

**GOLD COAST
COMMUNITY LIFESTYLES LTD**

POLICY MANUAL

**Section 2
Services Delivery**



GCCL LTD POLICY MANUAL
Section 2 Services Delivery

Contents

1. Service Access.....	5
1.1 Purpose.....	5
1.2 Scope.....	5
1.3 Service Entry Procedure.....	5
1.4 Service exit.....	5
1.5 Anti-Discrimination.....	6
1.5.1 Purpose.....	6
1.5.2 Scope.....	6
1.5.3 Procedure.....	6
1.6 Advocacy.....	6
1.6.1 Purpose.....	6
1.6.2 Scope.....	6
1.6.2.1 Definitions.....	7
1.6.3 Procedure.....	7
1.6.4 Guidelines for Advocates.....	8
2. Individual Needs.....	8
2.1 Coordination of Support.....	8
2.1.1 Procedure.....	9
2.2 Service Delivery.....	9
2.2.1 Procedure.....	9
2.3 Plan Management.....	9
2.3.1 Procedure.....	9
2.4. Service Agreement.....	10
2.4.1 Purpose.....	10
2.4.2 Scope.....	10
2.4.3 Procedure.....	10
GCCL will utilise the following mechanisms to achieve the objectives outlined above:.....	11
2.5 Service cancellation policy.....	12
2.5.1 Procedure for breach.....	12
2.5.2 Procedure for shift cancellation.....	12
3. Decision Making and Choice.....	12
3.1 Purpose.....	12
3.2 Scope.....	13
3.3 Procedure.....	13
3.3.1 Individual needs.....	14
3.3.2 Advocacy.....	14
3.3.3 Personal information.....	14
3.3.4 Staff recruitment.....	14
3.3.5 Least Restrictive Alternative.....	14
3.4 Sexual Behaviour.....	14

GCCL LTD POLICY MANUAL
Section 2 Services Delivery

3.4.1 Purpose.....	14
3.4.2 Scope.....	15
3.4.3 Procedure	15
4. Privacy, Dignity and Confidentiality.....	15
4.1 Purpose.....	15
4.2 Scope	15
4.3 Procedure.....	15
4.3.1 Personal information.....	16
4.3.2 Collection of Information	16
4.3.3 Consent by Individuals.....	16
4.3.4 Storage of information	16
4.3.5 Access to information	16
4.3.6 Disposal of Information	16
4.4 Code Of Conduct	17
4.4.1 Purpose.....	17
4.4.2 Scope.....	18
4.4.3 Responsibilities	18
4.4.4 Procedure	18
5. Stakeholders	19
5.1 Purpose.....	19
5.2 Definitions.....	19
5.3 Scope	20
5.4 Procedure.....	20
5.4.1 External Stakeholders who influence service delivery.....	20
5.5 Participation and Inclusion	20
5.6 Valued Status	21
6. Complaints and Disputes	21
6.1 Purpose.....	21
6.2 Scope	21
6.3 Procedure.....	21
6.3.1 If your complaint is about someone within GCCL.....	22
6.3.2 If your complaint is about the Service Coordinator	23
6.4 Appeals and seeking outside assistance	24
7. Conflict of Interest	26
7.1 Purpose.....	26
7.2 Scope	26
7.3 Procedure.....	27
8. Service Delivery and Support Coordination – Conflict of Interest.....	27
8.1 Purpose.....	27
8.2 Scope	27
8.3 Procedure.....	27

GCCL LTD POLICY MANUAL
Section 2 Services Delivery

9. Critical Incident/Accident Reporting	27
9.1 Purpose	27
9.2 Scope	27
9.3 Procedure.....	28
9.3.1 Major Incidents	28
9.3.2 What to report	28
9.3.3 Duty of Care.....	29
9.4 Incident Flowchart	30
10. Responding to abuse, neglect or exploitation	30
10.1 Purpose	30
10.2 Scope	30
10.2.1 Definitions	30
10.2.2 Responsibilities	32
10.2.3 Policy	33
10.2.4 Procedure	34
11. Epidemic/Pandemic	35
11.1 Purpose	36
11.2 Scope	36
11.3 Policy.....	36
11.4 Leave and Flexibility.....	37
11.5 Notes	37
11.6 Related Documents.....	37
11.7 Legislation & Industrial Instruments	38
11.8 Responsibilities	38
11.9 Procedures	38
11.10 Health Messaging	39
12. Restrictive Practices and Challenging Behaviours	39
12.1 Purpose	39
12.2 Scope	39
12.3 Definitions:	40
12.3.1. Restrictive practices.....	40
12.3.2 Other restrictive practices	40
12.4 Procedure.....	41
12.4.1 Incident Records.....	41
12.4.2 Management of Aggressive Incident	42
12.4.3 Response.....	42
12.4.4 Authorisation of restrictive practices	43
12.4.5 Procedure for managing restrictive practices	43

1. Service Access

Any person with a disability seeking a service has access to GCCL (GCCL) on the basis of relative need, services available for purchase as part of their NDIS plan and within available resources.

1.1 Purpose

The purpose of this policy is to identify the avenues of access available to people seeking services with GCCL (GCCL). Access and exit procedures are clearly outlined to ensure equity and transparency.

1.2 Scope

The policy applies to all people seeking services and supports from GCCL.

1.3 Service Entry Procedure

GCCL will assess the capacity of the service to meet the needs of each applicant on an individual basis without discrimination or bias. An application will be completed by the individual and initial conversations will be conducted by the Service Coordinator, including available resources within the person's NDIS plan.

GCCL is committed to inclusive community living and the enrichment of everyone's lives. People using the services of GCCL will ideally share these values and beliefs and agree to comply with the policies and procedures of the organisation. They must also reside within a 250km radius of the organisation's main office. If the service participant application has been approved by the Board, a Service Coordinator will be allocated, a service agreement signed and a budget developed. Service participants will be required to undergo an Induction process with the Service Coordinator, in order to understand the policies and procedures and to sign their service agreement.

If it is deemed that the organisation is not suitable for the applicant, a list of alternate service providers will be offered and they will be referred back to the referring agent or NDIA.

1.4 Service exit

GCCL ensures a smooth transition should a service participant elect to leave the service, in line with our own values and the principles of NDIS of choice and control. A service participant may request termination or suspension of the support they receive from the service at any time. If this occurs, the family representative or service participant must provide GCCL at least two weeks' notice in writing. The service participant will be encouraged to use an advocate and/or other support person of their choosing during this process. A smooth transition to or from GCCL will be facilitated by a planned, documented and communicated process. Any risks associated with the transition will be identified, documented and responded to. Transition processes will be reviewed regularly within the Internal Audit process.

GCCL may terminate or suspend service under certain circumstances. This may be if the person no longer meets the eligibility criteria, if the person does not comply with the conditions of the Service Agreement or if the health and safety of either the service participant or GCCL staff is compromised. GCCL will provide the family representative or service participant at least two weeks' notice in writing.

1.5 Anti-Discrimination

1.5.1 Purpose

The purpose of this Policy is to prevent and respond to discrimination or possible discrimination in relation to the delivery of service by GCCL Ltd.

1.5.2 Scope

This policy and procedure apply to all staff, service participants, Board members and applicants.

Discrimination is defined as occurring when behaviour based on assumptions about people causes individual/s unfavourable treatment

GCCL is committed to the prevention of any form of discrimination. If possible discrimination is identified in relation to the delivery of service, this will be actioned within the Complaints process.

1.5.3 Procedure

All reported instances of discrimination will be taken seriously, investigated promptly, and may lead to dismissal.

If there is a suspected or reported instance of discrimination, the Complaints Policy and Procedure should be followed. The Service Coordinator will be available to assist a complainant through this process and an advocate will be offered to all parties.

If the complainant is not happy with the outcome, they may wish to lodge a complaint with the Fair Work Ombudsman. GCCL will provide contact details to the complainant at this time.

All service participants, staff and members of GCCL will be provided with a copy of this policy and procedure as well as the Complaints Policy and Procedure during their Inductions and this will be revisited at annual reviews and appraisals.

1.6 Advocacy

1.6.1 Purpose

The purpose of this Policy is to provide information on the use of advocates, and encouragement to service participants and their families to utilise an advocate of choice to ensure optimum service by GCCL.

1.6.2 Scope

All service participants, and potential service participants, may choose to involve an advocate to represent his or her interests at any time. This is accepted practice by GCCL.

1.6.2.1 Definitions

Informal Advocate	A friend or family member who is nominated as an advocate.
Systems Advocate	An advocate or organisation that acts on behalf of a disadvantaged individual or group at a systemic level.
Legal Advocate	A nominated advocate whose role has legal status, such as an Enduring Power of Attorney or Legal Guardian.
Paid Advocate	An employee of an advocacy service or organisation.

Advocacy is not mediation or negotiation.

Mediation and negotiation processes aim to reach a mutually acceptable outcome between the parties. The role of the advocate is not impartial; they stand alongside the person and represent their best interest, no-one else's.

GCCL will encourage service participants to utilise an advocate of their choice to ensure that service participants receive the best possible service.

GCCL values our service participant's choice and independence in being able to be supported by a person of their choice in ensuring that they are receiving the best possible care. GCCL encourages service participants and families to access an advocate in all areas of services offered including assistance with lodging any complaints or concerns that they may have and assistance in accessing their own personal files that are kept at the office of GCCL.

1.6.3 Procedure

GCCL offers each service participant the opportunity to nominate an advocate.

GCCL accepts the involvement of an advocate of the service participant's choice whenever this is the wish of the service participant.

GCCL informs service participants of the availability of such assistance.

At point of first contact with the service participant they are verbally advised of their right to have someone to represent their interests and help them with complaints, disputes or any aspect of service delivery if they wish.

An advocate may be a relative, friend, neighbour or someone from an advocacy service.

GCCL maintains a list of service providers and agencies that provide advocacy services.

Service participants are reminded of their right to use an advocate on subsequent visits and contacts, along with their other rights associated with the services they may receive.

Service participants are also informed of their right to use an advocate to assist in accessing their personal file and records that are stored at the office of GCCL.

Where a service participant does wish to utilise an advocate, an Authority to Act as an Advocate form is completed and kept on the service participant's file.

Guidelines for advocates are provided to anyone who is entering this relationship on behalf of a GCCL service participant.

1.6.4 Guidelines for Advocates

Advocacy is standing alongside an individual with disadvantage, speaking on their behalf to represent their best interest.

An advocate may be a family member, a friend or an employee of an advocacy service. An interpreter would not be an advocate; they have a distinct role interpreting communication between two or more parties.

2. Individual Needs

The NDIS Quality and Safeguards Commission commenced on 1 July 2019. The NDIS Practice Standards have been developed, and GCCL will comply with these Standards.

GCCL will ensure that in line with NDIS principles of choice and control, service participants' individual needs, preferences and personal goals are met in the least restrictive way and within available resources in their NDIS plan. NDIS principles also dictate that choice and control lies with the service participant and/or their representative, and this will be upheld at all times.

2.1 Coordination of Support

This is a service offering based on the NDIS Support Coordination. The purpose of this service is to help strengthen a service participant's ability to design and then build their supports with an emphasis on linking to the broader systems of support across a complex service delivery environment. This is to focus on supporting people to direct their lives, not just their services, involves resolving points of crisis and developing resilience in the person's network.

As with all other service offering, GCCL requires service participants to sign a Service Agreement.

As a Support Coordinator at Gold Coast Community Lifestyles, we are dedicated to providing comprehensive assistance and support to individuals with complex needs under the NDIS intensive supports guidelines. Recognizing Support Coordination as a vital and justified service, the role is to empower individuals to lead independent lives while ensuring better outcomes and value for money compared to traditional support models. The below is an overview of how a Support Coordinator would assist a person with complex needs:

1. **Building Capacity:** Working closely with each person to identify their strengths, interests, and aspirations. Through collaborative discussions Support Coordinators assist in developing and implementing meaningful goals that align with a participants' vision for the future. By building capacity, we aim to enhance a persons' independence and overall well-being.
2. **Goal Development and Strategies:** Together with the individual, a Support Coordinator establish clear goals and develop strategies to achieve these goals. Goals may encompass various aspects such as employment, education, social participation, and personal development. Through regular communication and feedback, we continuously evaluate and refine these strategies to ensure progress towards individual goals.
3. **Identifying Supports:** Assist individuals to identify the supports required to achieve their goals. This involves exploring available services, providers, and community resources that are best suited to meet their unique needs. To navigate the NDIS framework, helping individuals access appropriate funding and connect with the right supports.
4. **Safeguarding and Mitigating risk for people with Vulnerabilities:** prioritize the safety and well-being of the individual by developing safeguarding processes and roles. This includes working with relevant stakeholders to create a network of support that mitigates vulnerabilities and ensures the person's rights and dignity are protected. Support Coordinators provide guidance on risk management and offer support in crisis situations.

5. Collaboration and Stakeholder Engagement: engage with the person's support network, including family members, healthcare professionals, and service providers, to foster collaboration and coordination. By facilitating effective communication and fostering strong relationships, we ensure that all stakeholders are working together towards the individual's goals.
6. Monitoring and Review: regularly monitor the progress of the individual's support plan, ensuring that the services and supports provided are effective and aligned with their evolving needs. Through ongoing reviews and evaluations, we can make necessary adjustments and modifications to the support plan, ensuring it remains relevant and beneficial.

Through the role as a Support Coordinator, we strive to provide individuals with complex needs the necessary tools, resources, and support to live independently and achieve their goals. By leveraging the NDIS intensive supports guidelines, we aim to optimize participant outcomes, promote their well-being, and maximize their overall quality of life.

2.1.1 Procedure

GCCL Service Coordinators work with the service participant to develop an Individual Support Plan, based on their NDIS plan and their identified goals.

GCCL assists the service participant to utilise their NDIS plan to its fullest capacity.

GCCL provides the NDIA with a 1-month and 3-month progress report.

GCCL supports service participants to prepare for their NDIS Plan review.

2.2 Service Delivery

Service Delivery is one piece of the NDIS plan puzzle and participants are not required to provide their full NDIS plan to access this service. This service enables service participants to 'do' the plan to meet their individual goals.

2.2.1 Procedure

GCCL assists the service participant to develop a budget. A Service Delivery Checklist is compiled to ensure all aspects of service delivery are taken into account, and support workers are required to regularly document case notes. This is to keep GCCL accountable in assisting people to work towards their goals.

Part of the NDIS plan may be given to support workers, with consent by the service participant.

2.3 Plan Management

GCCL offers NDIS Plan Management services to service participants who are also involved in other aspects of GCCL services, and where it fits into GCCL values and capacity.

2.3.1 Procedure

GCCL requires the full NDIS plan for this service offering. GCCL tracks and monitors service participant spending and ensures transactions are legitimate according to the participants' plans.

GCCL use the Plan Management checklist to ensure all information is collected for this service offering.

A statement of funding transactions will be provided to the service participant on request.

2.4. Service Agreement

Each service participant will enter into a Service Agreement with GCCL, that is flexible and fluid, consistent with the person's NDIS goals, and their own objectives. The agreement is reviewed after the NDIS review or every twelve months, whichever comes first. The service participant will be involved in the planning and review process, along with any supports and/or an advocate if they wish. A list of specific duties will be compiled, and detailed in the service agreement, agreed to and signed by the service participant and/or their representative. A copy of the signed Service Agreement will be provided to the service participant in an appropriate format.

2.4.1 Purpose

The purpose of this Policy and Procedure is for GCCL to deliver high-quality services and activities to Service participants by focussing on their needs and strengths, the needs of their families and their communities. Our Service Agreement policy describes how we assess the needs of each service participant, develop and review Service Agreements and review progress for our service participants against their NDIS Plan and previous Agreements.

2.4.2 Scope

This policy applies to all service participants. All Service Agreements will have a consistent format.

2.4.3 Procedure

GCCL is committed to delivering services and activities that respond to the needs and strengths of those who use our service, their families and their communities. We want those who use our service to be confident that their needs and issues have been understood, that there is a clear plan for the services they will receive. Specifically, we will take a consistent and organized approach to how we:

- Collect information about the needs, strengths, wants of both Service participants and their families.
- Identify supports aligned with NDIS plan where appropriate.
- Create a draft service agreement from the information obtained.
- Obtain approval of the draft Service Agreement from the service participant.
- Present the final Service Agreement to both service participants.
- Review the individual support plan every twelve months, after their NDIS Plan review and upon receipt of their new NDIS Plan.
- In the context of the National Disability Insurance Scheme and its focus on intensive support for individuals with complex needs, when a person has complex disability requirements or lacks informal supports, and they depend on Gold Coast Community Lifestyles to fulfil their daily living requirements, the designated Coordinator will actively engage with the individual and relevant stakeholders to ascertain additional providers or supports as necessary. These supports are designed to address a wide range of needs, including emergency situations where alternative support arrangements may be required. Moreover, proactive measures are implemented to ensure preventive health measures are in place. This entails facilitating access to recommended vaccinations, dental check-ups, comprehensive health assessments, and mealtime management plans. Furthermore, the Coordinator strives to connect the individual with allied health services to address any specific health concerns or requirements

GCCL LTD POLICY MANUAL

Section 2 Services Delivery

they may have, ensuring comprehensive support is provided to promote their overall well-being.

GCCL will utilise the following mechanisms to achieve the objectives outlined above:

Needs assessment:

Having assessed a service participant's eligibility for our service, the Service Coordinator will immediately undertake a meeting with the service participant to obtain information about the needs, strengths and wants of the Service participant and their family if applicable. This includes obtaining relevant information from appropriate parts of their NDIS Plan.

Recording of Information

The information provided will be recorded on a **Service Participant Profile** document and **Home Safety Checklist** form.

Involvement of Service Participants

A meeting will be set with the Service Coordinator, service participant, family representative or advocate, and anyone else the service participant identifies as relevant to this process. This meeting will enable the conversations that allow for the completion of their Service Agreement. Within 12 months and every 12 months thereafter the same process will occur, after their NDIS Plan Review and upon receipt of their new NDIS Plan.

Draft Service Agreement

Shortly after the Service Agreement meeting, an Individual Support Plan (as part of the service agreement) will be developed outlining all relevant information on support needs and individual goals.

Final Service Agreement

Once approval has been received, a copy of the final Service Agreement will be given to the service participant for signatory. One copy will remain with the service participant and the other copy filed at the GCCL office on the service participant file.

Support Plan presented to Support Workers

A copy of the Individual Support Plan will be given to and discussed with the workers who support the Service Participant. This will be done in consultation and approval from the Service Participant.

Incident/Accidents Reports

Any incident/accident report forms that are lodged with GCCL may require professional advice. Information from these sources may be included in the development of Service Agreements. Refer to GCCL Incident Management policy for more detailed information on Incident/Accident management.

File Register:

The following details will be entered in the Service Participant Register/NDIS portal:

- Name of service participant.
- Date the last plan was reviewed.
- Date of next review.
- Appointment dates for both service participant and support workers.
- Goals that were attained and new goals that have been set.

Reviewing of Service Agreement

Service Agreements will be reviewed every 12 months, after the NDIS Plan Review and upon receipt of the new NDIS Plan, unless circumstances change

2.5 Service cancellation policy

The participant and GCCL may cancel services by giving 2 weeks' notice in writing, unless there is a breach of the service agreement which may result in immediate cancellation of services. Procedure is detailed in the service agreement.

2.5.1 Procedure for breach

1. GCCL meets with participant and discuss breach and chance to rectify.
2. Review.
3. Suspend services if still in breach.

2.5.2 Procedure for shift cancellation

1. Either party may terminate this Agreement on written notice for breach of any provision in this Agreement after a reasonable opportunity for remedy has been provided (by notice in writing) or by mutual written agreement.
2. Either party may, without the need for default, terminate this Agreement by not less than 2 weeks' notice in writing to the other.
3. If either party terminates the Agreement, the Provider will ensure that:
4. The National Disability Insurance Agency will be informed of the termination within fourteen (14) days from the Termination Date.

Shift Changes and Cancellations

You are required to provide 24 hours' notice to Gold Coast Community Lifestyles to change or cancel agreed support times. If you have advised Gold Coast Community Lifestyles outside of these times your NDIS package will be billed for the totality of the cancelled shift. Minimum 2 hours.

If your scheduled support exceeds the allocated shift times, Gold Coast Community Lifestyles will bill your NDIS package for the actual support time/hours delivered.

You can contact Gold Coast Community Lifestyles and your allocated Coordinator to discuss all elements of service delivery with your Provider.

3. Decision Making and Choice

GCCL will ensure that service participants are included as fully as possible in decision making and the choice and control of activities and events in their daily life in relation to the services they receive.

This is in line with GCCL's own values and the principles of the NDIS. GCCL respects the rights of service participants to ensure their right to actively participate in decisions made that affect their lives, experiencing the outcomes of personal choice and decisions and exercising rights all contribute to this. Service participants should be given every opportunity and support to make decisions.

3.1 Purpose

To ensure that service participants of GCCL are given the opportunity to actively participate in decisions that affect their lives and to provide support to service participants in decision making.

3.2 Scope

Staff, Board, Volunteers, and Service Participants'

3.3 Procedure

GCCL uses a range of mechanisms to ensure choice and control are retained by Service participants.

Service participants must:

- Be given the opportunity to make personal decisions and exercise control in all areas of their lives
- Be consulted in all decisions that affect them.
- Have choice, and be aware they have the choice, in activities of daily living.
- Be able to pursue individual interests.
- Have an individual routine.
- Participate in the development of their individual and future plans including the development of support plans and service agreements.

Service participants need to be aware of usual limitations and responsibilities such as:

- The need to respect other people's rights.
- The responsibility to abide by agreements.
- The limitations of support funding that is detailed in their NDIS Plan.

Staff must support service participants, not exercise control over them. In assisting a service participant to make a decision, staff must:

- Allow service participants to make mistakes (with due regard for their safety)
- Allow service participants the right to change their minds.
- Teach service participants about the rights of others.
- Give service participants reasonable time to make decisions.
- Assist service participants in seeking supports.
- Assist service participants to carry out responsibilities.
- Assist service participants when decisions adversely affect others.
- Take steps to avoid foreseeable risks (must be included in personalised plan)
- Assist service participants to understand limitations of support that may be detailed in their NDIS plan.

If the service participant is unable to make their own decisions and staff are making decisions for the service participant, staff **must** base these decisions on:

- Is it in the person's best interest?
- Is it the least restrictive of the person's rights?
- Has there been an appropriate communication method used with the service participant? (eg flashcards, photographs, Makaton)

NB: The Service Coordinator must involve the service participant, families, carers, and significant others in any major life decisions for the service participant.

Our commitment to choice and decision making is also clearly identified through the following ways;

'Right Relationship' with individual service-users, their families and our staff. Right relationship, as defined by Michael Kendrick (2008) is:

"...an ethical condition that is mutually created between services and those persons and groups whom they serve and it exists when the people served are seen and treated with appropriate respect, integrity and value and...where they are enabled to be decisively influential in how they are to be

assisted and ...where the service and those who conduct its' work are also similarly treated in a reciprocal manner"

3.3.1 Individual needs

Each service participant will participate in the formulation of their Service Agreement which will be flexible to respond to their changing needs, aspirations and choices.

In order to facilitate informed decision-making and choice, service communication methods will be appropriate for each person.

3.3.2 Advocacy

GCCL supports the participation of an advocate, where required, in assisting a service participant with decision making.

If staff are required to make a decision on behalf of the service participant, this will be based on the person's best interest and the knowledge of the needs and choices of the service participant.

3.3.3 Personal information

If personal information is required by someone outside GCCL, written consent will be required and service participants have the choice to refuse.

If an interview is sought by an external party, service participants will have the choice to attend (or not) and will be given the choice of alternative forms of interview.

3.3.4 Staff recruitment

Service participants and family members will be actively involved in the selection and training of their own Lifestyle Support staff. Interviews will be conducted with the service participant and family present and with their full authority over proceedings. GCCL encourages service participants and family members to be an integral part of this process and no recruitment will occur without the express consent of the service participant.

3.3.5 Least Restrictive Alternative

Service participants will be supported to take responsibility for their own choices and decisions, with the least restrictive alternative adopted if limits are deemed necessary. Reasonable care will be taken to avoid risks, without unduly limiting the individual's ability to exercise these responsibilities.

3.3.6 Autonomy

All participants have the right to autonomy, which is respected 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)

3.4 Sexual Behaviour

GCCL upholds the right of a person with disability to engage in any lawful sexual activity of their own consensual choosing, insofar as such activities do not impinge upon lawful rights of others.

3.4.1 Purpose

The purpose of this policy is to ensure the position of GCCL is clearly documented and that service participants and staff support and value the rights of people with a disability to enjoy a full life.

3.4.2 Scope

Service participants

3.4.3 Procedure

GCCL has established a set of guidelines to assist in upholding such rights.

These guidelines are intended for persons accessing services of the organisation, and staff working within those services.

- Service participants will be actively and positively supported by the organisation in developing and maintaining interpersonal relationships with persons of their choosing;
- Service participants will be actively and positively assisted by the organisation to develop appropriate (with regard to their relevant local community standards) communication skills that will enhance their ability to develop and maintain interpersonal relationships;
- Service participants will be actively and positively assisted by GCCL to develop appropriate (with regard to their relevant local community standards) skills that will enhance their ability to make informed choices regarding sexual activity and preference of their choice (eg. such assistance may include referral to counselling; Family planning; sexual education; etc.).
- Service participants will be actively and positively assisted by GCCL to develop appropriate (with regard to their relevant local community standards and environmental context) behavioural responses to their expressed sexual need.

It should be noted that GCCL does not have the expertise to offer direct counselling, or related services, with regard to the sexual needs of service participants. All such services would be referred to appropriately skilled entities outside of GCCL.

4. Privacy, Dignity and Confidentiality

GCCL recognises the right to privacy, dignity and confidentiality in all aspects of a person's life.

4.1 Purpose

The purpose of this policy is to identify the way in which GCCL safeguards the privacy, dignity and confidentiality of service participants.

4.2 Scope

This policy covers all service participants, staff, volunteers and Board members

4.3 Procedure

GCCL adheres to current legislation with regards to privacy laws as well as fundamental philosophical and ethical precepts when safeguarding the privacy and dignity of service participants as detailed below;

4.3.1.0 Personal information

GCCL abides by the National Privacy Principles under the Privacy Act 1998, a copy of this legislation is provided to all service participants through our Policy and Procedure Manual, Self-Direction Handbook and to all staff within the Employee Handbook all.

4.3.1.1 2014 law reform

The Privacy Amendment (Enhancing Privacy Protection) Act 2012 (Privacy Amendment Act) made many significant changes to the Privacy Act 1988 (Privacy Act). These changes commenced on 12 March 2014. The Privacy Regulation 2013, made under the Privacy Act, also commenced on 12 March 2014. Freedom of Information Act 1992 (Qld).

4.3.2 Collection of Information

Information will only be collected that is relevant to service provision, as outlined in the Queensland Information Privacy Act 2009. GCCL will ensure that the information collected is correct and regularly updated.

4.3.3 Consent by Individuals

Information will not be collected or given out without the informed consent of the service participant and/or family.

4.3.4 Storage of information

Any information gathered will be stored in a safe, secure GCCL office environment and only revealed to relevant personnel as needed.

Any privacy breaches will be reported to the NDIA in accordance with the Terms of Business. We only use personal information for the purposes for which it is given to us, or for purposes which are directly related to one of our functions or activities.

With strict adherence to the Privacy Act and relevant state legislation, personal information is only disclosed for the purposes for which you gave it to us, or for directly related purposes that you would reasonably expect or if you agree. As specified in the Privacy Act, exceptions refer to situations where a disclosure is required or authorised by law or if a disclosure can lessen or prevent a serious threat to life, health or safety.

4.3.5 Access to information

Any service participant may have access to the personal information that GCCL has stored. An advocate may be used to support a person to access their information.

GCCL will ensure that the dignity of service participants is respected, in relation to their individual needs and circumstances.

4.3.6 Disposal of Information

All paper based personal information will be disposed of using a shredder. Closed files will be destroyed according to the archive register. Electronic information is stored on a secure server and archived after file closure. Disposal of information occurs as per GCCL's Archive Policy and Procedure.

Notifiable Data Breach Scheme

On February 22nd 2018, the Privacy Amendment (Notifiable Data Breaches) Act 2017 (Cth) came into force to establish the Notifiable Data Breaches (NDB).

Under the NDB scheme, Gold Coast Community Lifestyles has an obligation to make a notification if:

- a *data breach* is believed to have occurred, and;
- it is likely to result in *serious harm* to the individual(s) whose personal information is involved in the breach, and
- *remedial action* has not been able prevent the risk of serious harm.

The NDB scheme requires Gold Coast Community Lifestyles to assess the breach and make a notification to the particular individual (service-user/s) affected and the Australian Information Commissioner (the OAIC).

The following definitions have been put together to assist in application of the RDB scheme.

A data breach: A data breach occurs when personal information held by the service is lost or subjected to unauthorised access or disclosure.

The likelihood of serious harm: ‘Serious harm’ is not defined in the Privacy Act. In the context of a data breach, serious harm to an individual may include serious physical, psychological, emotional, financial, or reputational harm.

The concept of ‘serious harm’ must be assessed from the perspective of a ‘reasonable person’ rather than the individual whose personal information was part of the data breach (or any other person).

The phrase ‘likely to occur’ means the risk of serious harm to an individual is more probable than not (rather than possible).

Remedial action: Under the NDB scheme the service has the opportunity to take positive steps to address a data breach in a timely manner, and therefore avoid the need to notify.

- Queensland Police: 131 444
- Queensland Crime and Misconduct Commission: 07 3360 6060
- Office of the Public Guardian Adults: 1300 653 187
- Office of the Public Guardian Children & Young people: 1300 653 187

4.4 Code Of Conduct

4.4.1 Purpose

GCCL Code of Conduct shall be used to guide members of the organisation, members of the Board, Staff, Service participants and Volunteers to ensure the best possible standards of service and professional conduct.

The NDIS Code of Conduct is adopted by GCCL:

The Code of Conduct requires workers and providers who deliver NDIS supports to:

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

Further, GCCL embodies the principles of:

1. Social justice.

2. Natural justice.
3. Confidentiality.
4. Maintenance of the Organisation's integrity.

4.4.2 Scope

Board, Staff, Service Participants and Volunteers.

4.4.3 Responsibilities

It is the responsibility of the Board, staff, service participants and volunteers to be familiar with and to adhere to the Code of Conduct.

4.4.4 Procedure

GCCL Board members, staff, volunteers and service participants are introduced to the code of conduct through their relevant induction processes and are all required to sign the Code of Conduct upon agreement with the principles outlined. This includes both the NDIS Code of Conduct as well as GCCL's focus on the following:

Social Justice

The notion of social justice is integral to the functioning and operation of GCCL at all levels, including management. The principles of social justice (access, equity, participation and rights) shall underpin the practice of Board, Staff, Service participants and Volunteers.

Natural Justice

Board, Staff, Service participants and Volunteers will at all times act fairly, in good faith and without bias or prejudice. This encompasses a commitment to inclusive decision-making, i.e. decision-making processes that are based on consultation with key stakeholders, the right of access to information about decisions, and the right of appeal for those affected by a decision.

Confidentiality

The privacy of the Board, Staff, Service participants and Volunteers will be respected, and information obtained in the course of professional conduct will be held in confidence.

Management will respect the confidentiality of information obtained in the course of any meetings or other dealings with the association and not share information with reference the Board, Staff, Service participants and Volunteers to others outside GCCL. Where Management hold concerns about the operational functioning GCCL, these concerns should be brought to the attention of the Service Coordinator.

Maintenance of the Organisation's Integrity

All members of the Board, Staff, Service participants and Volunteers:

- Adhere to the Conflict of Interest Policy.
- Ensure that personal relationships, both within and outside GCCL, do not adversely affect their performance, or that of others, in the conduct of GCCL's business; and ensure their role is performed with integrity and professionalism, and that resources of GCCL are used effectively and efficiently.

Standards for Provision of Support Services

All persons involved in the provision of services including the Board, Staff, Service participants and Volunteers are expected to show a positive attitude toward service participants with whom they have had contact and are required to:

- Provide appropriate role models for people accessing the service.
- Recognise that physical, sexual, emotional and verbal abuse is totally unacceptable behaviour.
- Recognise that racist, sexist or other discriminatory words or actions are unacceptable.
- Accept that others are entitled to have religious or cultural beliefs, sexual or political persuasion different from their own.
- Ensure that their activities contribute to maintaining all programs as efficient, effective and accountable programs within GCCL
- Respect the privacy of individuals when in group settings.
- Maintain confidentiality about information shared and do not enter into gossiping about other people's life and choices.
- Respect the information given to them by others, without judging or being critical of the choices and decisions being made by others.
- Continue with their own personal development and self-care.
- Agree to support GCCL policy to identify boundary issue matters and agree to have them dealt with appropriately.

The Board, Staff, Service participants and Volunteers need to be aware of their personal limitations, values and needs and ensure that these do not overshadow GCCL's primary purpose, do not alienate or intimidate members of the organisation and Service participants, nor curtail professional boundaries between service participants and GCCL's staff or interfere with prompt, effective resolution of conflict

5. Stakeholders

5.1 Purpose

The purpose of this policy is to ensure maximum engagement with our stakeholders and to outline the ways in which this occurs. The emphasis on stakeholder engagement to inform service design acknowledges that community services are complex and can benefit from the input of those who can influence and are impacted by those services.

5.2 Definitions

Stakeholder – a person with an interest or concern in something. In the context of community services this refers to a person who has relevant knowledge of, is able to influence, or is affected by the proposed service. This includes staff, board members, service participants and their families.

Engagement – the action of being interested in or involved. In the context of community services, it refers to the process of working with stakeholders to achieve a defined purpose.

5.3 Scope

This policy covers the strategic and operational elements of GCCL.

5.4 Procedure

To ensure the success of an engagement process, it is important to conduct these processes in a manner which is consistent with the following values:

- Trust;
- Respect;
- Openness; and
- Transparency

These values can also serve as measures to be used to evaluate the success of the Engagement processes.

The manner in which GCCL engages its stakeholders is through the following ways;

- Annual Collaborative Service participant NDIS Plan review (upon request)
- Annual Service Participant Surveys.
- Family Representative Nomination processes.
- Feedback Form.
- Collaborative Employee Appraisals.
- Newsletter Dissemination.
- Annual General Meeting.
- Quarterly Board Meetings.
- Strategic Planning Day.
- Website.

5.4.1 External Stakeholders who influence service delivery

The National Disability Insurance Scheme is a major stakeholder in that the delivery of NDIS plans to participants, directly affects GCCL's ability to deliver a service.

Other external stakeholders that influence the ability of GCCL to deliver services include:

- Adult Guardian.
- Public Trustee.
- Child Safety.
- Other government departments that have control of some aspect of a participant's life.
- Other disability service organisations that are enabling an aspect of a participant's NDIS plan.

Expectations of participants often need to be managed as these external stakeholders' processes may determine the funding, timing, complexity, use of resources and outcomes of GCCL services.

5.5 Participation and Inclusion

GCCL supports and encourages service participants to participate and be included in the life of the community.

All Service Agreements will be based on supporting the person to be a valued part of their community.

All staff employed by GCCL will have a firm commitment to the inclusion and valued participation of all people in their community.

Upon service access, service participants and their supports/advocate will agree that the supports provided will be to maintain valued participation in local community.

GCCL support will promote the development and maintenance of informal supports and social networks in the life of the service participant.

5.6 Valued Status

GCCL will provide opportunities to service participants to develop skills to participate in and achieve valued roles within the community.

GCCL will promote a belief in the ability of service participants to fulfil valued roles in the community through values-based staff training, community development and individualised planning.

Service Agreements will provide opportunities to attain and maintain valued social roles for the service participant, within their local community.

Staff will be strongly encouraged to participate in Social Role Valorisation training, as conducted by SRV Australia and be supported to implement these principles with the person they support. This training promotes the importance of culturally valued social roles for people who are generally devalued within our society.

6. Complaints and Disputes

GCCL will take a proactive approach to complaints and disputes management that safeguards service-users / supports from retributive action when raising complaints. GCCL adheres to the NDIS complaints management and resolution system for registered NDIS providers.

6.1 Purpose

GCCL is committed to the development and maintenance of a fair, equitable and safe environment for staff, service participants and stakeholders and GCCL's Complaints Policy and Procedures prioritise feedback as a way of ensuring continuous quality improvement.

6.2 Scope

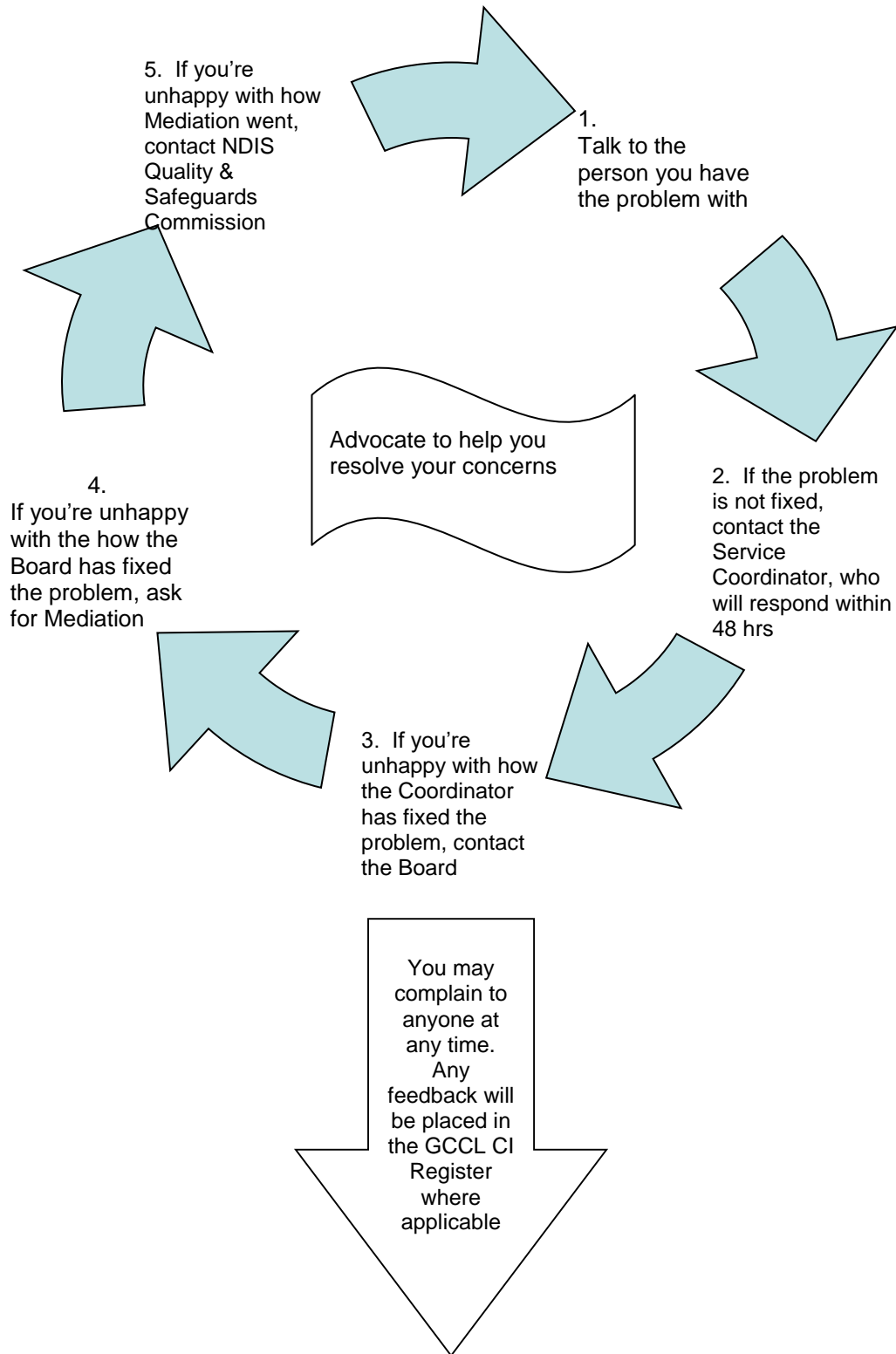
GCCL Board, Staff, Volunteers and Service participants.

6.3 Procedure

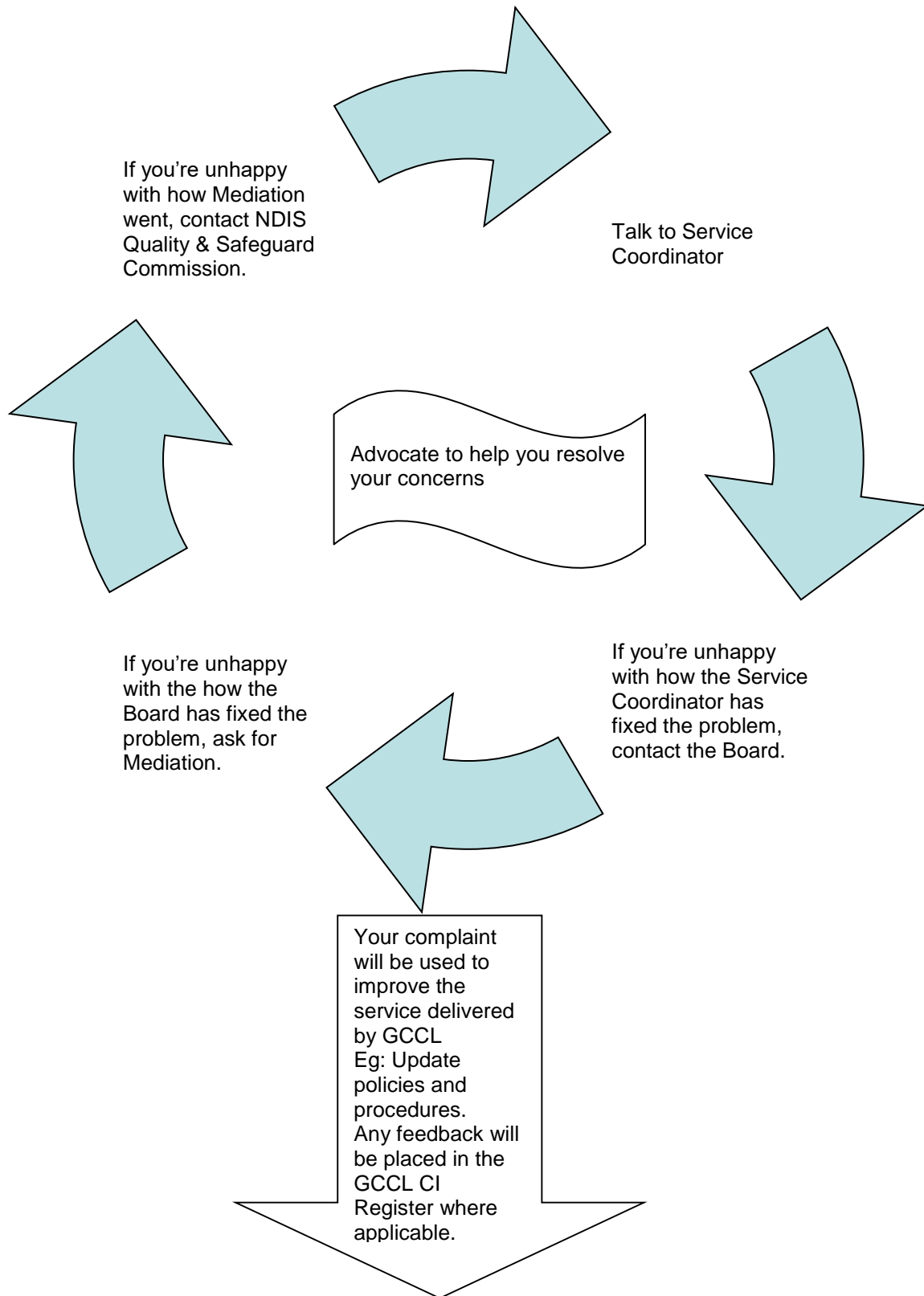
GCCL encourages people to raise their concerns, without fear of retributive action and the Complaints procedure will be discussed at each relevant induction. The Complaints procedure will be provided in an appropriate format for each person.

GCCL supports the participation of an advocate, if required, to ensure issues are clear and that each person's views are being heard correctly.

6.3.1 If your complaint is about someone within GCCL



6.3.2 If your complaint is about the Service Coordinator



You may complain to ANYONE at GCCL at ANYTIME about your service. The flowchart is a guideline to help streamline the process but any Staff of GCCL will be available to assist you to make a complaint.

6.3.3

The NDIS Quality and Safeguards Commission (NDIS Commission) is an independent government body that works to improve the quality and safety of NDIS funded services and supports.

If you need to speak up about your NDIS funded service – speak to us.

Raising a complaint with us can also lead to better services for everyone.

Concerns about the quality and safety of supports and services.

We take complaints about whether an NDIS funded service has been provided in a safe way and to an appropriate standard.

You can also complain about how an NDIS provider has dealt with your complaint.

If you are concerned about how you will be treated, you can make a confidential complaint.

What complaints we don't take

- Complaints about the NDIA.
- NDIS plan access.
- NDIS participant plans.

Please direct these to the NDIA.

If you're unsure who to contact, contact us and we can help direct you.

Making a complaint

We encourage you to try to talk directly to your NDIS service provider first to resolve a complaint. All registered providers must have an effective complaints management system. If you do not feel comfortable speaking to the provider or are not satisfied with the result of your complaint, please contact us. Our complaint service is free, completely independent of the NDIS and confidential if needed. We promise to listen respectfully to your situation in full and discuss steps going forward.

In resolving an issue, we may:

- **Request information to clarify the issues.**
- **Help you communicate with an NDIS provider.**
- **With your consent, speak to the NDIS provider.**
- **Communicate responses from an NDIS provider to you.**

You may withdraw your complaint at any time.

An issue may be referred to conciliation or investigation. Conciliation helps everyone to understand the issues and to reach an agreement on how an issue can be resolved.

An investigation may be conducted if serious compliance issues or risks to people with disability are raised in the complaint.

Where to go

"I'm not happy with an NDIS funded service"

The NDIS Commission

Call 1800 035 544

Visit www.ndiscommission.gov.au

"I'm not happy with an NDIA action or decision"

NDIA or Commonwealth Ombudsman

Call 1800 800 110

Visit www.ndis.gov.au

www.ombudsman.gov.au

"I'm not happy with a service provided by another agency or body"

Your state or territory complaints body

Find links on our website

Visit www.ndiscommission.gov.au

["I'm at immediate risk of harm, or have concerns about a person's wellbeing"](#)

Call 000 immediately.

External Reporting

- Queensland Police: 131 444
- Queensland Crime and Misconduct Commission: 07 3360 6060
- Office of the Public Guardian Adults: 1300 653 187
- Office of the Public Guardian Children & Young people: 1300 653 187 Public Trustee 1300 360 044

Who can make a complaint

Anyone can make a complaint.

This includes NDIS participants, other people with disability, friends, families, carers, advocates, workers etc.

If you need to make a complaint about your NDIS funded services:

Complaint contact form

www.ndiscommission.gov.au Call us 1800 035 544 (freecall from landlines)

National Relay Service

www.relayservice.gov.au

then 1800 035 544

Translating and Interpreting Service

131 450

6.4 Appeals and seeking outside assistance

If the complaint involves the Service Coordinator, the matter can be referred to the Board.

If the complaint cannot be resolved with GCCL, you may lodge a complaint with the NDIS Quality and Safeguards Commission. Another option could be to seek support from the Dispute Resolution Branch of the Department of Justice and Attorney General. You may also wish to seek

NDIS Quality and Safeguards Commission

Complaint contact form: <https://www.ndiscommission.gov.au/about/complaints-feedback/contact>

Phone: [1800 035 544](tel:1800035544)

9am to 5pm local time, Monday to Friday.

Excluding public holidays.

Dispute Resolution Branch

Floor 1 Brisbane Magistrates Court

363 George Street, Brisbane Qld 4000

GPO Box 149 Brisbane Qld 4001

Ph: (07) 3239 6007

Toll free outside Brisbane 1800 017 288 Fax: (07) 3239 0200

If the complaint still cannot be resolved, the service participant should be informed that they have the right to make a complaint to:

Anti-Discrimination Commission

Level 20, 53 Albert Street, Brisbane

(cnr Albert and Margaret Streets near the City Botanic Gardens)

Postal address

City East Post Shop PO Box 15565 City East QLD 4002.

Telephone: 1300 130 670 (Toll Free) TTY: 1300 130 680 Fax (07)3247 0960

Administrative Appeals Tribunal (for issues with NDIS Plans that cannot be resolved with the LAC or NDIS Planner)

Phone: 1800 228 333

Online application: <https://www.aat.gov.au/apply-online>

7. Conflict of Interest

A conflict of interest is a situation in which someone in a position of trust has competing professional and/or personal interests. Such competing interests can make it difficult to fulfil his or her duties fairly. Even if there is no evidence of improper actions, a conflict of interest can create an appearance of impropriety that can undermine confidence in the ability of that person to act properly.

7.1 Purpose

GCCL will provide a fair and equitable service and decisions will be made without undue bias. Where a conflict of interest is identified measures will be taken to minimise any potential risk to impartiality.

7.2 Scope

Any conflict of interest on the part of Board members, Staff and Service Participants will be declared, recorded and managed.

7.3 Procedure

During the staff recruitment process and resulting relevant induction processes, conflict of interest as a principle is discussed. Potential Board members, staff, volunteers and service participants are asked to declare any possible conflicts of interest.

If a declaration is made and a conflict of interest identified this will be added to the **Conflict of Interest Register**. Depending on the identified conflict of interest, measures may be required to ensure GCCL's ability to provide impartiality.

8. Service Delivery and Support Coordination – Conflict of Interest

8.1 Purpose

GCCL will inform all service participants of their right and choice to access Support Coordination and Service Delivery services from any provider of their choice. Support Coordination is a separate offering by GCCL which is detailed in Section 6 of this policy and procedure manual.

8.2 Scope

GCCL Board, Staff and Service participants.

8.3 Procedure

Support Coordination is not deemed service delivery by GCCL. It is a separate offering where GCCL encourages service participants to research other service providers and choose the provider that best serves their needs in relation to both Support Coordination and Service Delivery. Service participants and Support Coordination participants are provided with information stating GCCL's provision of both services and encourages service participants to explore all Support Coordination and Service Delivery options available to them. They will not at any time be coerced, encouraged or induced to use GCCL services.

9. Critical Incident/Accident Reporting

A critical incident or accident is an event or occurrence that has the potential to cause harm. This can be with or without intent.

9.1 Purpose

The purpose of this policy is to ensure;

- GCCL's Duty of Care to service participants, staff, volunteers and the general public is met
- The management of critical incidents/accidents is timely, responsive and works toward risk minimisation in the future
- GCCL's statutory and legislative obligations are fulfilled

9.2 Scope

The policy applies to all staff of GCCL, service participants and volunteers.

9.3 Procedure

When a critical incident occurs staff will report the incident to the Service Coordinator, or when not available, to the Executive Officer.

Depending on the nature of the critical incident, appropriate action will be taken immediately, initially ensuring the safety of all parties involved. This may include any or all of the following:

- first aid response, including calling emergency services
- medical treatment,
- counselling services,
- provision of alternate support workers, and
- debriefing.

Staff will be advised to complete an **Incident/Accident Report Form** to be forwarded to the HR or Service Coordinator

Once a form is received by the Service Coordinator it is entered into the **Incident/Accident Register/CRM** and forwarded to the funding body if relevant. Situations that require reporting to the funding body include where there is evidence or allegations of a serious health and safety or abuse risk, harm or risk of harm, financial impropriety and/or professional misconduct. Also, the Board may be advised.

The Service Coordinator includes details of any critical incidents in the quarterly **Service Coordinator Report**.

Staff are advised in a timely manner of any outcomes relating to the critical incident.

9.3.1 Major Incidents

Major incidents are to be reported to the National Disability Insurance Scheme Quality and Safeguards Commission. Reportable incidents are notified via the [NDIS Commission Portal](#).

Mandatory information includes:

- description of the incident – including the impact on, harm caused to, the person with disability (exception for death)
- details of the incident – time, date, and place if you know these details (including witnesses)
- response – immediate actions taken in response to the incident, including risk assessments, actions to ensure the health, safety and wellbeing of people with disability affected by the incident, and whether it has been reported to police or another body

It is also best practice to include additional information:

- support – how you have supported, assisted, and involved the affected person to ensure their health, safety, and wellbeing
- decisions - why you consider this to be a reportable incident
- investigation – the details and outcomes of any investigation undertaken
- risk assessment – what you have done to reduce the risk or prevent similar incidents from occurring.

Staff involved in a major incidents will be supported by an external de-briefer (eg: Qld Ambulance Service, Qld Police Service, Mental Health, and qualified Counsellor)

Any staff who experience prolonged distress will be referred to an appropriate counselling service.

9.3.2 What to report

GCCL LTD POLICY MANUAL

Section 2 Services Delivery

A Major incident that is required to be reported includes:

Type of incident	Timeframe to report
Death of a person with disability.	24 hours
Serious injury of a person with disability.	24 hours
Abuse or neglect of a person with disability.	24 hours
Unlawful sexual or physical contact, or assault of, a person with disability.	24 hours
Sexual misconduct committed against, or in the presence of, a person with disability, including grooming of the person for sexual activity.	24 hours
The use of a restrictive practice in relation to a person with disability if the use is not in accordance with a required state or territory authorisation and/or not in accordance with a behaviour support plan.	5 business days

9.3.3 Duty of Care

Duty of Care is breached by failing to do what is reasonable or by doing something unreasonable that results in harm, loss or injury to another. This can be physical harm, economic loss or psychological trauma. Duty of Care must be balanced with Dignity of Risk, that is, the right of the individual to take calculated risks. Everyone has a right to an assumption of competence. Informed decision-making involves general awareness of the consequences of the decision, and that the decision is made voluntarily and without coercion.

Reasonableness

The reasonableness of a person's action or inaction will be assessed by considering how a hypothetical reasonable person would have behaved in the same situation. If the person's work requires special training or knowledge, the hypothetical person will have the same training or knowledge and occupy the same position.

The level of what is determined to be reasonable will depend on the relationship. The more dependent a person is on another person / organisation, the higher the requirement to ensure that they are not harmed.

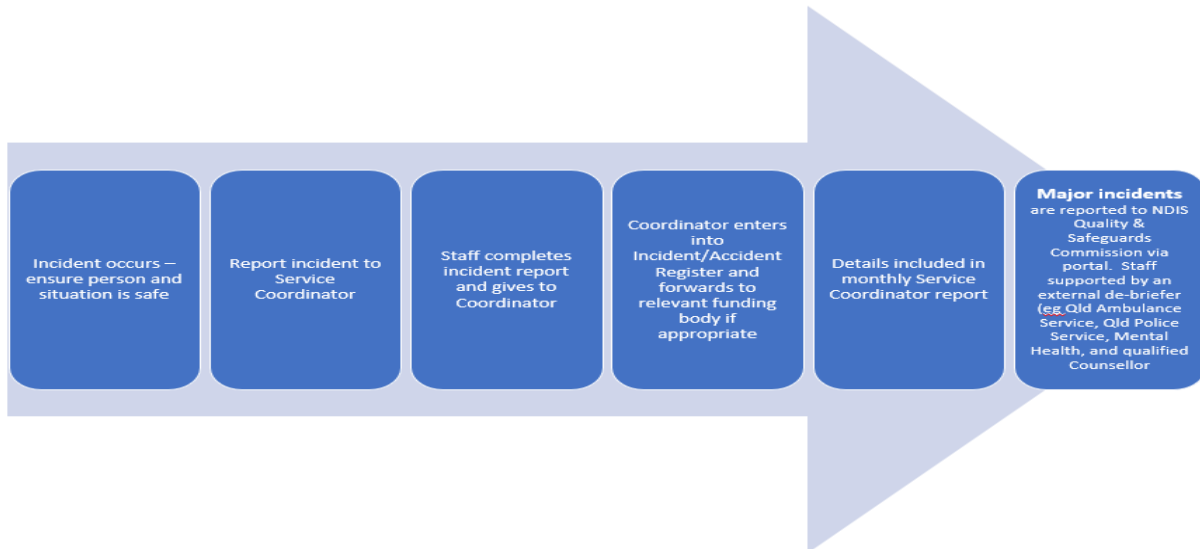
Negligence

Negligence is the legal term for the charges that would be laid in the case of serious breaches of duty of care.

To be considered legally negligent each of the following must be present:

1. Duty of care - as outlined above;
2. Breach of duty of care – the person owing the duty of care must have done something a reasonable person would not do, or omitted to do something a reasonable person would do, in the given situation;
3. An injury – physical, emotional or financial harm must have been caused by the unreasonable action.

9.4 Incident Flowchart



10. Responding to abuse, neglect or exploitation

It is the responsibility of all service participants, staff and members of GCCL to recognise that abuse of any sort is unacceptable, and to report any suspected abuse to the National Quality and Safeguards Commission (National Disability Insurance Scheme Act 2013) and any other authorities listed in **10.2.4**.

10.1 Purpose

The purpose of this Policy is to prevent and respond to the abuse, neglect and exploitation of people with a disability relating to the services provided by GCCL and all Staff members.

10.2 Scope

This policy applies to all service participants, staff, and members of GCCL and utilises common social and legal understandings of relevant terminology.

10.2.1 Definitions

Abuse

the violation of a person's human or civil rights, through an act or actions by another person, or persons. Abuse includes, but is not limited to the following:

Physical abuse or violence

Any non-accidental physical injury or injuries to a child or adult, such as inflicting pain of any sort, or causing bruises, fractures, burns, electric shock, or unpleasant sensation (eg tastes, heat or cold) as well as restrictive practices which are not contained in the service participant's Individual support plan.

Sexual abuse

Any sexual contact between an adult and a child 16 years of age or under; or any sexual activity with an adult who is unable to understand, has not given consent, is threatened, coerced or forced to engage in sexual behaviour. Sexual activity includes intercourse, genital manipulation, masturbation, voyeurism, sexual harassment, and also inappropriate exposure to pornographic media etc.

Psychological, emotional or aggressive abuse

Verbal communication that is threatening or demeaning, threats of maltreatment, harassment, humiliation, intimidation, failure to interact with a person or to acknowledge the person's presence, or denial of cultural or religious needs and preferences.

Financial abuse

Refers to the illegal or improper use of a person's property or finances or the withholding of another person's resources by someone with whom the person has a relationship implying trust.

Chemical abuse

Refers to any misuse of medications and prescriptions, including the withholding of medication and over-medication.

Legal or civil abuse

Denial of access to justice or legal systems that are available to other citizens and denial of informal or formal advocacy support requested by the service participant or his/her substitute decision maker.

Neglect

Is the failure to provide the necessary care, aid or guidance to dependent adults or children by those responsible for their care. Neglect includes, but is not limited to the following:

- Physical neglect – failure to provide adequate food, shelter, clothing protection, supervision and medical and dental care, or to place persons at undue risk through unsafe environments or practices.
- Passive neglect – the non-wilful failure to fulfil care-taking responsibilities because of inadequate caregiver knowledge, infirmity, or disputing the value of prescribed services
- Wilful deprivation – wilfully denying a person access to medication medical care, shelter, food, a therapeutic device or other physical assistance, thereby exposing that person to risk of physical, mental or emotional harm.
- Emotional neglect – the failure to provide the nurturing or stimulation needed for the social, intellectual and emotional growth or wellbeing of an adult or child
- Crimes of omission – the failure to act with appropriate duty of care.

Exploitation

Is taking advantage of the vulnerability of a person with a disability in order to use them, or their resources, for another's profit or advantage (eg financial abuse)

Challenging behaviour

Behaviour which is likely to seriously limit use of, or result in the person being denied access to ordinary community facilities" (Emerson, 2001)

10.2.2 Responsibilities

The GCCL Board, Manager and the Service Coordinators have specific responsibilities to ensure the prevention, identification and response to the abuse, neglect and exploitation of service participants and all Staff Members.

10.2.2.1 Prevention of abuse, neglect and exploitation of people with a disability and all Staff

It is the role of the Service Coordinator to:

- ensure that all staff and volunteers are aware of, trained in, compliant with and provide active support to staff to create an appropriate service culture in accordance with the policy;
- ensure staff are trained to recognize and prevent/minimize the occurrence or recurrence of abuse, neglect and exploitation of service participants within a service delivery context; and
- Develop a coordinated and uniform approach to promoting the rights of service participants within their families, communities and cultures.

10.2.2.2 Identification of Abuse, Neglect and Exploitation

It is the role of the Service Coordinator to ensure that:

- systems are in place to identify and remedy gaps which contributed to a service participant experiencing abuse, neglect or exploitation; and
- Staff are trained in early intervention approaches where potential or actual abuse, neglect or exploitation of service participants is identified through risk assessment

10.2.2.3 Responding to abuse, neglect and exploitation of people with a disability and Staff

It is the role of the Service Coordinator to ensure:

- that there is a culture of no retribution for any person who reports abuse, neglect or exploitation of a person with disability and all Staff Members
- adherence with the NDIS Quality and Safeguards Practice Standards for continuous improvement;
- that relevant staff advise service participants, their families and advocates about:
 - * Support services, which are equipped to identify abuse, neglect and exploitation and able to refer individuals to appropriate specialist services;
 - * Refer to Specialist for risk assessment for harm to self or others.
 - * Their right to pursue grievances and complaints and access to the criminal justice system;
 - * That any concerned person, including but not limited to, the person with a disability, another service participant, relative, friend or person from the community is able to make a report or an allegation of abuse, neglect and exploitation, without fear of retaliation or retribution;

GCCL LTD POLICY MANUAL

Section 2 Services Delivery

- * That all staff supporting service participants are respectful of their rights and needs;
- * The implementation of the requirement to report the abuse, neglect or exploitation of service participants to the relevant authority in line with the requirements of the Complaints Policy & Procedure, Incident/Accident Reporting, and the Critical Incident Policy and Procedure.

It is the role of all staff to:

- Support management to create a culture of no retribution for reporting of suspected abuse, neglect or exploitation;
- Provide active support to service participants to create an appropriate service culture in accordance with the policy provide services to service participants in a manner that is consistent with the policy and procedures
- Report all alleged or suspected instances of abuse, neglect and exploitation in accordance with the policy and procedures of the NDIS Quality and Safeguards Commission
- Inform guardian or substitute decision maker of all alleged or suspected instances of abuse, neglect and exploitation;
- Cooperate with the investigation of any complaint relating to the provision of services; and
- Provide appropriate support to the person making the report.
- Seek advice to refer to Specialist for risk assessment for harm to self or others.

10.2.3 Policy

GCCL is committed to preventing and responding to the abuse, neglect and exploitation of people with a disability and Staff. In instances where the abuse, neglect and exploitation of service participants does occur, GCCL will respond to the abuse, neglect and exploitation of people with a disability and the Staff Member.

The human rights principles of the *Disability Services Act 2006* include the principle that people with a disability have the same human rights as other members of society and should be empowered to exercise their rights. This is best achieved through an integrated approach that targets the cultural, environmental and interpersonal causes of abuse, neglect and exploitation.

In accordance with the National Quality Safeguards Commission Rules and National Disability Insurance Scheme Act 2013 GCCL will:

- Ensure that the health, safety and well-being of service participants is the paramount consideration in service provision and that service participants are provided with maximum protection from abuse, neglect and exploitation.
- Promote a culture of no retribution in the case of reporting, including reporting of suspected or alleged abuse, neglect or exploitation or incidents suggestive of abuse, neglect or exploitation.
- Ensure that there are systems to identify abuse, neglect or exploitation of service participants.

- Ensure timely, adequate and appropriate responses to incidents.
- Foster best practice through ongoing systems review.
- Promote an integrated, evidence-based approach to the prevention and identification of and response to abuse, neglect and exploitation, which is supported by ongoing and appropriate workforce development and training.

10.2.3.1 Prevention

The Manager/Service Coordinator will send service participants/families/advocates/guardians and all Staff the GCCL Abuse, Neglect or Exploitation Policy & Procedure to make the service participants aware of how they might be being abused, neglected or exploited. The Service Coordinator will send staff of GCCL the Abuse, Neglect or Exploitation Policy & Procedure to ensure that they are aware of exactly what abuse, neglected or exploitation is. Their responsibility is to abide by this Policy & Procedure.

- That it is their responsibility to report any suspicion of abuse neglect or exploitation toward the service participant that they may witness from others and how there will be no retribution for any reports made.
- That GCCL provides active support to staff to create an appropriate service culture in abuse, neglect or exploitation.
- Abuse, Neglect or Exploitation can be a sign of more support needed, a lack of awareness and the need for more training.

NB: Internal staff training will be provided on this Policy & Procedure.

10.2.4 Procedure

If there is a suspected instance of abuse, neglect or exploitation, the Complaints procedure and/or the Critical Incident Policy/Procedure should be followed. The alleged victim and the alleged offender will be separated, and where appropriate, medical assistance sought.

An assessment of the instance will be assessed by the Board and external expertise.

The degree of abuse, neglect or exploitation occurring will determine whether:

- More support is required.
- More awareness is needed.
- More training is required.
- External intervention is required.

If the person reporting a suspected instance of abuse, neglect or exploitation is dissatisfied with the response of GCCL, or feel they are unable to refer the matter to the organisation, they may refer the matter to:

- Queensland Police 131 444
- The NDIS Quality and Safeguards Commission. 1800 035 544

GCCL LTD POLICY MANUAL

Section 2 Services Delivery

- The Office of Adult Guardian, (07) 3884 6650
- The Commissioner for Children and Young People, (07) 3900 6000
- The Public Advocate, +61 7 3738 9531
- The Public Trustee, 1300 360 044
- The Queensland Crime and Misconduct Commission (07) 3360 6060
- Work Cover 1300 362 128

All staff, service participants, Board members and volunteers will be made familiar with the policy and procedure regarding Abuse, Neglect and Exploitation.

All staff will be trained to recognize and prevent/minimize the occurrence or recurrence of abuse, neglect and exploitation of service participants within a service delivery context.

GCCL will ensure that anyone is able to make a report or an allegation of abuse, neglect and exploitation, without fear of retaliation or retribution.

10.2.4.1 Responding to a disclosure of harm or potential harm arising outside our service, including a risk of suicide or self harm:

Depending on the nature of the incident, appropriate action will be taken immediately, initially ensuring the safety of all parties involved.

This may include any or all of the following:

- first aid response, including calling emergency services
- medical treatment,
- counselling services,
- provision of alternate support workers, and
- debriefing

Major incidents will be managed by an external de-briefer (eg: Qld Ambulance Service, Qld Police Service, Mental Health, and qualified Counsellor). Any staff who experience prolonged distress will be referred to an appropriate counselling service. The following experts or agency may be contacted with the consent of the person involved.

- Lifeline 131 114
- Queensland Police 131 444
- NDIS Quality and Safeguards Commission 1800 035 544
- The Office of Adult Guardian (07) 3884 6650
- The Commissioner for Children and Young People (07) 3900 6000
- The Public Advocate +61 7 3738 9531
- The Ombudsman 3005 7000
- The Public Trustee 1300 360 044
- The Queensland Crime and Misconduct Commission (07) 3360 6060
- Work Cover 1300 362 128
- EPA assist (08) 8204 2004

11. Epidemic/Pandemic

From time to time infectious diseases develop into epidemics or pandemics and create increased risks for the community. These occasions require specific policies targeted at the particular disease in question and general efforts at preparedness.

Gold Coast Community Lifestyles wishes as far as possible to protect its service participants, staff, its volunteers, and the general public from infection or contagion by epidemics and/or pandemics.

Gold Coast Community Lifestyles will facilitate, through its policies and procedures, strategies designed to reduce risks to its participants, its staff, its volunteers, and the general public.

Gold Coast Community Lifestyles will comply with all directions from authorised public health officers and recognised medical authorities in relation to the epidemic or pandemic.

11.1 Purpose

The purpose of this policy is to outline the strategies and actions that Gold Coast Community Lifestyles intends to take to prevent the transmission of infectious diseases that are epidemics or pandemics, and control the transmission of infectious diseases when a case/s is identified.

For the purpose of this policy, infectious diseases mean diseases caused by pathogenic microorganisms, such as bacteria, viruses, parasites or fungi; the diseases can be spread, directly or indirectly, from one person to another. This policy is focused on infectious diseases that are declared to be an epidemic or pandemic.

11.2 Scope

This policy applies to:

Employees	Directors	Officers	Contractors (including employees of contractors)	Volunteers	Suppliers	Consultants
✓	✓	✓	✓	✓	✓	✓

11.3 Policy

Gold Coast Community Lifestyles will as far as possible plan for and make advance preparations for the possibility that its operations will be affected by an epidemic or pandemic.

In the event of an epidemic or pandemic, Gold Coast Community Lifestyles will, as far as possible:

- Assist its participants, staff, volunteers and others, as relevant, to minimise their exposure to the illness concerned.
- Encourage and assist those who have reason to believe that they are at risk of contracting the epidemic or pandemic to obtain a diagnosis.
- Support employees, volunteers, contractors and participants to take reasonable precautions to prevent infection or contagion.
- Maintain its services and operations throughout the period of concern.

In the event of an infectious disease being declared an epidemic or pandemic, Gold Coast Community Lifestyles requires people covered by this Policy to take the following precautions

- Regularly and thoroughly clean your hands with an alcohol-based hand rub or wash them with soap and water.
- Maintain at least 1.5 metre distance between yourself and anyone who is coughing or sneezing.
- Avoid touching your eyes, nose and mouth, or shaking hands with others.

- Make sure you follow good hygiene and encourage others to do the same. This means covering your mouth and nose with your bent elbow or tissue when you cough or sneeze, and disposing of used tissues immediately.
- Stay home if you feel unwell. If you are well enough to work but would like to minimise the risk of infecting others, ask your line manager whether you can temporarily work from home.
- Keep up to date on the latest hotspots (cities or local areas where the pandemic or epidemic is spreading widely). If possible, avoid traveling to places - especially if you are more at risk.
- If you are or are likely to be contagious, notify your manager as soon as possible. It may be possible or necessary for you to self-isolate by staying at home until you recover.
- Seek medical advice promptly and follow the directions of your local health authority.

11.4 Leave and Flexibility

Gold Coast Community Lifestyles recognises that staff may request or require paid and unpaid leave when they are unwell, at risk of or vulnerable to infection, and at risk of infecting others.

Workers may make use of leave consistent with Gold Coast Community Lifestyles leave policy, relevant industrial instruments and the National Employment Standards (including access to unpaid leave).

Gold Coast Community Lifestyles may, at its discretion, direct those affected or reasonably at risk of being affected by the pandemic or epidemic, to remain away from the workplace or work remotely.

11.5 Notes

In carrying out the procedures listed below, Gold Coast Community Lifestyles will be guided by the information and directions provided by local health authorities and the World Health Organisation, and its occupational health and safety obligations.

11.6 Related Documents

Australian Health Management Plan for Pandemic Influenza ([AHMPPI](#))

[ACT - Australian Capital Territory](#)

[NSW - New South Wales](#)

[NT - Northern Territory](#)

[Qld - Queensland](#)

[SA - South Australia](#)

[Tas - Tasmania](#)

[Vic - Victoria](#)

[WA - Western Australia](#)

Trusted Information Sharing Network (TISN) for Critical Infrastructure Resilience: [Template Pandemic Emergency Management Plan](#)

11.7 Legislation & Industrial Instruments

This policy & procedure is not intended to override any industrial instrument, contract, award or legislation.

- *Biosecurity Act 2015 (Commonwealth)*
- *Fair Work Act 2009 (Cth)*
- *Fair Work Regulations 2009 (Cth)*

11.8 Responsibilities

Supervisors/managers are responsible for:

- Ensuring that staff and volunteers are aware of the epidemic procedures in effect at any time.

Employees/volunteers are responsible for:

- Abiding by the epidemic procedures specified below, when informed by authorised staff that epidemic or pandemic procedures are in effect

The **Epidemic Officer** is responsible for:

- Working with the CEO on the preparation of a comprehensive epidemic plan
- Advising the CEO on when epidemic procedures should be activated
- Familiarising staff with recommended procedures regarding epidemic avoidance
- Working with all sectors of the organisation to identify mission-critical staff and functions (see Template #3, "Identification of Mission Critical Functions" from [Pandemic Emergency Management Plan](#))

11.9 Procedures

The following procedures apply in the event of the CEO giving notice that epidemic or pandemic procedures are in effect.

Events

- The CEO, with the advice of the Epidemic Officer, will consider on a continuing basis whether any events involving the attendance of staff or members of the public should be changed, rescheduled or cancelled to minimise the risk of infection.

Work procedures

- The CEO, with the advice of the Epidemic Officer, will consider on a continuing basis whether:
 - it is necessary or appropriate for nominated staff/volunteers to work from home.
 - staff/volunteer travel, (or other activities that may cause them to come into contact with other people in Australia or overseas) should be modified or terminated.
 - arrangements for staff/volunteers who work with participants or the public should be modified to minimise risks for all parties.
- The CEO, with the advice of the Epidemic Officer, may require any member of staff to not attend the workplace, and/or to work from home, or, if this is not feasible or appropriate, to take Annual Leave.
- The CEO, with the advice of the Epidemic Officer, may require any member of staff to provide satisfactory evidence that they are fit to return to work.

Contractors and suppliers

- The CEO, with the advice of the Epidemic Officer, will consider on a continuing basis whether arrangements with existing contractors and suppliers need to be modified or supplemented to ensure uninterrupted service delivery (See Template 7, "Major suppliers to the organisation").

11.10 Health Messaging

The Epidemic Officer shall familiarise staff/volunteers and others, as relevant, with recommended procedures on epidemic avoidance guidelines (e.g. handwashing, soap, sneezing policy) as appropriate.

12. Restrictive Practices and Challenging Behaviours

GCCL will comply with the requirements of the Disability Services and Other Legislation Amendment Act 2008 to safeguard the rights of adults with a cognitive or intellectual disability who have 'challenging behaviours' and where restrictive practices may be required to manage their behaviour.

The Disability Services (Restrictive Practices) and Other Legislation Amendment Bill 2013 is part of a package of reforms to improve the operation of the Restrictive Practices framework and outcomes for adults. It is important for GCCL to understand the framework so as to ensure the safest workplace for staff and the protection of human rights for our service participants.

The policy and practice puts focus on building the capacity of service providers to implement positive behaviour support in GCCL and understand the restrictive practices framework. GCCL wholeheartedly support the maintenance of protections for adults by empowering service participants and their family members to understand the framework, be engaged in the process, and exercise their rights.

12.1 Purpose

The purpose of this policy is to ensure the following;

- A safe work and treatment environment for all stakeholders of the service.
- so
- Appropriate standards and other legislative guidelines regarding safety are met.
 - Provision of guidance material to assist in the management and prevention of aggression and violence at GCCL.
 - The human rights of service participants are upheld
 - Staff are informed regarding management of aggression and violence.
 - There is consistency in procedures and strategies across GCCL regarding the management of aggression and violence.
 - The management of aggression and violence is carried out in a planned and least traumatising and/or disruptive manner.
 - The safety of all stakeholders is maintained at the highest possible level regarding security management.

12.2 Scope

GCCL staff and volunteers providing services to service participants at home or in the community

12.3 Definitions:

12.3.1. Restrictive practices

Refers to restraining or isolating a child or an adult for reasons other than medical necessity or the absence of a less restrictive alternative to prevent self-harm or harm to others. Restrictive practices include detention, chemical and mechanical constraint, physical constraint and seclusion. Detention is considered to be any process whereby the means of entry, access to or exit from the premises where the person is living are dealt with so as to prevent the free and uninterrupted movement of the person from the premises.

These practices become abusive when they:

- Are not to prevent injury or modify behaviour; and
- Are not part of a holistic plan to modify behaviour; or

Lead to injury; or

- Are used with excessive frequency; or
- Are used for prolonged periods; or
- Are not the least restrictive response

12.3.2 Other restrictive practices

The denial of basic human rights or choices such as religious freedom, freedom of association, access to property or resources or freedom of movement

Aggression is the infliction, or threat, of harm or injury (either physical or psychological) upon another person. It includes verbal, physical or psychological abuse, threats or intimidating behaviour, intentional physical attacks such as hitting, pinching or scratching, aggravated assault, threats with an offensive weapon, sexual harassment or sexual assault. It also includes workplace harassment.

Containment is defined as physically preventing the free exit of the adult from premises where the adult receives disability services, other than by secluding the adult. Note: it is not regarded as containment if the adult has a skills deficit (eg: lack of road safety skills) and the adult's free exit from the premises is prevented by the locking of gates, doors or windows to prevent him or her from being subject to harm.

Seclusion is defined as where an adult is physically confined alone, at any time of the day or night, in a room or area from which free exit is prevented.

Chemical restraint is defined as the use of medication for the primary purpose of controlling the adult's behaviour. However, the use of medication for the proper treatment of a diagnosed mental illness or physical condition is not chemical restraint. An intellectual or cognitive disability is not considered a physical condition.

Physical restraint is defined as the use, for the primary purpose of controlling the adult's behaviour, of any part of another person's body to restrict the free movement of the adult.

Mechanical restraint is defined as the use, for the primary purpose of behavioural control, of a device to either restrict the free movement of an adult or to prevent or reduce self-injurious behaviour.

12.4 Procedure

As part of initial assessments, collected information and any incident reports risk factors will be identified, noted and highlighted in the service participant's Service Agreement.

There are many factors that need to be considered when looking at how great a risk is posed and how these factors can be mitigated to protect the rights of the service participant and staff. Consider the following;

Staff to Staff Aggression Risk Factors: Staff can be at risk of aggression from co-workers, supervisors, managers or other staff. Common types of aggressive behaviour include harassment, bullying, peer pressure, sexual harassment/assault, and verbal or physical abuse. Aggression could also come from former staff seeking revenge on the service, its manager or other staff. Attention should also be given to Apprehended Violence Orders relating to staff.

External Agencies: attention should also be given to the impact the intervention of external agencies such as the Police, Family Services, Corrective Services, and others may have on service participants of service and any likelihood of aggressive behaviour arising out of this intervention.

Visitors: Visitors may present to GCCL in an aggressive state of mind or may become aggressive afterwards. Therefore, attention should be given to the presence of weapons, minimising waiting times, and keeping visitors comfortable and informed plus any other factors that may increase likelihood of visitor aggression.

Physical Environment: Assessment of the design, construction, and any modification needs of the work environment is paramount in protecting staff from situations where they are at risk of physical aggression.

Special Risk Areas:

Identification of areas of special risk and assessment of risk, include:

- Mental health facilities/services – some psychiatric conditions are associated with increased likelihood of aggressive and violent behaviour. This places staff working with or escorting such service participants at greater risk;
- Homes - situations placing staff in an uncontrolled environment where they may be at risk from aggressive behaviour from the service participant and/or the patient's family/friends.
- Movement of staff and others at night – a period of increased risk is at night when there are fewer people around and there are more opportunities for threatening or criminal activity under the cover of darkness. Movement of staff at night includes movement between buildings, and car parks and/or participant or staff residences,
- Public interface areas – Public interface areas include office entry foyers, enquiry points, waiting areas, counters, interview rooms, and special service areas;
- Isolated work areas – Isolated work areas include people's homes, community buildings e.g. rural and remote properties, and parts of buildings which are separated by some distance from other peopled areas

12.4.1 Incident Records

Analysis of incident records allow for patterns, triggers and alerts to be identified which all assist in determining how best to safeguard the needs of all stakeholders.

Recorded incidents should be analysed to establish:

1. Frequency of recorded incidents;
2. Severity of recorded incidents;
3. Site, location and time of incidents;
4. Role of staff involved or injured.

12.4.2 Management of Aggressive Incident

Physical Aggression cannot be predicted with a high degree of accuracy. There is wide acceptance that a "Cycle of Aggression" as outlined below can be identified. Therefore, distinct strategies for aggression management, including prevention of some violent situations, can be implemented.

The Aggression Cycle originally proposed by Smith in 1982 as a five phase cycle, and expanded to a six phase cycle by Bowie in 1996 is as follows:

- Triggering Incidents.
- Escalation Phase.
- Crisis Point.
- Settling Phase.
- Post-crisis Depression.
- Return to Normal Functioning.

Anticipation of potentially aggressive behaviour and preventing its occurrence requires recognition of the signs of evolving aggression.

During the first and second stage, action should be initiated to minimise the problem. It may be achieved by controlled dialogue with the person and attempting to identify the problem and then defusing it.

Management of a situation involving potential or actual physical aggression should be organised as follows:

- De-escalate.
- Summon assistance.
- Response.
- Management.
- Critical incident debrief.

12.4.3 Response

As a response, restraint is only to be used when there are no less restrictive options available and there remains a significant and identifiable risk to the safety of the person, staff or others. In emergency or crisis situations, a situation response as part of duty of care may involve restrictive practices that may not have been approved specifically for that individual. It is important to complete detailed critical incident reports that document the experiences clearly and the Service Coordinator will liaise with family and the funding body to ascertain whether approval is required to be sought if the same situation presents itself and the restrictive practice used was effective, safe and least restrictive alternative available.

Some restrictive practices that limit freedom of movement might be done for medical necessity or to prevent self-harm or harm to others.

GCCL will identify and partner with community behavioural intervention specialists as required to ensure that the priority is always to keep people safe but without limiting the human rights and dignity of individuals.

GCCL LTD POLICY MANUAL
Section 2 Services Delivery

12.4.4 Authorisation of restrictive practices

The following approvals are required by GCCL Staff to carry out restrictive practices.

RESTRICTIVE PRACTICE	APPROVAL REQUIRED BY
Containment * Seclusion*	Guardianship and Administration Tribunal (GAAT)
Chemical Restraint Mechanical Restraint Physical Restraint	Guardian for restrictive practice (general) appointed by GAAT unless being used in conjunction with containment or seclusion, in which case GAAT approval will be required
Any form of restrictive practice plus containment and seclusion	GAAT
Restricting access to an object	Guardian for restrictive practice (general) appointed by GAAT or an informal decision maker.

*Applications for containment or seclusion can only be lodged by National Disability Insurance Scheme

12.4.5 Procedure for managing restrictive practices

This statement does not apply to the informal support provided to people with an intellectual or cognitive disability by family and friends.

If staff anticipate or is directed to perform any restrictive practice, he or she will contact the Service Co-ordinator for direction.