
- NDIS Practice Standards and Quality Indicators 2018

6.0 RELATED DOCUMENTS

- All electronic and hard copy The Lakeside Rooms documentation
- Copy of signed agreement
- Assessments
- Support Plan
- Communication notes
- Privacy statement
- Complaint information

7.0 ATTACHMENT 1

Disposal and Archiving of Documents

Function/Activity	Description	Retention/Disposal Action	Custody
Aboriginal & Torres Strait Islander	Documents relating to Aboriginal health Normal operational documents	Lifetime 7 years after the person's last contact with the service	Office
Business Information	Name Address Telephone number Compliance notices Financial records	7 years	Office
Internal Audits	Audit schedule Audit questions Audit reports	2 years	Office
Participant Records	Name Address Telephone number Emergency contact details Application or other documents Complaints about non-delivery of services Incident Records Complaint Records	7 years	Office

	BSP Records		
Contracts / Leases	Properties etc.	• 7 years	Office
Corrective Action	Corrective Action Requests	• 2 years	Office
Financial	Audits Budgets Receipts Cheques Petty Cash Documents and other financial records	• 7 years	Office
Management Review	Minutes of Meetings Monthly Reports	• 2 years	Held on PCs according to type of meeting

Consent Policy and Procedure

1.0 PURPOSE

The Lakeside Rooms must gain consent from the participant before sharing any information with family, advocates, other providers and government bodies.

Children under the age of 18 will need their family/advocate/guardian's consent to share information with other providers and government bodies. It is the responsibility of all workers to inform participants about their rights regarding the provision of consent.

2.0 SCOPE

All efforts should be made to obtain consent. When there are language or communication barriers, workers will ensure that all reasonable efforts have been made to overcome these, using available communication skills and technology, interpreters, relatives/carers and friends etc. Relatives may be consulted about the best ways to communicate or may be requested to assist with establishing the patient's values and preferences if the patient is unable to express these themselves.

Initial consent will be undertaken during their registration at the service. The prime responsibility for obtaining consent lies with the frontline worker who is to carry out the service. Consent can be sought by another individual if they have enough knowledge to give the right information and answer the patient's questions correctly.

Consent is equally valid whether it is expressed verbally, non-verbally (implied) or is written.

- *Implied consent* is adequate for most of the support provided by the organisation.
- *Oral consent* is enough for most interventions provided by doctors and other health professionals (such as commencing a manual handling process, use of complex medical procedures). Oral consent should be recorded in the support plan with relevant details of the discussion, the date and time of the entry, together with the name of the worker legibly written. Oral refusal of consent for any intervention must also be recorded in the support plan in the same manner.

- *Written consent* should be gained for the use of an advocate or to share information, by both the patient and the healthcare professional. Note: Participants automatically opt-in and must be asked to opt-out during NDIS audit requirements.
- *Photography*: Written consent will be obtained from any participant having their photograph taken.

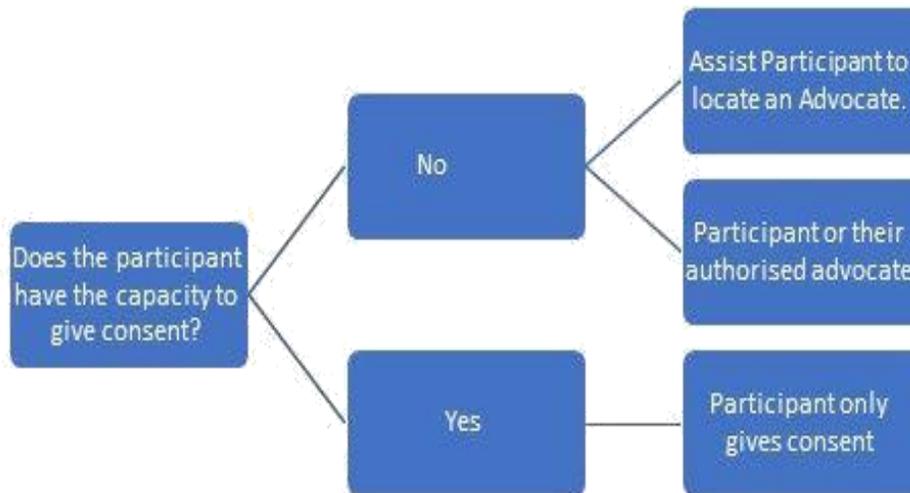
3.0 POLICY

- The Lakeside Rooms recognises the importance of maintaining the privacy and confidentiality of all participants. There are times when it is essential to share information with other parties, such as government bodies and other service providers.
- The Lakeside Rooms will not give any information to person or authority without the participant's consent unless the disclosure is a legal requirement.
- The Lakeside Rooms will inform all participants (upon entry into the service) about their rights to privacy and confidentiality.
- The Lakeside Rooms will notify all participants that they have an opt-out option if their information is requested for audit purposes.

3.1 Guiding Principles

- People have the right to make decisions about things that affect their lives.
- People are presumed to have the capacity to make their own decisions and give consent when it is required unless there is evidence otherwise.
- People are supported to make informed decisions when their consent is required.
- Consent is obtained from the person, or a legally appointed guardian, for life decisions such as accommodation, medical treatment, forensic procedures, and behaviour support.
- Consent for financial matters is obtained from the person, or a legally appointed financial manager or the person appointed under a Power of Attorney.
- People are supported to identify opportunities to make decisions about their own lives and to build their decision-making confidence and skills.
- When support to make decisions is wanted or needed by the person, it is provided in ways preferred by the person and by a supporter of their choice.
- Support with decision-making respects the person's cultural, religious and other beliefs.

- If the person wants to be supported by natural supporters, such as family and friends, this is encouraged and facilitated.
- Support is provided in ways that uphold the person’s right to self-determination, privacy, and freedom from abuse and neglect.
- Decision-making and self-determination are not limited by the interests, beliefs or values of those providing the decision-making support.
- The amount or type of support required by people to make decisions will depend on the specific decision or the situation.
- People are supported to make decisions that affect their own lives even if other people don’t agree with them or regard the decisions as risky.
- People are supported to access opportunities for meaningful participation and active inclusion in their community where they want this.
- Information is provided in formats that everyone can understand, and enables the person, their supporters and other relevant people, such as legally appointed guardians, to communicate effectively with each other.



4.0 PROCEDURE

If a participant wishes to give consent to another person or organisation, then the following procedures are required to be undertaken:

1. Inform the participant that written or verbal consent is required to share any of their personal information.
2. Inform the participant that their consent can be withdrawn at any time.
3. Communicate information about the consent in a method relevant to the participant.
4. The participant completes a Consent Form.
5. A signed Consent Form is to be placed at the front of the participant's file.
6. Relevant workers are informed about the consent.



5.0 RELATED DOCUMENTS

- Consent form

6.0 REFERENCES

- NDIS Practice Standards and Quality Indicators 2018
- Disability Inclusion Act and Regulation 2014
- Privacy Act (1988)

Complaints and Feedback Policy

1.0 PURPOSE

This policy is intended to ensure that we handle complaints fairly, efficiently and effectively.

Our complaint management system is intended to:

- Enable us to respond to issues raised by people making complaints in a timely and cost-effective way.
- Boost participant confidence in our administrative process.
- Provide information that can be used by us to deliver quality improvements in our services, Workers and complaint handling.

2.0 SCOPE

This policy provides guidance to our Workers and participants who wish to make a complaint on the fundamental principles and concepts of our complaint management system.

3.0 POLICY

The Lakeside Rooms will create an environment where complaints and concerns, compliments and suggestions (feedback) are welcomed and viewed as an opportunity for acknowledgement and improvement. This process is to ensure that individuals have the right to make comments and complaints and are encouraged to exercise their right in blame-free and resolution-focused culture; respecting an individual's right to privacy and confidentiality.

It is acknowledged that such comments and complaints are vital to review internal performance and processes and to seek continuous improvement of services as we seek to achieve our care commitment. Participants, families, advocates or other stakeholders may submit a Complaints/Feedback Form about The Lakeside Rooms' supports or services, Workers, and/or contractors.

The participants will be given information in Easy Read Format if required

It is our policy to follow the principles of procedural fairness and natural justice and comply with the requirements under the National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018.

The Lakeside Rooms maintains that complaints and feedback can be managed effectively through:

- An open and transparent complaint handling system.
- The observation of the principles of natural justice and compliance with relevant mandatory reporting under Australian law.
- The commitment to the right of stakeholders to complain either directly or through their representatives.
- Undertaking procedural fairness to reach a fair and correct decision.
- Taking reasonable steps to inform the complainant of the NDIS Commission Complaints process, including the use of various communication means such as oral and written.
- The maintenance of complete confidentiality and privacy.
- Abiding by the NDIS Code of Conduct.
- Training Workers in the complaint's process and the rights of all stakeholders to complain.
- Complaints being considered seriously and with respect.
- Informing participants and Workers about their rights to complain and guiding them on how to make a complaint during the assessment, orientation processes and in our welcome information.
- The provision of support for those people who may need assistance to make the complaint.
- The protection of complainants against retribution or discrimination.
- The prompt investigation and resolution of complaints.
- Communicating and consulting with participants, family and advocates during the complaint's process and providing feedback and resolutions.
- The consistent interpretation and application of policies and processes.
- The provision of opportunities for all parties to participate in the complaint's resolution process.
- The acceptance of the Lakeside Rooms and its workers being accountable for actions and decisions are taken because of the complaint.
- The commitment to resolve problems at the point of service or through referral to alternatives.

- The commitment to use the complaint as a means of improving the planning, delivery and review of services through our continuous improvement processes.
- Referring complaints and feedback into Continuous Improvement Policy.
- Annually auditing of the Complaints, Compliments and Feedback Policy.

4.0 DEFINITION

Complaint - An expression of dissatisfaction or a circumstance regarded as a cause for such expression.

5.0 PROCEDURE

5.1 Complaint Process

Complaints and suggestions can be made through:

- The utilisation of the Complaint / Feedback Form.
- Contacting a member of workers verbally or in writing. The workers must offer to document the complaint on behalf of a participant (if required) and refer the matter to the Practice Manager
- Contacting the Practice Manager, verbally or in writing.
- Responding to questionnaires and surveys.
- Sending an email to our contact email.
- Attending meetings/care conferences.
- Contacting external complaint's agencies (Such as the NDIS Commission).
- Communicating orally, or in writing, or any other relevant means.

Complaints may be made by:

- Workers
- The participant
- The public
- An advocate
- A family member
- Carers

- Anonymously

Results are recorded in Complaint Register to allow for input into Continuous Improvement processes. The Continuous Improvement Register will be used to record improvements that have been established after the finalisation of the Complaints Management Process.

If a complaint is about:

- Support or services - The complaint will be dealt with by the Practice Manager
- A worker - The complaint will be dealt with by the Practice Manager
- The Practice Manager - An external person or body may be approached (NDIS Commission Ph: 1800 035 544 - 9 am to 4 pm)

Workers, participants and/or person's responsible, visiting health professionals and visitors are informed of the complaints process through:

- Information Pack for Participants.
- Website.
- Workers Orientation and training.
- Meetings.
- Participant Agreements.
- Contractor Agreements.

5.2 Complaint Management Process

The process and investigation must adhere to the principles of impartiality, privacy, confidentiality, transparency and timeliness. Complaints will not be discussed with anyone who does not have responsibility for resolving the issue. The Lakeside Rooms must take into consideration any cultural and linguistic needs of the participant and provide the relevant support mechanism such as interpreters or similar.

5.2.1 Stage 1 Acknowledge

Acknowledge all complaints quickly (within one (1) working day, where possible).

5.2.2. Stage 2 Review of the Complaint

1. Consult with the participant regarding their desired outcome.
2. Inform the complainant of support regarding - their right to an advocate, an interpreter, stages of decision-making, mechanisms to protect privacy, ability to complain to the NDIS Commission and progress and outcome.
3. Determine the type of complaint - service, support or process.
4. Notify the complainant of each stage of their complaint.
5. If a meeting is required, then it will be held in a safe environment that has been determined by the complainant and at a time relevant to the participant.
6. Where the complainant is a recipient of disability services under the NDIS, check the participant record for a preferred contact for complaints or ask the participant if they would like to nominate a contact from one of the Lakeside Rooms' persons assigned to handle complaints.

5.3.3 Stage 3 Assessing the Complaint:

During the assessment of the complaint, the Practice Manager or their delegate must prioritise the complaint and determine a resolution pathway (where required). After the pathway has been established, the complaint will be investigated.

5.3.4 Stage 4 Investigation and Decision Process:

1. At the time of lodgement, determine if it is practicable to find an immediate resolution.
2. The Practice Manager must keep the complainant informed about the complaint.
3. Consult with the complainant to gather information about the underlying issue.
4. Analyse antecedents and underlying issues in determining a decision.
5. Written responses must be approved by the Practice Manager before being sent out.
6. Respond to the complainant with a clear decision.

5.3.5 Stage 5 After the Decision:

After investigation and a satisfactory response has been documented the Practice Manager will:

1. Inform the complainant of the decision, including the reason for the decision and giving options for reviewing the decision
2. Ensure that the complaint investigation has been satisfactorily completed.
3. Determine if the complainant is satisfied with the outcome.
4. Follow-up and consult with complainants about any concerns.
5. Ascertain preventative actions and continuous improvement.
6. Consider if there are any systemic issues.
7. Record the information about the complaint in the Complaint's Register.
8. Record the details of the improvement from the complaint in Continuous Improvement Register, if required.

Complaints resolution will be monitored according to the audit schedule and feedback will be provided to the complainants personally.

5.4 Documentation

- All complaints will be recorded in a Complaints Register.
- Information in the register will include:
 - Information about the complaint.
 - Identified issues.
 - Actions are undertaken to resolve the complaint.
 - The outcome of the complaint.
- Upload the documents, including Compliments, Complaint/Feedback forms into the computer system.
- Keep a copy of the information given to complainant in the file.
- Keep all complaint documents for seven (7) years from the day of record.
- Collect statistical and other information to:
 - Review issues raised.
 - Identify and address systematic issues.
 - Report information to the Commissioner if requested by the NDIS Commissioner.
- The Policy review will occur if there are legislative changes or regularly (at least annually).

5.5 Unresolved Complaints

Unresolved complaints will be referred to as the Practice Manager for investigation and resolution. Should the complaint not be resolved to the complainant's satisfaction, the complaint will be escalated to a person nominated by the complainant (with the complainant's permission).

When complaints cannot be resolved internally, the complainant may be referred to the external agency, listed below:

NDIS Commission

Ph: 1800 035 544 (free call from landlines) or TTY 133 677.

Interpreters can be arranged.

National Relay Service and ask for 1800 035 544.

Completing a complaint contact form.

<https://forms.business.gov.au/smartforms/servlet/SmartForm.html?formCode=PRD00-OCF>

6.0 RELATED DOCUMENTS

- Complaint / Feedback Form
- Service Agreement
- Continuous Improvement Policy
- Risk Management Policy
- Easy Read information
- NDIS Complaint Form

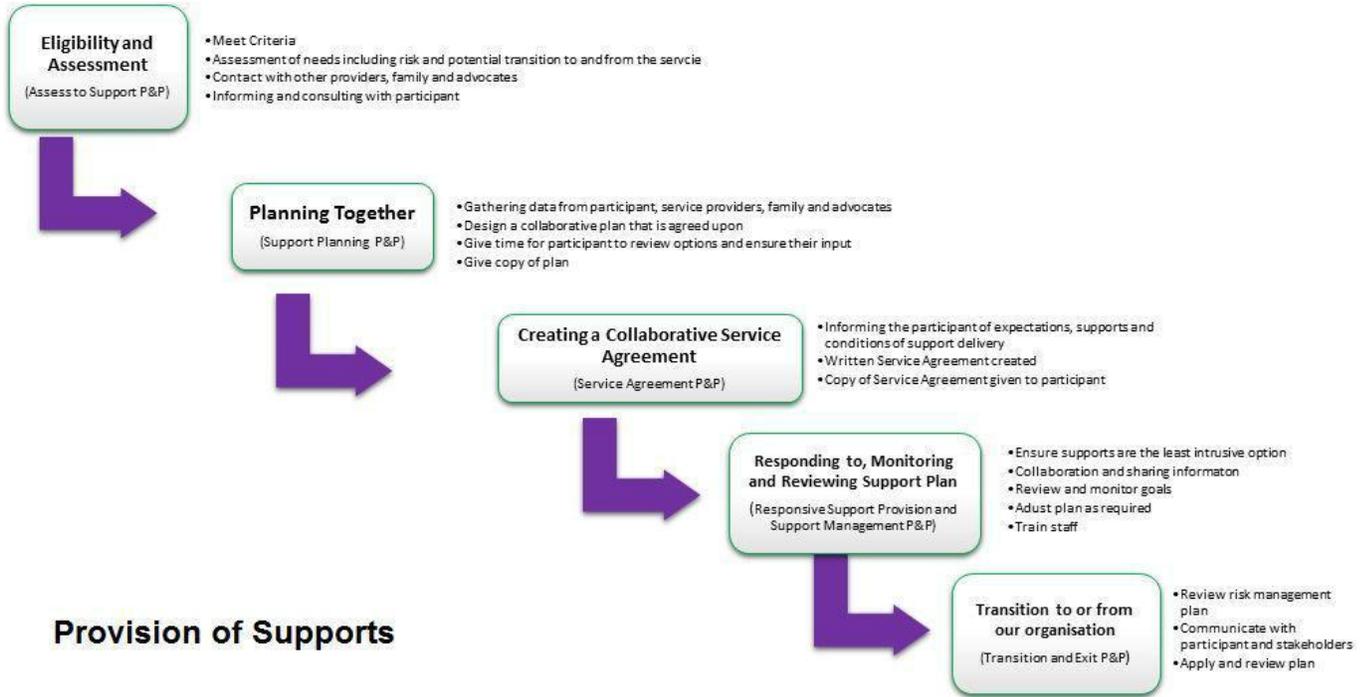
7.0 REFERENCES

- Work Health and Safety Act (2011)
- NDIS Practice Standards and Quality Indicators 2018

- NDIS (Complaints Management and Resolution) Rules 2018
- Privacy Act (1988)

Section 3: Provision of Supports

3.1 Access to Supports	Access to Supports Policy and Procedures
3.2 Support Planning	Responsive Support Provision and Support Management Policy and Procedure
3.3 Service Agreements with Participants	Service Agreements Policy and Procedure
3.5 Transition to or from the Provider	Transition and Exit Policy and Procedures



Access to Supports Policy and Procedures

1.0 PURPOSE

To provide the participant with the dignity of risk where our team respects each individual's autonomy and self-determination (or dignity) in making choices.

The assessment process will provide relevant, reliable and valid data that assists in identifying a participant's strengths and care needs.

2.0 SCOPE

Participants contribute to the assessment, that is appropriate and considerate of their individual needs. The support delivery environment is to be designed to incorporate reasonable adjustments to ensure that the participant's plan and their environment is fit for purpose to allow the participant to have a good quality of life and independence.

POLICY

The Practice Manager or their delegate must seek eligibility information from the participant before commencing any assessment process.

The Lakeside Rooms will provide the participant with entry criteria and inform them of the associated costs.

Easy read documents are available to inform participant's on the right to have a voice in their support requirements.

Participants must be part of the decision-making process with their needs at the core of service delivery and planning.

The Lakeside Rooms will be supported to understand what circumstances supports can be withdrawn. Supports will not be withdrawn or denied solely on the basis of the dignity of risk choice that has been made by the participant.

Assessments must be undertaken before the commencement of the Lakeside Rooms' service. Workers are required to determine if an interpreter is needed prior to the start of assessment to ensure that correct data is gained from the participant. The information obtained during the evaluation, such as areas of independence and identified needs forms the basis of discussion with the participant to create the Participant's Support Plan.

4.0 PROCEDURE

4.1 Access to Supports

The Practice Manager or their delegate will inform the participant of the eligibility criteria to access our support services and the associated costs for each service. Eligibility criteria for our NDIS services include that the participant currently holds an NDIS Plan that lists access to our registration groups.

The Practice Manager or their delegate will determine if the participant requires our Easy Read documents that inform them of their rights, their voice in the development of their Service Agreement, how to Complain and how we will maintain their Privacy. An interpreter will be provided if required by the participant.

Assessment will be undertaken to ensure that our organisation is able to supply the participant's services in the manner that the participant requires.

4.2 Reasonable Adjustment

An NDIS Plan is devised by the NDIA to address participant's reasonable and necessary supports.

During the Lakeside Rooms' assessment process to develop the participant's support plan, the Practice Manager or their delegate will consult with the participant, family and advocate to

make reasonable adjustments to the participant's support delivery environment. Any modifications must be discussed and negotiated with all parties and recorded in the service agreement. The reasonable adjustments are made to determine that the service provided is fit-for-purpose and that the changes support the participant's health, privacy, dignity, quality of life and independence.

4.3 Withdrawal of Services

The Lakeside Rooms will not withdraw or deny supports based solely on the dignity of risk made by the participant. Our organisation may withdraw supports if any of the following occur:

- The participant fails to do what is required of them under the terms of their Service Agreement.
- The participant fails to comply with the policies and procedures of The Lakeside Rooms
- The participant fails to communicate and provide information about changes to support needs.
- Workplace Health and Safety considerations are ignored.
- Communication has broken down between the Lakeside Rooms and the participant, family or advocate.
- Payment for support and/or expenses has not been received as per the Service Agreement.

Under the National Disability Insurance Scheme Terms of Business for Registered Providers, withdrawal or termination of services must be no less than 14 days.

The Lakeside Rooms will always work in the best interest of the participant to achieve a safe transition to a new provider of services (see Transition and Exit Policy and Procedures)

Upon termination of the Service Agreement by either party The Lakeside Rooms will take steps to ensure:

- The cancellation of service has been reported to the National Disability Insurance Agency
- All services that have been provided under the terms of the Service Agreement has been claimed
- The participant is aware of alternative support solutions in place for their safety and wellbeing.

4.4 Assessment Principles

- Assessment tools utilised are validated or considered “best practice”.
- The assessor understands and applies the principles of flexibility, validity and relevance to the assessment process.

The assessment process promotes independence, including the following principles:

- Determining the participant's abilities and difficulties.
- Setting expectations to enable a balance against the participant's abilities and their need for support.
- Service agreements acknowledge support needs, abilities to foster independence and the Participant’s goals.

4.5 Undertaking Assessments

Assessment interview time is negotiated with the participant, family and advocate. The designated workers are to:

- Invite the Participant’s Representative/ Advocate to be present if required or desired.
- Identify any special needs. For example, an interpreter and information in the service user’s language are sourced for service users who are culturally and linguistically diverse.
- Ensure that the Easy Read documents are available.
- Contact the Practice Manager to arrange an interpreter.

During the assessment process, Workers will inform the Participant of their rights and responsibilities, including the following information:

- How information is collected and used.
- Privacy and confidentiality considerations.
- Opt-out options to data collection.
- The complaints and feedback process.
- Their Advocacy options.
- The organisation's Information-sharing requirements.

The assessment is designed to meet the participant's health, privacy, dignity, quality of life and independence needs. Information is recorded in the participant's records for future reflection. Once the assessments are completed, they are reviewed by the Practice Manager.

4.6 Responsibility for Assessments

Only trained professionals can conduct assessments of the participant. The Practice Manager will determine and delegate this responsibility.

4.7 Recording Assessment Information

The assessment is documented in a Participant's file and in the Participant's Management System. The interview and write-up times must be recorded against the participant in the management system.

5.0 RELATED DOCUMENTS

- The Lakeside Rooms Assessments
- Participant Intake form
- Support Plan

6.0 REFERENCES

- Work Health and Safety Act 2011
- NDIS Practice Standards and Quality Indicators 2018
- Disability Inclusion Act and Regulations 2014
- Privacy Act (1988)
- Equal Opportunity Act 2010

Responsive Support Provision and Management Policy and Procedure

1.0 PURPOSE

- To ensure that the participant has access to responsive, timely, competent and appropriate supports that meet their needs, desired outcomes and goals.
- To provide management and program design, individual planning, coordination and Support Management.

2.0 SCOPE

- To ensure workers are always trained and act professionally when developing plans that empower the participant to achieve their needs, goals and aspirations.
- To keep participants informed on their plan whilst undertaking a holistic approach that incorporates strengths-based and person-centred strategies.

3.0 POLICY

All services and Support Plans are developed and delivered in collaboration with the participants or their advocates. All participants, family members, representatives or advocates must be included in any decision-making processes, choice of strategies or activities and approval for all aspects of their Support Plan. Support Management will consist of delivery, monitoring, review and reassessment in a timely manner.

Practice Manager or their delegate will ensure that the least intrusive options are planned using contemporary evidence-informed practices.

Reasonable efforts will be made to match the participant's key worker requirements to our current frontline workers.

We will collaborate with all relevant parties, including other service providers and only share information with the consent of the participant. Our team will consult to ensure that we meet individual needs.

The Practice Manager will ensure that only appropriately trained Workers work with the participant. The process of allocation will incorporate a skill and knowledge review of a potential frontline worker.

The Lakeside Rooms will utilise this policy to ensure the organisation maintains a contemporary approach to support management services.

4.0 PROCEDURE

4.1 Support Management Principles

Support Management includes Screening; Comprehensive assessment; Support Planning & Support Plan implementation; Monitoring; Review; and Case closure.

Practice Manager or their delegate will:

- Match available resources, Workers to the participant's needs.
- Work across the service boundaries to ensure that the participants with complex care needs can have access to a full range of allied health, health and social support services they need.
- Provide a single point of contact for the participants that require a complex range of services and/or require intensive levels of support.
- The Lakeside Rooms' service is screened for eligibility and suitability in accordance with applicable program guidelines and the Access to Supports Policies & Procedure.
- Verify that consent for assessment and services was received and is recorded in the participant's file.
- Review the participant's referral information and confirm eligibility and suitability for a The Lakeside Rooms service.
- Contact the participant and arrange a suitable time for a comprehensive assessment.

- With the participant's consent, arrange interpreters, advocates, guardians, or other service providers to attend the assessment, as appropriate.
- Determine (if possible) whether the clinical assessment of the participant's health condition is required and arrange for the appropriate workers (i.e. RN or allied health professional) to attend the assessment.
- Ensure representatives identified by the participant such as family, advocate and carers, are contacted and if necessary, assisted to participate in the assessment.
- On the day of the assessment, the assessment should be carried in accordance with the organisation's Policy & Procedure and based on the participant's needs and situation.
- Within five (5) days after a comprehensive assessment contact the referrer and any existing providers for further information, if necessary.
- If indicated, arrange additional specialised assessments.
- Investigate potential options for sourcing support, including the availability of The Lakeside Rooms workers/resources and the use of brokerage resources.
- (If necessary) arrange a case conference with relevant services and individuals to discuss the participant's situation.
- Ensure outcomes from Support Management are documented within the Support Plan and advise the Participant that their services will be continually reviewed by the Practice Manager for effectiveness.
- Where appropriate, and with Participant consent, provide the Support Plan to Participant's General Practitioner or Representative.
- Develop a Support Plan that includes a Plan of Action that meets the participant's needs, requirements and aspirations. The support plan will include:
 - Participant information - personal details, health details, cultural and spiritual requirements, sexual identification, Aboriginal and Torres Strait Islander.
 - Goals.
 - Advocate,
 - Interpreter requirement.
 - Consent forms.
 - Active engagement planning.
 - Plan to develop, sustain and strengthen independent life skills.
 - Medical information including conditions, doctors, medications, use and management.

- Risks to participant and workers - management of the risk, if required.
- Any financial budget requirements (if application).

- The participant's involvement in any planning and decision-making process.

Monitor the relevancy of the Support Plan through regular contact with the participant and other representative and service providers involved in the well-being of the participant.

The Support Review is an essential element in the provision of focused and relevant supports, occurring at various points in the support continuum, depending on the needs of the participant or family, urgency and complexity of the family's needs and changes in family circumstances. Support Plan Reviews may be held to:

- Determine if the current roles and responsibilities of Workers and organisations are meeting the needs of the individual.
- Review if the frontline workers are meeting participant's goals.
- Review the purpose, intent, and direction of the intervention.
- Review the service currently being supplied against the participant's strengths, needs, goals and aspirations.
- Review previous assessment and determine if any more are required.
- Re-assess the participant using the relevant assessment tool.
- Review using evidence gathered during work with the participant.
- Review the status of the support plan.
- Make decisions relevant to the participant – ensuring that all parties are informed.
- Review goals/actions.
- Schedule a case conference with a participant and/or relevant stakeholders to ensure their active involvement and to inform changes in service are discussed.
- Plan towards transfer and/or closure if relevant.
- Records any changes to a Support Plan in the participant's file or notes and, if necessary.
- Assess the need to change the Service Agreement.

4.2 Exiting the Service

When the participant's needs begin to exceed program resources, or should the Participant change to another service provider, the Practice Manager will:

- Refer to the Transition and Exit notes in the Support Plan.
- Follow the guidance of The Lakeside Rooms Policy - Transition and Exit Policy and Procedures.
- Inform the participant on any potential risk of transferring or exiting.
- Negotiate participant handover arrangements with the new service provider.
- Inform participant of risk related to leaving the service.

5.0 RELATED DOCUMENTS

- The Lakeside Rooms Assessments (as required)
- Support Plan
- Service Agreement
- Access to Supports Policy and Procedure
- Transition and Exit Policy and Procedure
- Consent Policy and Procedure

6.0 REFERENCES

- Work Health and Safety Act (2011)
 - NDIS Practice Standards and Quality Indicators 2018

Service Agreement with Participants Policy and Procedure

1.0 PURPOSE

The Lakeside Rooms undertakes the development of a Service Agreement during the Access to Supports and Assessment Process and with the collaboration of relevant parties.

To ensure that all parties are aware of and agreed to all aspects of the services being provided.

2.0 SCOPE

It is the responsibility of the Practice Manager or their delegate to undertake the development of a Service Agreement with the participant to ensure it is designed specifically for the participant.

3.0 POLICY

The Lakeside Rooms collaborates with each participant to develop a service agreement which establishes:

- Expectations,
- Explains the supports to be delivered, and
- Specifies any conditions attached to the delivery of supports, including why these conditions are attached.

The participant is supported to understand their service agreement and conditions using the language, mode of communication and terms that the participant is most likely to follow. We will supply an Easy Read format, as required.

The participants must give consent or direction to develop and maintain links utilising collaboration with other providers to share information and meet participant needs

4.0 PROCEDURE

The Lakeside Rooms undertakes the following process to develop a Service Agreement with each participant:

- Collaborate with the family, advocate or representative to ensure that the Service Agreement meets the requirements and is linked to needs, interests and aspirations.
- Use appropriate communication method to explore, explain and determine what is being provided within the agreement.
- Records are kept explaining the process undertaken, include consent or direction to collaborate with other providers to share information to enable the team to meet the participant's requirements.
- Copy of Service Agreement is given to the participant.
- Should a participant not wish to keep a copy of the agreement, then the circumstance under which the participant did not receive a copy of the agreement, must be documented and kept on the participant's file. It is good practice to have the participant make a note on the agreement that a copy was not required.
- Supported Disability Accommodation Service Agreement must include outline the party or parties responsible and their roles (where applicable) for the following matters:
 - Addressing how a Participant's concerns about the dwelling will be communicated.
 - Management of potential conflicts involving participant(s).
 - Agree on how changes to participant circumstances and/or support needs will be disclosed.
 - In shared living, method of filling vacancies, including each participant's right to have their needs, preferences and situation considered.
 - Management of behaviours of concern which may put tenancies at risk, if this is relevant to the participant.

5.0 RELATED DOCUMENTS

- Service Agreement

6.0 REFERENCES

- Work Health and Safety Act (2011)
- NDIS Practice Standards and Quality Indicators 2018

Transition or Exit Policy and Procedure

1.0 PURPOSE

The Lakeside Rooms' Transition or Exit policy complies with the National Disability Insurance Scheme Act 2013, which promotes access, inclusion and choice for people with disabilities. The purpose of this policy is to define the processes required to assist and support participants to transition to or exit from services.

2.0 SCOPE

This policy applies to all participants receiving supports and services from The Lakeside Rooms. The purpose of this policy is to define a Transition or Exit process for participants, family and advocate (where applicable). The policy provides direction for The Lakeside Rooms' workers when considering the exit of a participant from the organisation or working with other providers during the transition to the organisation.

3.0 POLICY

The Lakeside Rooms is committed to providing participants with information and support through the process of transition into, or exiting from, the organisation's services.

- All participants are provided with the necessary information and explanation in the appropriate communication formats in relation to their transition into or exit from the service.
- Participants are provided with information and support through the process of transition into or exit from the organisation's service.
- Participant transition strategies and exit planning will be documented in the participant's service agreement and support plan.
- The participant entry and exit process for programs are transparent, and the organisation adopts fair and, non-discriminatory practices when a participant chooses to or is required to leave the service.
- To collaborate with other providers for a planned transition to or from our service.

- Workers must document, communicate and effectively manage transitions and exit to benefit participants.
- Risk assessments are to be undertaken, documented and responded to with each transition.
- The Lakeside Rooms delegated worker must identify processes for the participant and ensure application and review.
- The Lakeside Rooms will record the following information – if the participant goals have been met, or a participant chooses to leave or cease the services, or a participant wishes to transfer to another service provider, or the participant moves location and cannot access the service, or the participant no longer is eligible for services.

4.0 DEFINITIONS

Transition	Is preparing for and supporting the participant to enter or exit the service or referral from another service or to another service or program where appropriate.
Exit (or discharge)	Is the process through which participants transition out of the services of The Lakeside Rooms. The exit process occurs when the participant has reached their goals outlined in the participants support plan. For some participant there may be a period of transition to exit or some form of continuing care.

5.0 PROCEDURE

The Lakeside Rooms will undertake a collaborative approach when undertaking all decision-making processing regarding transition and exit to allow for an informed approach. This approach must be recorded in the support plan and include:

- Reasons for the transition.
- Provider transitioning to or from.
- Collaboration communication.
- Communications - method and information given to relevant parties.
- Feedback from participant, family, and advocates or stakeholders.

- Timeframes for the transition.
- Process of the transition that incorporates details of the process, how to apply, and communication process relevant to the participant.
- Risks to the participant with risk management strategies identified.
- Review of the process - adjustments made as required.

Ensure it is explained to all participants at the time of development of their individual service agreement and/or support plan how and when a process of transition or exit can occur.



5.1 Service Agreement

As per the Service Agreement, give a minimum notice of no less than 14 days or a more extended period, as is adequate to enable the participant, family and advocate, or The Lakeside Rooms, to nominate an alternative Registered Provider to deliver those support services.

The Lakeside Rooms will give notice of intent to withdraw/terminate services to a participant in accordance with the Service Agreement, which states no less than 14 days' notice or longer, as required.

5.2 Transition or Exit Plan

- A Transition or Exit Plan will be developed at the time of entry to the service.
- The Transition or Exit Plan is discussed during the participant's reviews.
- Inform and highlight to the participant of any risks involved with transitioning into or exiting from the service
- To have a timeframe that is seamless offers flexibility and provides reliable support from the other service provider.
- Support participants to transition into our service, to other services or cease services as needed.

5.3 Interviews

An entry interview is part of the transition entry; participants wishing to make a complaint regarding their transition into the service will be provided with details on the complaint process.

An exit interview is part of the Exit plan; participants wishing to make a complaint regarding their exit will be provided with details on the process of complaint.

5.4 Risks

Risks associated with the transition or exit process are identified during the planning stage, documented in the participant's plan and responded to immediately. This risk assessment will be held in the Support Plan.

The Lakeside Rooms will aim to minimise the impact of change that is occurring for the participant and creating a transition support schedule that meets the participant's goals, needs and requirements in a person-centred way.

6.0 RELATED DOCUMENTS

- Service Agreement
- Participant Support Plan
- Complaint/Feedback Form

7.0 REFERENCES

- NDIS Practice Standards and Quality Indicators 2018
- Privacy and Confidentiality Act (1988)