



# EMPOWER CARE COMMUNITY SERVICES HANDBOOK

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# Empower Care Community Services

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Empower Care Community Services is a non-profit organisation providing services to the Wuppacore community and is committed to providing the highest quality of care. Empower Care Community Services is governed by a management committee which is elected annually by the members.

## Services

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Empower Care Community Services work varies from time to time, but all are focused on community health, well-being, and resilience and include:

- Emergency accommodation referrals and associated support services to people who are homeless.
- Financial Assistance & Counselling referrals to families experiencing a financial crisis.
- In-home and community-based support services to frail aged and younger people with disabilities and their carers and to those who desire to learn daily living skills
- Nonclinical community support to people with severe and persistent mental illness
- Respite services for people who care for someone with a mental illness or an intellectual disability.
- Legal/Court referral support services for victims of family and domestic violence
- Safety support supplies (lighting, locks, screens, etc.) for victims of family and domestic violence.
- Safety planning services for clients of domestic and family violence
- Referral support to people facing family and domestic violence.
- Emergency child protection services referrals.

## Organisations Rights and Responsibilities

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### Organisation's Rights

- **Duty to Provide Quality Care:** Empower Care Community Services has the right to ensure that the care and support services provided to the client meet high standards of quality, aligning with her individual needs and promoting her well-being.

- **Access to Relevant Information:** Empower Care Community Services has the right to receive accurate and timely information about the Client's condition, preferences, and any changes in the circumstances, enabling them to provide effective and responsive care.

## Organisation's Responsibilities

- **Individualised Care Planning:** Responsible for developing and regularly updating an individualised care plan for Client, considering their unique needs, goals, and preferences.
- **Communication with Family and Client:** Maintain open communication with the Client and ensure they are informed about the care plan and any changes in services, and actively seek feedback to improve the quality of care.
- **Provide Person-Centred Care and Trauma-Informed Care:** Implement care practices that respect the Client's individuality, empower their decision-making, and incorporate an understanding of the impact of trauma on their life.

## Resource and Service Limitations

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While our organisation is committed to providing comprehensive support services to the vulnerable members of our community, it is important to understand the limitations we face. Our dedication to offering help is unwavering, but we do encounter constraints that may affect the level and type of support available. These limitations include:

### 1. *Limited Resources*

Our organisation has limited resources, including shelter space and counselling availability. Due to these constraints, we might not always be able to meet the full extent of support required by certain clients. We strive to manage our resources effectively to assist as many individuals as possible, but some needs may be beyond our capacity.

### 2. *Funding and Budget Constraints*

Financial limitations are an ongoing challenge. These constraints can restrict the range of services and support programs we are able to offer. We continuously seek funding opportunities to expand our services, but budget limitations may impact our operations and the extent of our support.

### 3. *Lack of Legal Aid Services*

Our organisation does not provide legal aid services. However, we are committed to supporting our clients in other ways. This includes:

- **Referrals:** Connecting clients with legal aid organisations and other relevant support services.
- **Advocacy:** Offering advocacy services to help clients navigate various systems and access the support they need.
- **Supportive Services:** Providing complementary services such as safety planning, emotional support, and referrals to other support organisations to ensure our clients receive holistic care.

#### *4. Limited Access to Culturally Tailored Services*

While Empower Care Community Organisation offers a range of support services, we acknowledge that these services may not always be culturally tailored to meet the specific needs of individuals from diverse backgrounds. We are committed to improving cultural competency within our organisation to serve all community members better.

#### *5. Language Barriers*

Effective communication is crucial in providing support services. However, the limited availability of multilingual staff or interpreters can hinder communication with clients who are not fluent in English. This can impact the accuracy and clarity of information shared and received, potentially affecting the quality of support provided. We are working towards increasing our multilingual capabilities to serve our diverse client base better.

#### *6. Policy and Procedure Restrictions*

Organisational policies dictate specific protocols for handling cases of domestic violence. These protocols can sometimes be rigid and may not always align perfectly with the unique needs of each client. While we strive to offer flexible and personalised support, certain policy requirements may limit our ability to tailor our services to each individual's situation fully.

We appreciate the understanding and cooperation of our clients and partners as we work within these constraints to provide the best possible support to our community.

## About this Manual

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This manual covers the corporate policies that are applicable to the whole of the organisation. In addition to these corporate policies, some services are provided as part of government programs that have their own service standards (such as Home and Community Care and Mental Health) and operational policy requirements. Staff delivering services in those program areas must be familiar with and operate according to the relevant Service Standards and special policy and procedural requirements that are applicable to their service and target group.

The manual is designed to ensure a common understanding and common organisational practices across all of Empower Care Community Services' many work sites and to assist the Board, CEO, staff, volunteers, and students to understand what is required of them in their roles at Empower Care Community Services.

This manual is designed to be complimentary to all State & Commonwealth legislation and does not override any acts or other legal requirements.

A copy will be kept in the Chief Executive Officer's office and in each Program Manager's office, in addition to one in each staff lunchroom. Policies and procedures will be reviewed on a rolling basis, with each one being reviewed no less than once every three years and more frequently as required.

## Goals and Objectives

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- To provide person-centred support services
- To provide support for clients to achieve a high quality of life through informed decision-making and empowerment.

- To provide support for clients to achieve a high quality of life through holistic care assessment and support.
- To provide support for clients to achieve as much independence as practically possible.
- To provide support that ensures the client's religious and cultural needs are met and maintained.
- To collaborate and maintain harmonious relationships with other agencies
- To deliver effective and efficient quality care through ethical management
- To monitor and review functions and delivery services to ensure continuous improvement.
- To provide crisis and distress management to all clients as per their needs, including mental health referral services where applicable.

## Role, responsibilities, KPI and limitations of Support Worker

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As a Support Worker, you support people who are living in aged care or residential care or are with a disability in their own home with community access, personal care and home management.

As a Support Worker, your role and responsibilities are:

### Personal Care

- Facilitate clients with healthy meal preparation and choice.
- Facilitate clients with grooming and personal care needs
- Facilitate clients with mobility.
- Provide support as per the client's individual care plan.
- Assist the client with nutritional needs.
- Assist the clients with grooming and personal care needs (showering, bathing, oral care, toileting and hair care)
- Assist the clients with mobility.

### Mental Health Care

Support plan development and assessment:

- Collaborate with the person, their family, and other professionals to set realistic and achievable goals.
- Ensure that the support plan reflects the individual's preferences, needs, and aspirations.

Emotional Support:

- Provide emotional support to individuals facing mental health challenges.
- Utilise active listening skills to understand and validate individuals' feelings and experiences.
- Foster a trusting and empathetic relationship to promote a sense of security and well-being.

### Crisis Intervention:

- Recognise signs of distress or crisis and respond promptly and effectively.
- Implement crisis intervention strategies to de-escalate situations and ensure the safety of individuals.
- Collaborate with emergency services or mental health professionals as needed.

### Work within the boundaries of your role/provide a referral:

- Speak to your immediate supervisor and prepare a referral for the client.
- Refer the client to a licensed mental health counsellor or therapist who specialises in relationship issues and crisis intervention.
- Collaborate with Client to identify a professional whose expertise aligns with their needs.
- 
- Ensure the referral includes information about the current crisis and any specific concerns raised during your interactions.
- Follow up to confirm the initiation of counselling services and provide ongoing support during this process. Or mental health professionals as needed

## Reporting and Documentation

- Complete progress case notes and file client records in line with Empower Care Community Services Privacy and Confidentiality Policy
- Complete crisis intervention forms and templates as per the requirements
- Report to and convey concerns to the Registered Nurse or their delegate.
- Report to and convey concerns to the Service Manager
- Maintain client and administrative records.
- Maintain privacy and confidentiality.
- Report any abuse or neglect immediately.
- Report distress and crisis situations, such as any person trying to commit suicide or trying to self-harm.

## Personal Assistance

- Support the client to access and participate in their local community as valued members of that community.
- Provide direct care as per the client's support plan, including the Positive Behaviour Support Plan
- Support the client to develop and maintain relationships.
- Support the client to develop and maintain life skills
- Facilitate the client with shopping and banking.
- Facilitate the client with home duties

## Teamwork and Communication

- Work in a team and communicate using effective interpersonal and communication skills
- Participate in person-centred planning and communicate with client, their families, specialists and other Empower Care Community Services staff to support the clients to live their lives based on their dreams, aspirations, interests and strengths.
- Participate in debriefing and dispute-resolution activities.



## Quality

- Participate in continual improvement exercises and maintain service standards.
- Follow Empower Care Community Services policy and procedures, including Workplace Health and Safety
- Participate in mandatory training, appraisal and professional development.
- Contribute to continuous improvement by sharing strategies and ideas

## Values

- Provide individualised support that encourages choice and independence.
- Communication with the client using their preferred communication method
- Support the client to be aware of and exercise their rights and responsibilities.

## Boundaries of the Support Worker Role

1. **Medical Procedures:** Support workers are not authorised to perform medical procedures, such as administering injections or making medical diagnoses. These tasks must be carried out by qualified healthcare professionals.
2. **Complex Medication Management:** While support workers can assist with medication reminders and basic administration within the scope of their role and if accredited, they are not permitted to administer complex medications or make adjustments to dosage without supervision from a registered nurse.
3. **Advanced Care Planning:** Support workers may not make decisions regarding advanced care planning or end-of-life care for residents. Such decisions are typically made in consultation with medical and legal professionals, as well as the resident's family.
4. **Clinical Assessments:** Conducting comprehensive clinical assessments and developing care plans are beyond the scope of a support worker's role. These responsibilities typically fall to registered nurses or other qualified healthcare practitioners.
5. **Invasive Procedures:** Support workers should not perform invasive procedures, such as wound suturing or inserting medical devices. These tasks require specialised training and should be performed by trained medical personnel.
6. **Psychotherapy and Counselling:** Support workers are not trained to provide formal psychotherapy or counselling. They should only be referring individuals to qualified therapists or counsellors for specialised mental health interventions under the guidance of supervisor or Manager.
7. **Independent Decision-Making:** Support workers may not make significant decisions independently, especially those impacting an individual's mental health treatment. They are required to follow established protocols, consult with supervisors, and involve qualified professionals in decision-making processes.
8. **Crisis Intervention Limitations:** While support workers can provide initial crisis intervention and referral with the consent of a supervisor, long-term crisis management requires specialised training involving emergency services and mental health professionals for ongoing management.
9. **Scope of Practice:** Limitations in terms of scope of practice. For instance, they are not able to provide legal advice or protection orders directly and will need to refer clients to legal aid services.

**Note:** It's important for support workers to adhere to their job description and seek guidance from supervisors when encountering situations beyond their scope of practice.

**Always remember: If in any doubt, follow the below.**

- Speak to your immediate supervisor and prepare a referral for the client.
- Refer the client to a licensed mental health counsellor or therapist who specialises in relationship issues and crisis intervention.
- Collaborate with Client to identify a professional whose expertise aligns with their needs.
- Ensure the referral includes information about the current crisis and any specific concerns raised during your interactions.
- Follow up to confirm the initiation of counselling services and provide ongoing support during this process. Or mental health professional

*Other duties*

- Perform general kitchen duties
- Perform general cleaning duties
- Other duties as included in the individual care plan

## Key Performance Indicators for Support Workers

Here are some relevant KPIs:

**Client Satisfaction:**

- Client feedback on the support services provided.
- Target: 90%+ satisfaction rate.

**Response Time to Client Requests:**

- Time taken to respond to patient inquiries or requests for assistance.
- Target: Within 30 minutes.

**Accuracy of Client Records:**

- Percentage of patient records maintained accurately and updated timely.
- Target: 99% accuracy.

**Compliance with Protocols:**

- Adherence to healthcare protocols and procedures.
- Target: 100% compliance.

**Client Follow-up Rate:**

- Percentage of follow-ups conducted as per the schedule.
- Target: 95%+ follow-up rate.

## Personal and Professional work standards for support workers

Personal and professional work standards for support workers are essential to ensure the delivery of high-quality and person-centred care. These standards encompass a combination of professional qualities, ethical considerations, and personal attributes. Here are some personal work standards for support workers:

- 1. Empathy and Compassion:** Demonstrate a genuine understanding of and empathy for the experiences and challenges faced by individuals with disabilities. Approach each client with kindness, sensitivity, and a compassionate attitude.
- 2. Respect for Dignity and Autonomy:** Uphold the dignity and autonomy of individuals with disabilities. Recognise and support the right of clients to make choices about their own lives, respecting their preferences and decisions.
- 3. Effective Communication:** Communicate clearly, respectfully, and in a manner that is easily understood by clients and with team members and internal and external stakeholders with diverse communication needs. Actively listen to clients, their families, and other stakeholders and provide information in an accessible format.
- 4. Cultural Competency:** Acknowledge and respect the diversity of cultural backgrounds, values, and beliefs among clients. Seek to understand and integrate cultural considerations into the provision of support services.
- 5. Professional Boundaries:** Establish and maintain appropriate professional boundaries with clients, respecting privacy and confidentiality. Avoid engaging in personal relationships that may compromise the professional nature of the client-support-worker relationship.
- 6. Reliability and Punctuality:** Demonstrate reliability by consistently attending scheduled shifts and appointments. Arrive punctually for client interactions and fulfil duties within the agreed-upon timeframe.
- 7. Adaptability:** Be flexible and adaptable to the evolving needs and preferences of clients. Adjust support strategies and plans to accommodate changes in the client's condition or circumstances.
- 8. Problem-Solving Skills:** Demonstrate effective problem-solving skills when faced with challenges in delivering support. Collaborate with other professionals and resources to find creative solutions.
- 9. Self-Care and Well-being:** Prioritise personal well-being and engage in self-care practices to maintain physical and emotional health. Recognise the impact of the caregiving role and seek support when needed.
- 10. Continuous Learning:** Pursue ongoing professional development opportunities to enhance skills and knowledge. Stay informed about best practices, new technologies, and emerging trends in disability support.
- 11. Advocacy:** Advocate for the rights, needs, and preferences of individuals with disabilities. Collaborate with other professionals and stakeholders to ensure that clients have access to necessary resources and opportunities.
- 12. Documentation and Record Keeping:** Accuracy in maintaining and completing documents in a professional manner. Maintain accurate and detailed documentation of client interactions, progress, and any changes in their condition. Adhere to organisational policies regarding record keeping and reporting.

13. **Positive Role Modelling:** Serve as a positive role model for clients by demonstrating professionalism, integrity, and ethical behaviour. Foster a positive and inclusive environment for clients and colleagues alike.
14. **Collaboration and Teamwork:** Work collaboratively with colleagues, multidisciplinary teams, and other service providers to ensure holistic and coordinated support for clients. Share information and insights that contribute to the overall well-being of clients.
15. **Client-Centred Approach:** Prioritise the individual needs and preferences of clients in all aspects of support planning and delivery. Ensure that support plans are person-centred and reflect the unique qualities and aspirations of each client.

## Role and Responsibilities of a Team Leader in a Community Services Organisation

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### Team Oversight

**Role:** Provide leadership and supervision to a team of dedicated disability support workers.

**Responsibilities:** Oversee day-to-day operations, coordinate tasks, and ensure effective teamwork.

### Communication

**Role:** Facilitate communication between team members, ensuring clarity of information and fostering an open and supportive environment.

**Responsibilities:** Conduct regular team meetings, share updates, and address concerns to maintain effective communication channels.

### Task Assignment

**Role:** Distribute tasks and responsibilities among team members based on skills and workload.

**Responsibilities:** Ensure fair distribution of work, considering individual strengths and preferences.

### Performance Management

**Role:** Evaluate team members' performance and provide constructive feedback.

**Responsibilities:** Conduct performance reviews, identify areas for improvement, and recognise achievements.

### Conflict Resolution

**Role:** Mediate conflicts and address interpersonal issues within the team.

**Responsibilities:** Foster a positive team culture, intervene when conflicts arise, and guide resolution processes.

## Change Management

**Role:** Manage organisational changes and communicate them effectively to the team.

**Responsibilities:** Support the team through transitions, address concerns, and ensure a smooth adaptation to changes.

## Flexibility Requests

**Role:** Consider and respond to employee requests for flexibility in work arrangements.

**Responsibilities:** Evaluate requests for flexible schedules, remote work, or other accommodations and collaborate with HR to implement suitable solutions.

## Emotional Support

**Role:** Provide emotional support to team members facing personal or work-related challenges.

**Responsibilities:** Foster a compassionate and empathetic team environment, listen to concerns, and offer guidance or referrals to appropriate resources such as counselling services or HR or other external support services such as EAP.

## Resource Allocation

**Role:** Allocate resources efficiently to meet the team's needs.

**Responsibilities:** Ensure the team has access to necessary tools, training, and support services.

## Training and Development

**Role:** Identify training needs and opportunities for professional development.

**Responsibilities:** Facilitate training sessions, encourage skill development, and support continuous learning.

## Well-being Monitoring

**Role:** Monitor the well-being of team members, particularly during challenging periods.

**Responsibilities:** Implement well-being initiatives, conduct check-ins, and provide additional support when needed.

## Limitations/boundaries of the role

1. **Policy Adherence:** Must adhere to organisational policies and procedures, which may limit flexibility in certain situations.
2. **Resource Constraints:** Limited by available resources, including budgetary constraints, which may impact the implementation of certain support initiatives.
3. **Organisational Hierarchy:** Bound by the organisational hierarchy, with decisions beyond the scope of a team leader requiring approval from higher levels of management.

4. **Legal and Ethical Boundaries:** Must operate within legal and ethical boundaries, respecting confidentiality and avoiding conflicts of interest.
5. **Individual Autonomy:** Limited in influencing the personal decisions of team members, such as their choices outside of work.
6. **Subjectivity in Evaluations:** Evaluations and feedback may be subjective, influenced by personal biases or perceptions.
7. **Limited Time and Capacity:** Balancing various responsibilities may limit the time available for individualised support to each team member.
8. **Dependency on Organisational Support Services:** Relies on the availability and effectiveness of organisational support services for initiatives like counselling or flexible work arrangements.

## Working with families/carers

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Empower Care Community Services strives to involve residents' families in decision-making and day-to-day activities as much as possible. In particular, we will create a welcoming atmosphere for families by:

- Being kind, courteous and understanding with residents' family members
- Providing a welcoming atmosphere where families are encouraged to visit.
- Limiting visiting hours only when necessary to protect the safety, security and well-being of all residents.
- Enabling family members to take part in daily activities of our residents' lives by encouraging them to participate in Empower Care Community Services activities alongside their resident family members.

## Legal and Ethical Rights and Responsibilities

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### Client Rights

The [Charter of Aged Care Rights](#) is a document provided by the Aged Care Quality and Safety Commission. It describes your legislated rights as a consumer of an aged care service. These rights apply to all consumers, regardless of the type of care and services they receive.

The Charter covers 14 important rights for you or your loved one and underpins what you should expect from Empower Care Community Services.

Clients have the right to:

- Be and feel safe and be given high-quality care and services.
- Be treated with dignity and respect.
- Have your identity, culture, and diversity valued and supported.
- Live without abuse and neglect.
- Be informed about your care and services in a way you understand.

- Access all information about yourself, including information about your rights, care and services.
- Have control over and make choices about your care and personal and social life, including where the choices involve personal risk.
- Have control over and make decisions about your care and personal aspects of your daily life, financial affairs, and possessions.
- Your independence.
- Be listened to and understood.
- Have a person of your choice, including an aged care advocate, support you and speak on your behalf.
- Complain, free from reprisal, and have your complaints dealt with fairly and promptly.
- Right to privacy and confidentiality and to have your personal information protected.
- Exercise your rights without adversely affecting the way you are treated.
- Right to protection from abuse
- Right to non-discrimination.

## Client Responsibilities

- Make every effort to arrive on time for appointments or to notify relevant staff if you are unable to attend a scheduled meeting.
- Treat others around you with dignity and respect, regardless of their race, colour, religion, national origin, gender, age, sexual orientation, or disability.
- Do not attend any appointment or meeting at the organisation whilst under the influence of any drugs or alcohol.
- Communicate Needs and Concerns: you should communicate your needs, preferences, and any concerns you have about your safety or the support. Follow Agreed-Upon Safety Plans: You should adhere to the safety plan developed in collaboration with the organisation to protect yourself and your family from harm. This includes following any instructions provided for your safety.
- Provide Accurate Information
- Respect Workers' Safety and Boundaries: You should respect the safety and boundaries of the workers providing you support. This includes understanding the limits of the workers' roles and cooperating with them to maintain a safe environment.
- Participate in Decision-Making: should actively participate in decision-making regarding your care and safety, providing input and asking questions when necessary to ensure you understand the options available.
- Provide Feedback: You should offer feedback about the services you receive, as this can help the organisation improve its support and tailor services to better meet needs.
- Adhere to Legal Obligations: You should adhere to any legal obligations or court orders that are in place, such as restraining orders or custody arrangements, to ensure safety and compliance with the law.

## Clients Legal Rights and Relevant Legislations

- Right to Protection from Family Violence: Under the Family Law Act 1975, the client has the right to be protected from family violence. This includes the right to seek restraining orders or other protective measures to ensure the safety of any children involved.
- Right to Privacy and Confidentiality: The client has the right to privacy and confidentiality under the Privacy Act 1988 and state/territory privacy laws. personal information should



be treated with care and confidentiality, with disclosures made only with consent or as required by law.

- **Right to Protection from Discrimination:** The client is protected from discrimination under federal and state anti-discrimination laws, such as the Sex Discrimination Act 1984. This includes protection from discrimination based on gender, marital status, and other protected attributes.
- **Right to financial autonomy:** The client has the right to have access to and control over their own finances, including the ability to work and earn an income. Family Law Act 1975: This law addresses issues related to divorce, property division, and spousal maintenance. It recognises the rights of individuals to seek financial support and equitable distribution of assets upon separation.
- **Right to safety:** The client has the right to live free from threats or harm, including emotional and financial abuse. Domestic and Family Violence Protection Act 2012: This legislation aims to prevent domestic violence and protect victims. It provides legal remedies such as protection orders to ensure the safety and well-being of individuals affected by domestic violence, including financial abuse.
- **Right to Access Support Services:** Various federal and state-funded support services legislation, including those governed by the National Plan to Reduce Violence against Women and their Children 2010-2022. The client has the right to access support services, including counselling, legal assistance, and emergency accommodation.

## Support Workers Legal Rights and Relevant Legislation

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- **Right to a Safe Working Environment:** Support workers have the right to a safe working environment under workplace health and safety laws, such as the Work Health and Safety Act 2011. This includes the right to proper training and support to handle crisis situations safely. These regulations provide specific requirements for maintaining workplace safety and implementing strategies to address hazards and risks.
- **Right to Refuse Unsafe Work:** Under the Workplace Health and Safety Act 2011, support workers have the right to refuse work that poses an immediate risk to their health or safety, including situations where the environment may be unsafe.
- **Right to Adhere to Personal Safety Measures:** The WHS Act imposes a duty on employers to ensure the health and safety of their workers, including providing adequate training, supervision, and resources to protect their safety. Support workers have the right to take personal safety measures, such as informing colleagues of their whereabouts during home visits, using a buddy system, or carrying communication devices for emergencies.
- **Right to respect:** Support workers have the right to be treated with respect and dignity by clients and colleagues. Fair Work Act 2009 (Commonwealth) - This legislation prohibits discrimination, harassment, and bullying in the workplace, ensuring that all workers, including support workers, are treated with respect and dignity by clients and colleagues.
- **Right to confidentiality:** Support workers have the right to maintain the confidentiality of client information and circumstances, except in cases where there are concerns about the client's safety or the safety of others. Privacy Act 1988 (Commonwealth) - This legislation regulates the handling of personal information and imposes obligations on



support workers to maintain the confidentiality of client information, except in situations where disclosure is necessary to prevent harm or ensure safety.

## Ethical Responsibilities

### Respect for Autonomy

Support workers should respect the autonomy and independence of the individuals they support, including their right to make informed decisions about their care, treatment, and lifestyle, to the extent possible.

### Non-Discrimination and Inclusivity

- Support workers should provide care and support without discrimination based on race, religion, gender, sexual orientation, disability, or any other protected characteristic, and should promote inclusivity and diversity in their practice.
- Support workers have a responsibility to provide appropriate support and assistance to clients in accordance with their needs and circumstances.
- Support workers must adhere to anti-discrimination laws that prohibit discrimination against clients based on various factors such as race, gender, sexual orientation, disability, or age. This includes compliance with laws such as the Racial Discrimination Act 1975, the Sex Discrimination Act 1984, Disability Discrimination Act 1992, the Age Discrimination Act 2004, and the Australian Human Rights Commission Act 1986.

### Confidentiality and Privacy

- Support workers should protect the confidentiality and privacy of the individuals they support, respecting their right to privacy and confidentiality and only disclosing information as required by law or with proper consent.
- Maintain Confidentiality and ensure that all personal and sensitive information about care recipients remains confidential. This includes medical records, personal histories, and any other private details. Confidentiality helps build trust and respect between Support Workers and care recipients. As per the WHS ACT 2011, while support workers have a duty to report suspected abuse, they must also maintain client confidentiality in other areas, sharing information only as required by law or with the client's consent.
- Avoid Dual Relationships and avoid engaging in dual relationships that could compromise their objectivity and professional judgment. Dual relationships, such as becoming friends with care recipients or accepting significant gifts, can blur boundaries and create conflicts of interest.
- Seek Guidance and Supervision from their organisation's support structures when faced with challenging situations related to professional boundaries. It's important to have a support system in place to discuss ethical dilemmas and maintain a high standard of care.

### Professional Boundaries

- Support workers must maintain appropriate professional boundaries with the individuals they support, avoiding conflicts of interest, dual relationships, and other situations that may compromise their objectivity or professional integrity.
- Support workers should always conduct themselves in a professional manner, adhering to ethical standards and organisational policies and procedures.

- Support workers should respect the boundaries and confidentiality of clients, maintaining appropriate professional relationships.

### **Responsibility to collaborate and advocate**

- Support workers should collaborate with other professionals and agencies involved in the care of their clients, ensuring coordinated and comprehensive support.
- Support workers should advocate for the rights and interests of their clients, empowering them to make informed decisions and access the support they need.

### **Responsibility to Report**

Mandatory Reporting: under the Children and Young Persons (Care and Protection) Act 1998, the support worker must report suspected cases of child abuse or neglect to the relevant child protection authorities in accordance with state and territory laws. This includes being familiar with and adhering to the specific laws and guidelines in their jurisdiction.

## **Legal Responsibilities**

- **Compliance with Laws and Regulations:** Support workers are responsible for complying with all applicable laws and regulations, including but not limited to healthcare laws, labour laws, privacy laws, and other relevant legal requirements.
- **Duty of Care:** Support workers have a duty of care towards the individuals they support, which includes providing care and support in a manner that meets the professional standards of care, ensuring the safety and well-being of the individuals, and preventing harm or injury to the best of their abilities.
- **Documentation and Record-Keeping:** Support workers are responsible for maintaining accurate and complete documentation and records of their interactions, interventions, and observations in accordance with organisational policies, legal requirements, and professional standards.
- **Confidentiality:** Support workers are responsible for maintaining the confidentiality and privacy of the individuals they support, including protecting their personal and sensitive information and only disclosing information as required by law or with proper consent.
- **Advocacy:** Support workers have a responsibility to advocate for the rights, interests, and preferences of the individuals they support and to ensure that their rights are respected and upheld in accordance with applicable laws, regulations, and ethical standards.
- **Continuing Professional Development:** Support workers should engage in ongoing professional development to enhance their knowledge, skills, and competence and to ensure that their practice is up-to-date and aligned with best practices and ethical standards.
- **Ethical Decision-Making:** Support workers should engage in ethical decision-making processes when faced with challenging situations or ethical dilemmas, seeking guidance from relevant codes of ethics and organisational policies and consultation with colleagues or supervisors as needed.

It's important for support workers to familiarise themselves with the legal and ethical responsibilities specific to their role, organisation, and jurisdiction and to adhere to these

responsibilities in their daily practice to ensure the highest standard of care and support for the individuals they serve.

Further information regarding ethical decision-making is located under the Code of Ethics.

# Work Place Policies and Procedures

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## Diversity and Inclusion Policy and Procedures

### **Purpose:**

- To create an inclusive, respectful, and equitable workplace where all employees and clients feel valued and supported regardless of their background.
- To ensure that the diverse needs of clients and employees are recognised, respected, and appropriately addressed.
- To promote a culture of continuous learning and improvement regarding diversity and inclusion.

### **Aim:**

- To foster a supportive environment that respects and values individual differences, including but not limited to race, ethnicity, gender, sexual orientation, disability, and cultural background.
- To provide equitable access to opportunities and resources for all employees and clients.
- To enhance the quality-of-service delivery by incorporating diverse perspectives and approaches.

### **Scope:**

- This policy applies to all employees, volunteers, and stakeholders of the community service organisation.
- It encompasses all aspects of the organisation's operations, including recruitment, hiring, training, service delivery, and client interactions.
- It includes the development and implementation of programs, services, and initiatives that support diversity and inclusion.

### **Procedures in the Context of Community Service Work**

#### **1. Consult the Organization's Diversity and Inclusion Policy**

- Review the policy to understand the strategies for creating an inclusive workplace.
- Develop a plan to address clients/workers unique needs, which may include providing cultural competency training for team members, fostering an inclusive environment, and promoting open communication.

#### **2. Reach Out to HR for a Consultation**

- Discuss specific situation with HR.
- Obtain information about counselling services and other support mechanisms available through the Employee Assistance Program (EAP).

**3. Collaborate with HR to Promote Wellness Initiatives**

- Organize team-building activities, stress management workshops, and other initiatives that contribute to a positive and supportive team culture.

**4. Organize Professional Development Programs**

- Focus on cultural competency to understand the unique needs of a diverse team.
- Create a more inclusive and culturally sensitive work environment through targeted training.

**5. Create Inclusive Meeting Spaces**

- Provide meeting agendas in advance and incorporate visual aids for better understanding.
- Ensure meetings are accessible and understandable for all participants.

**6. Personalized Check-Ins with Team Members**

- Initiate casual conversations beyond formal meetings to understand individual concerns.
- Foster a supportive and open communication environment.

**7. Implement Language Inclusivity Training**

- Organize formal language inclusivity training or workshops for the entire team.
- Aim to bridge communication gaps and foster a more inclusive environment, especially for team members from diverse linguistic backgrounds.

By following these procedures, the organisation can effectively promote diversity and inclusion, ensuring a supportive and equitable environment for both employees and clients.

## Complaints and Grievance Policy and Procedure

Empower Care Community Services is committed to ensuring that all clients, family members and carers are free to lodge complaints and grievances and to have those dealt with promptly and fairly. Management of disputes and grievances will be fair to both the complainant and respondent. The complainant will be responded to courteously and will be given high priority for resolution and remediation.

### **PURPOSE STATEMENT:**

To assist staff, care recipients and their representatives with the timely and effective management of complaints.

### **POLICY:**

It is our policy to enable care recipients, their families and representatives, visitors, staff and volunteers to provide feedback or raise a complaint about any aspect of our service, the care we provide or the operation of our facilities.

### **AIM:**

The aim of this policy is to improve the quality of care and services provided by adopting a positive, blame-free approach to resolving complaints.

### **OBJECTIVE:**

The primary objective of this policy is to establish a transparent and effective mechanism for handling and resolving complaints from clients receiving home care services through our organisation.

### **SCOPE:**

This policy applies to all clients, their representatives, employees, contractors, and volunteers associated with our home care organisation.

### **Client Rights for making a complaint:**

#### **a. Right to Quality Service:**

Clients have the right to receive high-quality, safe, and effective home care services that are respectful of their individual needs and preferences.

#### **b. Right to Dignity and Respect:**

Clients are entitled to be treated with dignity and respect, regardless of their background, beliefs, or personal circumstances.

#### **c. Right to Privacy and Confidentiality:**

Clients have the right to privacy and confidentiality concerning their personal information and health status.

#### **d. Right to Participate in Decision-Making:**

Clients have the right to be actively involved in decisions about their care, including the development and review of their care plan.

**e. Right to Voice Concerns:**

Clients have the right to voice concerns, make complaints, and provide feedback without fear of reprisal.

**Complaints Handling Procedures**

The key steps included:

- Contacting the designated person within the organisation responsible for handling complaints.
- Providing detailed information about the specific instances of issues, including dates, times, and the impact on her daily routine.
- Documenting the complaint using the organisation's prescribed format or procedure.
- Receiving acknowledgment of the complaint and being informed about the expected timelines for resolution.
- Feedback and follow-up process.

**Training and Awareness**

- a. Staff Training: - All employees and relevant stakeholders receive training on the complaints handling process and are educated on the importance of client rights and respectful communication.
- b. Client Education: - Clients are provided with information about the complaints process during the onboarding process and as part of ongoing communication.

**Continuous Improvement**

- a. Review and Evaluation: - The organisation conducts regular reviews of the complaints handling process to identify areas for improvement and ensure compliance with relevant regulations.
- b. Policy Updates: - This policy is subject to regular review and updates to reflect changes in legislation or organisational practices.

**Lodging a Complaint:**

PROCEDURE:

- All care recipients and/or their family members and representatives are informed on admission about the process for lodging a compliment or complaint.
- Our Staff and volunteers have an understanding of our Complaint Handling Policy and are available to assist care recipients, their families and representatives in providing feedback to the service.
- Copies of our Complaint Form are easily accessible in public areas of our facilities to provide clear and accessible ways of providing feedback on the services and care

provided. The forms are available in each of our facilities and suggestion boxes have been provided for the lodging of forms.

- Complaints can be submitted in writing by dropping a completed Complaints Form in the suggestion box at reception, emailing [service@EmpowerCare.com.au](mailto:service@EmpowerCare.com.au), or mailing The Director, Empower Care Aged Care Residence, 1 Empower Care Road, Empower Care, VIC 3999. Alternatively, complaints can be made in person to the compliments and complaints officer or any staff member or by calling (03) 5555-4444. Written complaints are encouraged to ensure clarity and accuracy.
- Any staff member can be approached to provide compliments, to raise a concern or make a complaint. Where a staff member is not empowered to handle or resolve complaints on behalf of the service, the staff member will be able to refer the complaint to other staff and/or act as an advocate for the complainant and assist with completing forms for them.
- Any complaints received by our service are registered on the Complaint Tracker, acknowledged, and investigated where required. Feedback on how the complaint was managed and resolved is sent to the complainant once the complaint is closed. Where the complainant is not the care recipient, the care recipient will also be informed.

#### ACCOUNTABILITIES:

Staff are responsible for reporting compliments and complaints to their supervisor before the end of their shift.

Managers are responsible for the management of the compliments and complaints process and informing the relevant manager of any feedback received.

Managers are responsible for ensuring that compliments and complaints are entered into the Compliments and Complaints Tracker to inform ongoing improvement activities within the service.

Managers are responsible for analysing feedback trends for the purposes of informing ongoing improvement activities within the service.

#### CONFIDENTIALITY:

All information regarding complaints will be kept confidential amongst the staff concerned with its resolution.

Complaint documentation will be kept in a safe, locked place and accessible only to staff handling the complaint.

Compliment and complaint information may be forwarded to the management team as part of ongoing improvement activities within the service.

Statistics on all types of compliments and complaints will be recorded and used to inform ongoing improvement activities within the service. For this purpose, compliment and complaint information may be disseminated to management and other staff. However, the identity of the complainant or persons named in the feedback will not be disclosed.



# Dispute Resolution Policy and Procedures

## **Purpose**

The purpose of this Dispute Resolution Policy is to provide a clear, fair, and efficient process for resolving disputes within the organisation. This policy aims to ensure that all parties involved have the opportunity to voice their concerns and seek resolution in a constructive and respectful manner.

## **Aim**

The aim of this policy is to:

1. Promote a harmonious and productive environment by addressing disputes promptly and effectively.
2. Ensure transparency and consistency in handling disputes.
3. Protect the rights and interests of all parties involved.
4. Foster open communication and mutual understanding.

## **Scope**

This policy applies to all employees, contractors, clients, and stakeholders of the organisation. It covers all types of disputes, including but not limited to interpersonal conflicts, work-related disagreements, contractual issues, and any other matters that may arise in the course of the organisation's operations. This policy is designed to be inclusive and accessible to all individuals within the organisation, ensuring that every dispute is addressed with fairness and impartiality.

## **Procedures for reporting and escalating disputes.**

- Identification of responsible parties involved in the resolution process.
- Timelines for resolution to ensure timely intervention.
- Confidentiality measures to protect the privacy of parties involved.
- Provisions for impartial mediation or external review if needed.

## **Informal Resolution:**

Informal resolution is encouraged to promote open communication, maintain relationships, and address conflicts promptly before they escalate. It provides an opportunity for parties to find mutually agreeable solutions without the need for formal intervention.

## **Formal Reporting where informal resolution has not worked:**

Step 1: The party experiencing the dispute formally reports the issue in writing to their immediate supervisor or manager. The written report should outline the details of the dispute, including the nature of the conflict, the individuals involved, and any attempted informal resolutions.

**Designated Dispute Resolution Officer (DDRO) Involvement:**

Step 2: The immediate supervisor or manager directs the written report to the designated dispute resolution officer (DDRO) within the organisation. The DDRO takes charge of overseeing the formal dispute resolution process.

**Initial Assessment by DDRO:**

Step 3: The DDRO conducts an initial assessment of the dispute. This involves reviewing the written report, understanding the concerns raised, and determining the severity and complexity of the issue.

**Notification to Involved Parties:**

Step 4: The DDRO notifies all parties involved in the dispute that the formal resolution process has been initiated. This communication includes details on how the process will proceed and emphasises the importance of cooperation.

**Mediation Consideration (Optional):**

Step 5: The DDRO considers whether mediation is a suitable option for resolving the dispute. If parties are willing, a voluntary mediation process may be initiated. Mediation is an optional step and depends on the nature of the conflict.

**Formal Investigation Initiation:**

Step 6: If mediation is not pursued or is unsuccessful, the DDRO initiates a formal investigation. This involves gathering relevant evidence, conducting interviews with involved parties, and documenting the investigation process.

**Gathering Evidence:**

Step 7: The DDRO gathers evidence related to the dispute. This may include documents, emails, witness statements, or any other information that can contribute to a comprehensive understanding of the issue.

**Interviews and Testimonies:**

Step 8: The DDRO conducts interviews with the parties involved to gather their perspectives on the dispute. Witness testimonies may also be collected to ensure a well- rounded understanding of the situation.

**Fair and Impartial Investigation:**

Step 9: Throughout the investigation, the DDRO ensures a fair and impartial process, considering all relevant information and perspectives without bias. The principles of natural justice and procedural fairness are upheld.

**Decision-Making:**

Step 10: Based on the findings of the formal investigation, the DDRO makes a decision regarding the resolution of the dispute. The decision is communicated in writing to all parties involved.

**Communication of Decision:**

Step 11: The DDRO communicates the decision to the involved parties, providing a clear explanation of the resolution and any actions that need to be taken.

**Implementation of Resolution:**

Step 12: The DDRO oversees the implementation of the resolution, ensuring that any actions or changes outlined in the decision are carried out effectively.

**Follow-Up and Support:**

Step 13: The DDRO provides follow-up support to the parties involved, monitoring the outcomes of the resolution and offering additional assistance if necessary.

**Continuous Improvement:**

Step 14: The organisation engages in continuous improvement by reviewing the formal dispute resolution process, seeking feedback, and making adjustments to enhance its effectiveness for future cases.

This step-by-step process provides a formal and structured approach to resolving disputes when informal methods prove unsuccessful. It emphasises fairness, transparency, and adherence to organisational policies throughout the formal resolution stages.

# Managing Distress Calls and Clients Procedures

## Industry-Specific Guidelines for Support Workers:

### Active Listening and Empathy:

- Practice active listening skills to fully understand the client's concerns and emotions.
- Validate the client's feelings and express empathy throughout the conversation.
- Use reflective statements to show understanding and build rapport. Risk Assessment and Management:

- Assess the level of distress and risk during the call, including any indications of self-harm or suicidal ideation.
- Follow organisational protocols for managing crisis situations and escalating concerns to appropriate authorities if necessary.
- Document details of the call accurately and report any significant incidents or risks to supervisors promptly.

### Providing Information and Resources:

- Offer relevant information about mental health conditions, available support services, and coping strategies tailored to the client's needs.
- Provide clear and concise explanations and follow up with additional resources via email or mail if necessary.
- Ensure clients are aware of confidentiality and privacy policies regarding their information.

### Self-Care and Boundaries:

- Prioritize self-care practices to maintain personal well-being and prevent burnout.
- Set clear boundaries around the availability and scope of support provided to clients.
- Seek supervision or debriefing with colleagues or supervisors to process challenging calls and manage emotional impact.
- Organizational Guidelines for Support Workers (in Australian context): Compliance with Legislation and Regulations:
- Adhere to relevant legislation and regulations governing the provision of support services, including privacy and confidentiality laws (e.g., Privacy Act 1988).
- Stay informed about changes in legislation and organisational policies related to client support.

### Cultural Sensitivity and Diversity:

- Respect cultural diversity and sensitivity in interactions with clients, acknowledging and valuing differences in beliefs, values, and practices.
- Ensure that support services are accessible and inclusive for clients from diverse backgrounds, including those from Aboriginal and Torres Strait Islander communities.

#### Professional Development and Training:

- Participate in ongoing professional development and training to enhance skills and knowledge in providing support to clients.
- Stay updated on best practices, evidence-based interventions, and emerging trends in the field of mental health support.

#### Supervision and Support:

- Receive regular supervision and support from qualified professionals to review casework, address challenges, and ensure adherence to organisational guidelines and protocols.
- Access employee assistance programs or counselling services for personal support and well-being.

#### Documentation and Record-Keeping:

- Maintain accurate and up-to-date records of client interactions, including details of distressing calls, risk assessments, and actions taken.
- Ensure compliance with organisational policies and procedures for documentation and record-keeping, including data privacy and security requirements.

#### Quality Assurance and Continuous Improvement:

- Participate in quality assurance processes and performance reviews to monitor service delivery standards and identify opportunities for improvement.
- Provide feedback and suggestions for enhancing organisational processes and practices to better support clients and staff.

#### Conclusion:

These guidelines provide support workers with a framework for managing distressing calls while providing effective support to clients online or over the phone. By adhering to industry-specific and organisational guidelines, support workers can ensure the delivery of high-quality, culturally sensitive, and ethical support services in the Australian context.

## Independence, informed choice and decision-making

### Policy

Empower Care Community Services is committed to supporting and protecting clients' right to make informed and independent decisions about their own lives and give informed consent. This policy assumes that each participant has the dignity of risk to make their own decisions.

- Active decision-making and individual choice is supported for each participant, including the timely provision of information using the language, mode of communication and terms that the participant is most likely to understand.
- Each participant's right to the dignity of risk in decision-making is supported. When needed, each participant is supported to make informed choices about the benefits and risks of the options under consideration.
- Each participant's autonomy is respected, including their right to intimacy and sexual expression.
- Each participant has sufficient time to consider and review their options and seek advice if required, at any stage of support provision, including assessment, planning, provision, review and exit.
- Each participant's right to access an advocate (including an independent advocate) of their choosing is supported, as is their right to have the advocate present
- Empower Care Community Services will provide an interpreter if required for communication with the participant and respect to work with participant's interpreter or representatives.
- Regular communications with participants must be planned and performed in a way that is identified during the initial assessment process and documented in their Individual Support

## Person-centred Planning

Empower Care Community Services is committed to ensuring highly individualized care and quality of life for clients. The person is at the center of the planning process and the core value of person-centered planning is supporting individual choices, preferences, goals, aspirations and holistic needs. Holistic is inclusive of social, relationship, physical, emotional and spiritual needs.

- Person centred planning involves the client, family, friend/s, professional consultant and any other person the client wishes to be part of the process. making and choice.
- Plans are developed to reflect the client's strengths, wishes, preferences, future goals and support requirements.
- The plan is regularly monitored and reviewed to ensure the client's needs are continually meet.
- A person centred planning meeting is conducted regularly or when required.

## Workplace Health and Safety (WHS)

Empower Care Community Services is committed to ensuring a safe environment for clients, family members, staff and visitors. Workplace Health and Safety (WHS) practices will be managed consistently and within WHS legislative requirements.

- All Empower Care Community Services staff will be provided with appropriate information and training in relevant WHS standards and practices.
- All Empower Care Community Services staff will be provided with the necessary equipment to minimise workplace accidents, injuries and illnesses.
- Empower Care Community Services will take all reasonable steps to assess the safety of the locations where Empower Care Community Services staff provides support to clients. This includes conducting WHS assessment prior to staff delivering services to clients in their homes.
- Where appropriate, Empower Care Community Services staff will be provided with a safe and reliable means of transportation between the office and work sites.
- Empower Care Community Services will ensure all work-related accidents, injuries and illnesses are properly documented, investigated and managed in line with WHS legislative requirements.
- In the event of injury or illness Empower Care Community Services will implement a rehabilitation plan to assist the staff member to return to work as soon as practicable.
- Empower Care Community Services will promptly investigate, remedy and document any organisational employee concerns regarding occupational health and safety matters.

### Managing hazards

Effective hazard management is the key to preventing/eliminating or minimising workplace illness and injury.

Hazard management is most effective when it is managed on a systems basis rather than ad hoc. This involves five steps (often referred to as the SAFER approach):

- SEE (identify) the hazards.
- ASSESS the risks (decide how serious they are)
- FIX (control) the risks.
- EVALUATE the outcomes
- REVIEW the controls and monitor compliance.



The major goal of managing hazards in the community is worker safety. They must be made aware that if their personal safety is threatened, it is better to leave than remain in an at-risk environment.

### **Hazard identification**

A hazard is something that has the potential to cause injury or illness. To identify hazards, you should:

- conduct a safety check before the worker starts work in a new client's home
- seek information about hazards from referring agencies
- encourage workers to report hazards using hazard forms or direct reporting
- discuss WHS at staff meetings(while maintaining client confidentiality)
- check records of incidents, injuries or near misses

Some hazards will be more obvious than others. When you are conducting an inspection, include both the outside of a home and the inside.

Review the environment (lighting, access, dust and noise), security, housekeeping, work tasks, and equipment and check for any hazardous substances. It is important to consult with the client when conducting a safety check and to involve them as much as possible, informing them of any issues identified that may affect their or a Support Worker's personal safety.

### **Risk assessment**

Risk assessment is deciding the level of risk associated with a hazard in order to plan what to do about it. Risk assessment is best done in consultation with the people working in the area.

To estimate the level of risk, you and your workers should consider:

Likelihood: How likely is it that an injury or illness will result from the hazard?

Consequences: How severe the injury or illness resulting from the hazard might be. You may need to consider:

- the nature of the hazard and how it might affect health and safety
- how workers are exposed to the hazard
- how much, how often, and how long are workers exposed to the location of the hazard

### **Challenging or aggressive behaviour**

Workplace violence is defined as 'any incident where an employer or worker is abused, threatened or assaulted in situations relating to their work' and includes issues such as sexual harassment, bullying and challenging client behaviours.

Threats to the personal safety of community workers may arise from interaction with clients, client's family members or friends, or members of the general public. This issue presents a particular problem, as community workers often work alone and after dark.

The work is conducted within another person's environment and workers can be confronted with values, attitudes and belief systems at odds with their specific training and experience.

It is sometimes difficult to anticipate who else may be in the house at the time workers visit or to control the behaviour of visitors. As a result, workers may be at risk of experiencing challenging, aggressive and/or violent behaviour from a client or a client's relative or visitor/s. In most situations, planning and good interpersonal skills will significantly reduce the likelihood of situations deteriorating to the point where workers are threatened. Workers should be trained to always be aware of their surroundings and how to de-escalate tense situations.

Challenging behaviour may include:

- verbal abuse
- inappropriate sexual behaviour
- difficult personalities
- those with unrealistic expectations or who repeatedly refuse services
- aggressive or threatening behaviours directed at themselves, property or others.

These behaviours can put the physical or psychological health of workers at risk. There may also be an accumulative effect; that is, while a one-off incident may not cause psychological harm, repeated incidents may result in harm. Further, psychological harm from the incident will vary in degree from worker to worker, depending on their past experiences, values and beliefs.

Factors that may contribute to clients displaying challenging behaviour include:

- pain (physical or psychological)
- a feeling of loss of control
- depression, anxiety, loss or grief
- frustration from not being understood due to language barriers, speech impediments, or from misunderstanding/misinterpreting information or situations.
- lack of self-worth, loneliness, powerless, feeling ignored, having unmet needs or rejection
- confused states caused by dementia, hypoglycaemia or epilepsy.
- mental illness or personality disorders
- brain injury or physical and neurological disability.
- medication – either incorrect or omitted doses.

When facing the risk of challenging behaviour, you should remove yourself from the situation if it's safe to do so; you and your workers should consider whether the client exhibiting challenging behaviours has control of their behaviour or is without control, e.g. due to brain injury,, dementia, mental illness etc.

Those who do have control should be made aware of the natural consequences of their behavior e.g. changes to the services provided.

Where clients do not have control, it is essential to identify triggers and to prevent these from occurring or to minimise the risk of hazardous outcomes. Details relating to the client's capacity to control behaviours, triggers, risk assessment, assisting medical staff and other members to develop a behaviour management plan along with applying strategies to address specific behaviours and any actions taken must be recorded and communicated to relevant workers, informing medical staff of the client's conditions, completing an incident report. The worker's perception of aggressive behaviour is important.

**Important:** Not all expressed anger is a problem to workers, but if 'it hurts your feelings' or 'makes you feel uncomfortable,' it is an incident and should be reported.

For instance, people with dementia may exhibit challenging behaviours such as aggression, agitation, or wandering. Support Workers may find it challenging to manage these behaviours safely and effectively, especially without proper training and resources.

## Reporting and Recording

### Hazard Reporting

- Where possible, staff should take immediate action to remove or minimise the risk associated with any hazards. In some circumstances to minimise this may involve removing equipment from service and applying 'out of service' tags or isolating an area where a spill may have occurred.
- If staff are not able to control the hazard themselves, they must notify the supervisor immediately.
- Staff must document all hazards that they identify or are reported to them by clients, visitors and/or family members, that they cannot eliminate immediately.
- All hazards must be documented on the Hazard Report Form.
- The completed Hazard Report Form must be completed and forwarded to the supervisor within 24 hours.

### Incident Reporting

- Staff must report all client concerns, injuries, incidents or 'near misses' to their supervisor for hazard identification and control.
- All incidents must be documented on an Incident Report Form
- Inform medical staff (where applicable) if you are in a client's home and there is a risk to your personal safety due to the client's behaviour.
- Assist medical practitioners and
- If staff are unable to complete an Incident Report Form at the time of the incident, they must complete the form within 24 hours and submit it to the supervisor.
- You may not have the legal responsibility to report abuse or neglect directly to authorities in some cases. Therefore, you will need to escalate concerns to your supervisor or via designated reporting channels, which can delay timely interventions.
- In the case of abuse or neglect, you must notify your supervisor immediately via phone, email or face-to-face.

## **Progress Reporting**

- Staff must report all client concerns beyond the scope of their role to their supervisor either in writing via email or verbally
- Your email or verbal report must include the date, time and incident of the situation, e.g. challenges, concerns, actions or strategies that you may have recommended.

## **Case Notes**

- Staff must update client case notes where relevant.
- Case notes should include the date, signature and printed name with all entries
- Put a line through any errors, date and sign.
- Use blue or black ink
- Only use approved abbreviation approved
- Writing must be legible
- Entries must be objective and write clients direct words with quotation marks
- Entries must be factual, accurate and in a logical order.
- After the entry, draw a line through to the end of the page

## Crisis Intervention and Management

**Policy Statement:** This policy outlines the procedures for managing and responding to crisis situations involving clients with mental health issues within our organisation. The primary goal is to ensure the safety and well-being of clients while providing appropriate support, assessment, documentation, and referral.

### Aim

The aims of the Crisis Intervention and Management Policy and Procedures are to:

1. Ensure the safety and well-being of all individuals involved during a crisis.
2. Provide a structured and effective response to manage crises promptly and efficiently.
3. Minimize the impact of crises on the organisation, its members, and stakeholders.
4. Establish clear guidelines for preventing, identifying, and addressing potential crises.
5. Promote a culture of preparedness and resilience within the organisation.

### Scope

This policy and its procedures apply to:

1. All members of the organisation, including employees, students, contractors, and visitors.
2. All types of crises, including but not limited to natural disasters, accidents, health emergencies, security threats, and reputational issues.
3. All organisational locations and activities, including on-site and off-site events and digital environments.
4. All phases of crisis management, including prevention, preparedness, response, and recovery.

### Procedures

- 1. Crisis Assessment:** When a support worker identifies a client in crisis, the immediate priority is to ensure the safety of the client and those around them. Assess the nature and severity of the crisis, including any immediate risks to the client's mental health.
- 2. Immediate Crisis Intervention:** Engage in active listening and provide emotional support to the client. Utilise crisis intervention techniques to help the client manage immediate distress. Explore coping strategies and provide reassurance.
- 3. Safety Assessment:** Evaluate the client's immediate safety, including the presence of any suicidal or harmful thoughts. If there is an immediate risk, take appropriate steps to ensure the client's safety, which may include involving emergency services.

- 4. Documentation:** Document the details of the crisis situation, including the client's presentation, behaviour, and any interventions provided. Record the client's responses, expressed feelings, and any information relevant to the crisis assessment.
- 5. Referral Procedures:** Determine the need for additional support beyond the scope of the support worker's role. Consult with the immediate supervisor or designated mental health professional to discuss the crisis situation and assess the need for external assistance. If necessary, make a referral to appropriate external agencies or professionals, such as crisis helplines, mental health clinics, or emergency services.
- 6. Reporting:** Follow organisational reporting protocols for crisis situations, ensuring that relevant supervisors or managers are informed promptly. Maintain confidentiality while reporting essential information to relevant personnel.
- 7. Follow-Up and Monitoring:** Develop a follow-up plan with the client to monitor their well-being post-crisis. Schedule regular check-ins to assess the client's progress and adjust support strategies as needed.
- 8. Training and Professional Development:** Ensure that support workers receive adequate training in crisis intervention, assessment, and documentation. Encourage ongoing professional development to enhance support workers' skills in managing mental health crises.
- 9. Cultural Competence:** Recognize and respect the cultural diversity of clients, incorporating culturally sensitive approaches in crisis intervention and support.
- 10. Review and Update:** Regularly review and update this policy to align with best practices, organisational changes, and emerging mental health guidelines.

This policy aims to provide a structured and comprehensive approach for support workers to manage and respond to mental health crises effectively while maintaining the safety and well-being of clients.

### **Crisis Response Plan: Mental Health Crisis Step 1: Initial Assessment**

#### **Procedure:**

1. **Engage Calmly:** Approach the individual in a calm and non-threatening manner, maintaining a respectful distance.
2. **Active Listening:** Allow the person to express their feelings and concerns without interruption, using open-ended questions.
3. **Observation:** Assess the immediate environment for potential safety risks or triggers.
4. **Safety Assessment:** Inquire about thoughts of self-harm or harm to others. Evaluate the urgency of the situation.

## **Step 2: Crisis Intervention Procedure:**

1. **Provide Emotional Support:** Offer reassurance and empathy, emphasising that support is available.
2. **Explore Coping Strategies:** Discuss and encourage the use of immediate coping strategies, such as deep breathing exercises or grounding techniques.
3. **Connection to Support Network:** Inquire about the person's support network and encourage them to contact friends, family, or a counsellor.

## **Step 3: Risk Assessment**

### **Risk Assessment Template:**

- **Identified Risk Factors:** List specific factors contributing to the crisis situation (e.g., recent trauma, relationship issues).
- **Severity of Risk:** Assess the severity of the crisis on a scale (e.g., low, moderate, high).
- **Protective Factors:** Identify existing protective factors (e.g., social support, coping skills).
- **Immediate Safety Measures:** Document any immediate safety measures implemented during the crisis response.

## **Step 4: Documentation Procedure:**

1. **Detailed Record Keeping:** Document the crisis situation, including the individual's statements, observed behaviours, and any interventions provided.
2. **Date and Time Stamp:** Clearly record the date and time of each interaction.
3. **Communication Details:** Note any communication with the individual's support network, emergency contacts, or other professionals.
4. **Collaborative Input:** If applicable, document collaborative input from colleagues or mental health professionals involved in the crisis response.

## **Step 5: Referral Procedure:**

1. **Identify Appropriate Services:** Determine the most suitable services based on the individual's needs (e.g., crisis helpline, mental health counsellor).

2. **Provide Information:** Share relevant information with the individual about available services, including contact details and hours of operation.
3. **Facilitate Contact:** If necessary, assist the individual in contacting the identified service and provide any required information.
4. **Follow-Up Plan:** Collaborate with the individual to establish a follow-up plan, which may include additional support sessions or appointments.

## **Step 6: Debriefing and Self-Care**

### **Procedure:**

1. **Self-Reflection:** Reflect on the crisis response, considering what worked well and areas for improvement.
2. **Debrief with Colleagues:** If appropriate, engage in a debriefing session with colleagues to share insights and gather support.
3. **Self-Care:** Encourage self-care practices for both the individual and the support worker involved in the crisis response.



# Critical Incident/Structured Debriefing Policies and Procedures

## PURPOSE

The Empower Care Community Services is committed to providing support to members of the Management Committee, Coordinator, staff and volunteers who are affected by a critical incident in the workplace.

The impact of critical incidents varies in intensity and personal impact and people can be affected by:

- Abusive behaviour
- Violent behaviour/assaults
- Viewing a disturbing event - e.g., self-harm, suicide, harm to other people
- Any event that affects mental well-being and causes undue stress

The purpose of this policy is to ensure that debriefing is available following all critical incidents to assist people in dealing with the incident and its impact on them.

This Policy should be read in conjunction with the *Workplace Health and Safety Policy* and the *Occupational Rehabilitation Policy*.

## POLICY

Within its capacity to do so, the organisation will provide a timely, responsive, efficient and effective system of support to anyone suffering from the impacts of a workplace critical incident.

The organisation will ensure that, in the first instance, members of the Management Committee, the Coordinator, staff or volunteers who may be affected by a critical incident in the workplace are offered the opportunity to talk about their experience with colleagues as soon as practicable, and according to their wishes.

The organisation will offer prompt access to independent qualified counselling services to any member of the Management Committee, the Coordinator, staff or volunteer who requests it following a critical incident.

All of the above people will be encouraged to:

- request debriefing/counselling processes if they feel it will help them deal with the impacts of a critical incident and
- be responsive to the needs of colleagues to help them in an informal way to deal with the impacts of critical incidents.

## PROCEDURES

1. Clearly define the objectives of the debriefing session. For example, the objective could be to provide emotional support, discuss the incident's impact, and identify areas for improvement
2. Determine who should participate in the debriefing. .
3. Choose a time and inform the participants about the upcoming debriefing session, explaining its purpose and assuring them of confidentiality. Clear communication helps set expectations.
4. Select a location that is private, quiet, and conducive to open discussion and create an emotionally safe environment. This involves considering factors like seating arrangements and lighting and ensuring that participants feel comfortable sharing their thoughts and feelings.
5. Prepared an agenda with key discussion points based on the incident and its impact. This could include exploring emotions, analysing actions taken, and discussing the team's response.
6. Communicate the importance of the debriefing session to all participants, emphasising its confidential and supportive nature.
7. Confirm Resources: Ensure access to any necessary resources, such as counselling services or support personnel, to address potential emotional reactions during or after the debriefing.

## DEFINITIONS

**Critical Incident:** is an occurrence in the workplace that could affect mental health and well-being and/or cause undue stress.

**Workplace:** a place where work is carried out for a business or undertaking of the house and includes any place where a worker goes, or is likely to be, while at work.

## Communication Protocols

Effective communication is crucial in providing quality care to individuals in aged care and disability settings. This policy establishes the communication protocol to be followed by all staff members to ensure clear, respectful, and efficient communication with clients, their families, carers, and all other stakeholders.

### **Policy Procedure:**

#### **Use Clear and Respectful Language:**

- Use simple and easily understandable language when communicating with clients, their families, and colleagues, taking into consideration their level of comprehension and any potential language barriers.
- Use respectful and professional language at all times, avoiding derogatory, discriminatory, or offensive language.
- Address clients and colleagues by their preferred name or title, as appropriate.

#### **Active Listening:**

- Practice active listening, which involves fully focusing on the speaker, maintaining eye contact, avoiding interruptions, and providing feedback to ensure understanding.
- Seek clarification when necessary and confirm understanding by paraphrasing or summarising the speaker's message.

#### **Use of Non-Verbal Communication:**

- Be aware of non-verbal cues such as body language, facial expressions, and tone of voice, as they can significantly impact communication.
- Use appropriate non-verbal cues, such as smiling, nodding, and maintaining an open posture, to convey empathy, respect, and understanding.

#### **Timely and Accurate Documentation:**

- Document all relevant communication with clients, their families, and colleagues in the appropriate records or documentation systems, following organisational policies and procedures.
- Ensure that documentation is accurate and complete and reflects the facts of the communication in a timely manner.

#### **Use of Communication Aids:**

- Utilise appropriate communication aids, such as visual aids, written materials, and interpreters, when necessary, to facilitate effective communication with clients who have hearing, speech, or cognitive impairments.
- Seek assistance from colleagues or external resources, such as language interpreters, as needed to ensure effective communication.

#### **Privacy and Confidentiality:**

- Respect and maintain the privacy and confidentiality of all communication with clients, their families, and colleagues, in accordance with relevant laws, regulations, and organizational policies.
- Only share information on a need-to-know basis and obtain proper consent before disclosing any personal or sensitive information.

### **Resolution of Communication Issues:**

- Address any communication issues or conflicts in a timely and professional manner, using appropriate channels, such as speaking with the individual directly or involving a supervisor or manager, as needed.
- Seek guidance or training from relevant resources or colleagues to improve communication skills or resolve communication challenges effectively.

### **Ongoing Education and Training:**

- Participate in ongoing education and training programs related to effective communication in aged care and disability settings, as offered by the organisation or external sources, to enhance communication skills and knowledge.
- Stay updated with relevant policies, procedures, guidelines, and best practices related to communication in aged care and disability settings.

## **Written Communication**

### **Determine the Purpose**

Clearly identify the purpose of the written communication. Is it to inform, request, persuade, or convey a message? Understanding the purpose will help you determine the appropriate tone, format, and content of the written communication.

### **Plan and Organise:**

Organise your thoughts and ideas before you start writing. Outline the main points or key information that you want to convey in a logical and coherent manner. Consider the intended audience and tailor your communication accordingly.

### **Choose the Right Format**

Select the appropriate format for your written communication. It could be an email, memo, letter, report, or any other suitable format depending on the purpose and audience of your communication.

### **Use Clear and Concise Language**

Use simple and easily understandable language. Avoid jargon, technical terms, or complex language that may be difficult for the reader to understand. Be concise and to the point, avoiding unnecessary wordiness.

### **Follow Proper Grammar and Spelling**

Use correct grammar, punctuation, and spelling to ensure that your written communication is professional and credible. Proofread your communication to catch any errors before sending or submitting it.

### **Include Relevant Details**

Include all the necessary and relevant details in your written communication. Provide facts, data, examples, or evidence to support your message or request. Use bullet points, headings, or lists to make the information more accessible and easy to read.

### **Use Appropriate Tone**

Use a professional and respectful tone in your written communication. Consider the relationship and level of formality with the recipient, and adapt your tone accordingly. Avoid using negative, confrontational, or emotional language.

### **Review and Revise**

Review and revise your written communication to ensure that it effectively conveys the intended message and meets the purpose and requirements. Check for clarity, accuracy, and coherence. Make any necessary edits or improvements before finalising and sending the communication.

### **Maintain Confidentiality**

If applicable, ensure that any confidential or sensitive information is protected and shared only with the appropriate recipients in accordance with organisational policies and legal requirements.

Also refer to the Style Guide further in this document.

### **Electronic and digital communication**

- Choose the appropriate electronic communication channel for your message. This could include email, instant messaging, chat, or other communication tools commonly used in your organisation or industry.
- Consider the intended audience for your electronic communication. Tailor your message to the specific recipients, keeping in mind their level of familiarity with the topic and their communication preferences.
- Use simple, clear, and concise language in your electronic communication. Avoid jargon, technical terms, or complex language that may be difficult for the recipient to understand. Keep your message focused and to the point.
- Use appropriate formatting in your electronic communication, such as paragraphs, headings, or bullet points, to make your message easy to read and understand. Use a professional font, font size, and formatting that aligns with your organisation's guidelines.
- Include all the necessary and relevant details in your electronic communication. Provide context, facts, data, or examples to support your message or request. Use hyperlinks or attachments for additional information, if applicable.

- Use a professional and respectful tone in your electronic communication. Avoid using negative, confrontational, or emotional language. Be mindful of the tone in your messages to maintain a positive and professional communication environment.
- Follow proper electronic communication etiquette, such as using appropriate greetings and sign-offs, using subject lines that accurately reflect the content of your message, and using appropriate language and tone.
- Be mindful of the sensitivity and confidentiality of the information being shared electronically. Follow organisational policies and procedures related to data privacy and security, and avoid sharing confidential or sensitive information inappropriately.
- Review and revise your electronic communication to ensure that it effectively conveys your intended message and meets the purpose and requirements. Check for grammar, spelling, and formatting errors, and make any necessary edits or improvements before sending or submitting the communication.

# Procedures for working with clients with domestic and family violence

## Standards and Procedures in Domestic and Family Violence Cases

### 1. Confidentiality and Privacy

- **Standard:** Maintain the confidentiality and privacy of all client information.
- **Procedure:** Obtain client consent before sharing personal information, inform clients about the handling of sensitive data, and follow organisational policies to maintain confidentiality.

### 2. Client Assessment and Safety Planning

- **Standard:** Develop and implement safety plans tailored to the specific needs of each client.
- **Procedure:** Conduct thorough risk assessments and collaborate with clients to create personalised safety plans with emergency contacts and safe places.

### 3. Allocation of Services

- **Standard:** Provide services that are respectful, non-judgmental, and empower clients.
- **Procedure:** Actively listen to clients, validate their experiences, provide information and options, and tailor support services to their unique needs and preferences.

### 4. Interview

- **Standard:** Conduct interviews within legal and privacy frameworks, respecting clients' autonomy and confidentiality.
- **Procedure:** Create a safe, non-threatening environment, use trauma-informed approaches, validate clients' experiences, and conduct interviews with sensitivity and empathy.

### 5. Documentation

- **Standard:** Accurately document all interactions, assessments, and actions taken.
- **Procedure:** Maintain detailed records of client interactions, risk assessments, safety plans, referrals, and follow-ups, ensuring documentation is factual, clear, and timely.

### 6. Case Management

- **Standard:** Provide immediate support and intervention in crisis situations.
- **Procedure:** Offer immediate emotional support, complete assessments for emergency accommodations, seek legal aid, and access emergency services if required.

### 7. Referrals and Collaboration

- **Standard:** Facilitate access to a broad range of services through referrals and partnerships.
- **Procedure:** Provide clients with referrals, assist them in accessing services, and ensure their needs and preferences are met professionally.

#### 8. Programmed Intervention

- **Standard:** Implement comprehensive and culturally sensitive DFV intervention programs.
- **Procedure:** Offer a variety of therapeutic modalities tailored to specific needs, adhere to evidence-based practices, and involve staff in regular training and professional development.

### PROCEDURES

1. Choose a Suitable Location
  - Identify a workplace-like setting, such as a private office or meeting room.
  - Ensure the space is accessible, including identifying mobility needs.
  - Make the space comfortable with adequate seating, lighting, and privacy.
2. Plan and Adopt Work Practices
  - Establish Rapport:
    - Greet the client warmly and introduce yourself.
    - Show empathy and understanding towards her situation.
  - Actively Listen:
    - Allow the client to share her story without interruption.
    - Use active listening techniques, such as nodding and summarising her points.
  - Provide Information:
    - Explain Empower Care Services' support options, including counselling and legal aid.
    - Discuss specific services like safety planning and emotional support tailored to the Client's needs.
3. Explain the clients their rights and responsibilities and your rights and responsibilities as a support worker.
4. Engage in a Conversation with a client and address any individual differences or family differences.

For example, a client might have some unique Personality Traits: "As a support worker, you need to understand that the client's unique personality traits might influence their response to the abuse and willingness to seek help. You will tailor your approach to respect your client's pace and preferences."



5. Assess Information for Complexity, Urgency, and Eligibility. Complete a client Assessment Report and Priorities for Service Delivery and Safety, for example.

Immediate Safety: "need to develop a safety plan, including emergency contacts and safe places."

Emotional and Psychological Support: "Providing counselling and ongoing emotional support is essential within the boundaries of the role and managing referrals."

6. Identify and Respond to Risks or indications of Risk
7. Identify your Limitations as a support worker in terms of the Scope of Practice and also Limitations of an Organization, such as resource limitations or strains. Inform the clients about these and work around the limitations.
8. Create a Safety Plan and complete Client Safety Planning Record
9. Develop a Client Action Plan using the Client Action Plan Template and include Goals, Strategies for Interventions, Available Services, and Referrals.

By following these steps, the support worker can provide comprehensive and empathetic support to clients, ensuring their safety and addressing needs effectively.

## Fatigue and Stress Management

Empower Care Community Services believes in creating healthy work as a shared, cooperative venture where both employees and employers have roles and responsibilities, including the maintenance of a balance between work and non-work activities. It is not something that can be imposed – and it will require mutual understanding, accommodation, respect and the normal processes of give and take for its success.

### Basic facts about stress and fatigue

What is 'stress' and how does it affect us?

There are many definitions of stress and many theories about it. No definition or theory of 'stress' is perfect. Each theory and definition seems to answer one aspect of the problem well, but other

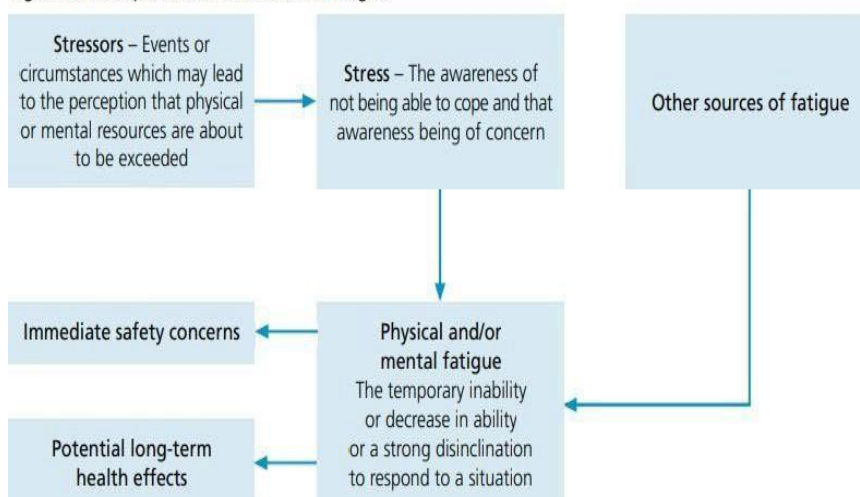
Stressors – events or circumstances that may lead to the perception that physical or psychological demands are about to be exceeded. They can be of several types and can arise in and out of work.

For example, work-related stressors may be:

- inevitable: e.g. starting a new job, learning a new skill, the difficulty of dealing with adverse weather conditions such as drought or flood, unpredictable emergencies in the workplace, intrinsic difficulties in the work such as working in a competitive industry
- avoidable: e.g. undertaking hazardous work for too many hours each week for long periods in a physically demanding environment; producing multiple reports that no-one reads; inhospitable or dangerous physical environments; no performance feedback or only negative feedback; no interest shown by the supervisor in helping solve problems. Non-work-related stressors may include:
- personal: e.g. relationship, child or other family problems, financial difficulties
- intrinsic: feelings of not coping may just arise from within, with no apparent stressor(s) being discernible.
- Fatigue – the temporary inability, or decrease in ability, or a strong disinclination, to respond to a situation because of previous over-activity, either mental, emotional or physical.

While fatigue can be the result of many things it can result from both physical and mental effort.

Figure 1.1 Workplace stressors, stress and fatigue



Stress is not an illness but an awareness that a person is not coping and that this is a negative feeling, which may need to be conveyed to the employer.

### **How (and why) does stress affect us?**

The interactions between all aspects of our lives are complex. No one model of 'stress' covers all the fragments of information that are known about it and its implied coping strategies.

### **When are the effects of stress and fatigue critical?**

Stress and fatigue can create safety hazards in the workplace, particularly in safety-critical or safety-sensitive jobs and are especially critical where other workers or members of the public may be affected.

Errors that can be made are not exclusive to health and safety:

- A fatigued pilot or air traffic controller is likely to place many more lives at risk than their own.
- A fatigued worker on a scaffold.
- Fatigued employees using dangerous machinery or a fatigued driver.
- A highly trained employee becomes unable to cope with being at the interface between public expectations and legislative/operational requirements and resigns.
- An employee in a company where business is increasing rapidly loses track of the status of an order – and the company loses that customer's business.

Managers need to be able to recognise stress and fatigue when it develops in their employees and leads to impairment and should have the training and systems to make sure they can recognise impairment and its potential causes, and act to prevent problems.

### **Strategies to Manage stress and fatigue:**

- Acknowledge that it is normal to feel stressed in your situation.
- Take care of your basic needs.
- Take time to eat, exercise, rest and relax, even for short periods.
- Be mindful of the hours you are working and communicate with your leader if those hours become unreasonable or unmanageable.
- Check in with co-workers to see how they are doing and have them check in with you. Find ways to support each other.
- Speak to your leader about keeping reasonable working hours, where possible, so you do not become too exhausted and burn out.
- Stay connected to friends, family, and community through phone, social media, or messaging apps. This keeps you safe and helps bridge the gap if you find yourself experiencing avoidance by friends, family, or community due to their fear or perceived stigma.

# Organisational Support Services for All Employees

## Policy

Empower Care Community Services is committed to ensuring that all staff are trained and participate in professional development opportunities to achieve the organisation's goals and objectives. Training and development is integral to workplace productivity, staff recognition and continuous improvement in quality services. The aim of this policy is to identify training and development needs of staff through formal supervision and performance appraisal.

## Procedure

- Conduct a formal induction process for all new Empower Care Community Services staff.
- Identify training and development opportunities with all staff through formal performance appraisal.
- Provide supervisors with written information and training in conducting performance appraisals.
- Ensure all Empower Care Community Services staff have one performance appraisal conducted each month.
- Maintain performance appraisal records for each Empower Care Community Services staff member.
- Training and development requirements will be identified in line with the staff's current position duties.
- Staff may request to do professional development that is not specific to their current position duties at Empower Care Community Services. At the discretion of the Manager, Empower Care Community Services shall endeavour to support further professional development through:
  - Leave arrangement negotiations to attend the development opportunity
  - Grant study leave to attend exams.
  - Negotiated incurred expenses and reimbursement for professional development opportunities.
- Maintain an employee training and development record system that ensures all staff attends mandatory training and maintain currency.
- Mandatory training includes:
  - Manual Handling
  - Emergency Procedures
  - Fire Safety in the Home
  - Infection Control
  - Client rights and responsibilities.
  - First Aid
  - Training is to be attended within working hours

Prioritise physical and emotional safety of the workers in developing a response to the situation.

1. **Establish Boundaries:** Encourage workers to establish clear boundaries in their interactions with clients and to prioritize their own safety and well-being. Empower workers to set limits on the level of risk they are willing to manage and to seek assistance or support when needed.
2. **Regular Check-Ins:** Schedule regular check-ins with workers to assess their well-being and provide ongoing support and supervision. Encourage open communication and create a culture where workers feel comfortable sharing concerns or seeking help when needed.
3. **Collaborative Approach:** Foster a collaborative approach among workers, encouraging teamwork and communication to support each other in managing challenging situations. Encourage workers to share resources, strategies, and best practices for supporting clients and prioritizing safety.
4. **Risk Assessment:** Conduct regular risk assessments to identify potential hazards and risks to workers' safety and well-being. Develop safety protocols and procedures to address these risks effectively and ensure workers are prepared to respond to emergencies.
5. **Training and Education:** Provide comprehensive training and education to workers on recognizing signs of domestic violence, understanding the impact of trauma, and implementing safety protocols. Equip workers with the knowledge and skills they need to effectively support clients like Dianne while prioritizing their own safety.

**Support Services to meet the needs of the team members:**

1. **Emotional Well-being Support Program:** this includes access to counseling services for team members who experience heightened stress or emotional distress due to work-related incidents.
2. **Advanced Training and development in Crisis Intervention:** provide access to specialized training programs focused on crisis intervention and de-escalation techniques. This can empower support workers, especially those who are newly qualified, with the skills needed to handle challenging situations more effectively.
3. **Employee Assistance Program (EAP):** Provide Access to Employee Assistance Program that provides confidential counselling services to support workers dealing with stress, trauma, or emotional challenges related to their work. Clearly communicate the availability and access procedures for the EAP.
4. **Ongoing Mental Health Check-ins:** Implement a system for regular mental health check-ins with team members, irrespective of whether they have been involved in a critical incident. These check-ins can provide an avenue for team members to express concerns, discuss emotional well-being, and seek support, contributing to proactive mental health management.
5. **Peer Support Programs:** Formalize peer support programs within the organization to encourage team members to lean on each other for emotional support. This could involve assigning experienced team members as mentors or creating buddy systems to help newer members navigate challenging situations.
6. **Flexible work arrangements:** Providing options for flexible work arrangements for the employees to help them manage and recover from a crisis situation.

# Intervention and Behaviour Support Policy and Procedure

## Policy Statement

At Empower Care Community Services we aim to create a safe, nurturing and empowering environment for clients where individual needs are met to enable everyone to maintain optimum levels of physical, social and emotional wellbeing. We strive to always protect the rights and dignity of individuals in our care. This policy outlines the acceptable interventions to be used at Empowered Care to respond to challenging, inappropriate or harmful behaviour by clients and to outline Empowered Care's behaviour support strategy.

## Scope

This policy applies to clients, staff, management, medical professionals and visitors of Empowered Care.

## Background

In order to balance the rights and safety of our clients, this policy aims to provide clear guidance on the use of interventions and the behaviour support process available to respond to challenging, inappropriate or harmful behaviour by clients. In some cases, challenging behaviour or changes in behaviour that require intervention and support strategies often relate to children and young people due to their vulnerabilities having been exposed to some form of abuse or neglect.

Other behaviours may arise from clients with a disability or mental health issue or as a result of trauma, stress, anger or despair.

The objectives are:

- to encourage and provide a framework for using Positive Behaviour Support as the preferred main system for managing challenging behaviours
- to ensure that staff are educated about prohibited practices and are aware of Empowered Care's zero-tolerance approach to the use of these practices.
- Legislative Requirements
- Information Privacy Act 2014
- Privacy Act 1988
- Australian Human Rights Commission Act 1986
- National Framework for Alcohol, Tobacco and Other Drug Treatment 2019-2029
- National Quality Framework for Drug and Alcohol Treatment Services
- Severe Substance Dependence Treatment Act 2010
- Drugs, Poisons and Controlled Substances Act 1981
- Mental Health Act 2014
- Children, Youth and Families Act 2005

## Principles that Inform Our Policy

All decision-making about our Intervention and Behaviour Support Procedure is carried out in accordance with the principles of our Intervention and Behaviour Support Policy.

- At Empowered Care, we uphold and protect the rights and dignity of our clients. We seek to create an environment where each client enjoys optimum levels of physical, social and emotional well-being.
- To this end, we commit to adopting person-centred, rights-based approaches in our response to challenging behaviours.
- All staff, board members, students and volunteers are to have an appropriate understanding of how to meet the organisation’s legal and ethical obligations to ensure privacy and confidentiality.
- Management of concerning behaviours will be closely monitored and require ongoing case management and team meetings for optimum results, accountability and positive outcomes.
- Our approach seeks to:
  - understand the person and the environment as well as the behaviour.
  - understand the underlying causes of challenging behaviour and address them.
  - use positive, evidence-based approaches.
  - involve the client where relevant as an active participant in assessment and establishing positive behavior support.
  - respond to feedback.
  - be accountable to clients and their family members.
  - comply with legislative requirements through clear reporting
  - ensure that restrictive practices (outside of an approved positive behaviour plan with the NDIS) are not supported in any circumstance, and in particular, investigate any report of restrictive practice being used as a form of physical punishment.

## Key Terms

Term	Meaning	Source
Behaviour Support Plan (BSP)	Any client that requires behaviour support must have a Behaviour Support Plan (BSP) included in their care plan. BSPs are developed in collaboration with the client, their family members, and an authorised NDIS behaviour support practitioner (where appropriate).	<a href="https://www.ndiscommission.gov.au/providers/understanding-behaviour-support-and-restrictive-practices-providers">https://www.ndiscommission.gov.au/providers/understanding-behaviour-support-and-restrictive-practices-providers</a>
Behaviours of concern (also termed challenging behaviour)	Any behaviour with the potential to harm another person physically or psychologically or self or property. It can range from	SA Health, 2016

Term	Meaning	Source
	verbal abuse through threats or acts of physical violence.	
Restrictive Practices	A restrictive practice is any practice or intervention that has the effect of restricting the rights or freedom of movement of an NDIS consumer	<a href="https://www.facs.nsw.gov.au">https://www.facs.nsw.gov.au</a>
Prohibited Practice	<p>It is now recognised that some forms of restrictive practices pose an unacceptable risk of harm to people and must never be used. These practices are prohibited and, therefore, not considered to be regulated restrictive practices.</p> <p>Use of prohibited practices must be reported to the NDIS Quality and Safeguards Commission incident reporting team for NDIS participants and to the Department of Communities for state disability-funded participants.</p>	<a href="https://www.wa.gov.au/system/files/2021-07/Prohibited-practices.pdf">https://www.wa.gov.au/system/files/2021-07/Prohibited-practices.pdf</a>

#### Links to other Policies and Documents

- Child Safeguarding Policy and Procedures
- Domestic and Family Violence Policy and Procedures
- Reporting and Recording Behaviour Policy and Procedures
- Privacy and Confidentiality Policy and Procedures
- Housing and Homelessness Policy and Procedures
- Code of Conduct Policy and Procedures
- Mandatory Reporting Policy and Procedures
- Whistle-blowers Protection Policy and Procedures

#### Induction and Ongoing Training



Empowered Care requires that induction and ongoing training of all staff include the Intervention and Behaviour Support Policy to enable staff to fulfil their roles effectively. In addition, Empowered Care promotes information sharing at staff meetings, sharing of information received from industry trends or changes in legislation, and consultation at policy review sessions.

### **Monitoring, Evaluation and Review**

This policy will be reviewed annually or on the occurrence of any relevant legislative change. Management of Empowered Care will conduct reviews in consultation with staff and managers at respective meetings.

## Intervention and Behavior Support Procedure

### **In relation to Collection of Information**

The privacy of personal information is defined by legislation, Privacy Act 1988 (Cth). At all times, we act according to these legal requirements underpinned by the procedures outlined below.

We also strive to respect the confidentiality of other sensitive information. However, in the spirit of partnership, we share information with service users and other involved individuals and organisations (subject to consent) where it would be in the best interest of the service user or other individuals to do so.

Personal information collected by us is only for purposes that are directly related to the functions or activities of the organisation. These purposes include:

- enquiry about programs
- referral to programs
- provide treatment and support to service users
- administrative activities, including human resources management.
- sector development activities
- community development activities
- complaint handling.

For more detailed information about these purposes and the information handling practices that apply, refer to the Record Keeping Policy and Procedure and the Complaints Policy and Procedure.

We provide information to service users on collecting health and personal information, including:

- purpose of collecting information
- how the information will be used
- who information may be transferred to (if anyone), and under what circumstances will information be transferred
- limits to the privacy of personal information
- how a service user can access or amend their health information
- how a service user can make a complaint about the use of their personal information.

### **In relation to Behaviours of Concern**

Behaviours of concern will be the trigger in identifying when a Behaviour Support Response is required and the development of a Behaviour Support Plan is needed.

A behaviour of concern is any behaviour that poses a risk of physical harm to the individual themselves, a career, a staff member or any other person.

Such behaviours, whether with intent or not, have the likelihood of being destructive to property and causing injury to persons.

### **Management will be responsible for the following:**

- Ensuring each client's support workers receive training when a new Behaviour Support Plan is created.

- Authorise the use of physical, environmental or seclusion if stated in the Behaviour Support Plan. This is permissible only if other positive behaviour interventions have failed.
- Request the presence of a medical professional if a person presents a risk of harm to themselves or others and if other positive behaviour interventions have failed.
- Ensuring the Empowered Care Restrictive Practices Register is updated daily and submitted to NDIS every 28 days where relevant.
- Ensuring a Behaviour Support Response occurs when a person or child displays behaviours of concern.
- Provide staff with a referral system, advice and strategies to assist them in managing the behaviour using positive approaches that are collaborative and age-appropriate.
- Staff will ensure the following:
  - Have the right to be safe at work and to work in an environment free from the risk of physical assault.
  - Ensure they understand and comply with each client's Behaviour Support Plan.
  - Notify the Case Manager if they do not understand any aspect of the Behaviour Support Plan.
  - Complete Empowered Care training session on Behaviour Support, Restrictive Practices and Prohibited Practices on commencing employment.
  - Get approval from their nominated manager or supervisor to use restrictive practices if they are not authorised to do so in the Behaviour Support Plan.
  - Log any use of restrictive practices on the Empowered Care Restrictive Practices Register.
  - Request assistance from a medical professional or a supervisor if they believe a client presents a danger to themselves or others.
  - Report any use of prohibited practices by any staff member, contractor or volunteer to the Case Manager immediately.

### **In relation to Behaviour Support Assessment**

An accredited behaviour support practitioner must assess any client who displays challenging behaviour. The assessment process should aim to involve the client, their family members, carers or guardians, and the Empowered Care case manager. The values informing the assessment process must be based on a person-centred approach.

Behaviour support assessment involves a five-step cycle:

- Seek informed consent from clients and family members before the assessment.
- Maintain privacy, confidentiality and correct documentation, including a Behaviour Support Plan.
- Train key staff in the implementation of the Behaviour Support Plan.
- Elicite regular feedback from key stakeholders, including the client and their family.
- Review Behaviour Support Plans on an annual basis as a minimum.
- Behaviour Support Plans will consider antecedents, environmental factors and the person's strengths and interests.
- Clients and/or their families may dispute Behaviour Support strategies by meeting with or emailing the relevant Case Manager.

### **In relation to Restrictive Practices:**

- As an overarching policy across all Empowered Care divisions, restrictive practices are to be used only as an absolute last resort, in a manner approved by an accredited Behaviour Support practitioner and only after other positive intervention strategies have failed.
- In instances where a case worker uses a restrictive practice, a supervisor must approve this.
- All use of restrictive practices must be logged in the Empowered Care Restrictive Practices Register, which the relevant Case Manager reports to the NDIS every 28 days.

### **In relation to Prohibited Practices**

Prohibited practices as defined by the NDIS must never be used at an Empowered Care service or by any staff member, consultant or volunteer.

The following physical restraints are prohibited:

- the use of prone or supine restraint
- pin downs
- basket holds
- takedown techniques
- any physical restraint that has the purpose or effect of restraining or inhibiting a person's respiratory or digestive functioning
- any physical restraint that has the effect of pushing the person's head forward onto their chest
- any physical restraint that has the purpose or effect of compelling a person's compliance through the infliction of pain, hyperextension of joints, or by applying pressure to the chest or joints.
- The following punitive approaches are prohibited:
- aversive practices (use of unpleasant physical or sensory stimuli to modify behaviour or to punish)
- overcorrection (requiring a person to perform restitutive actions either repeatedly or to a significantly higher standard than before a behaviour occurred)
- denial of key needs
- practices related to degradation or vilification
- practices that limit or deny access to culture
- response cost punishment strategies (withdrawal of a preferred item or experience in an attempt to modify behaviour or to punish).

# Privacy and Confidentiality Policy and Procedures

## Policy Statement

At Empower Care Community Services we aim to create a safe, nurturing and empowering environment for clients where individual needs are met to enable everyone to maintain optimum levels of physical, social and emotional wellbeing. We strive to protect the rights and dignity of individuals in our care at all times. This policy outlines the acceptable interventions to be used at Empowered Care to respond to challenging, inappropriate or harmful behaviour by clients and to outline Empowered Care's behaviour support strategy. Personal information refers to any material whether photograph, video, spoken, written or otherwise that would show apparent identification of a person or personal details.

## Scope

This policy applies to residents, staff, management, medical professionals and visitors of Empowered Care.

## Background

The establishment of trust between clients and staff is an essential part of the ethos of our service. Everyone needs to know the boundaries of confidentiality to feel safe and comfortable discussing personal issues and concerns.

Our attitude to confidentiality and privacy is open and easily understood and everyone should be able to trust the boundaries of confidentiality operating within the service. This policy provides guidance on our legal obligations and ethical expectations in relation to privacy and confidentiality.

We hold two types of information covered by this policy, personal and organisational information.

## Legislative Requirements

- Information Privacy Act 2014
- Privacy Act 1988
- National Framework for Alcohol, Tobacco and Other Drug treatment 2019-2029
- National Quality Framework for Drug and Alcohol Treatment Services
- Severe Substance Dependence Treatment Act 2010
- Drugs, Poisons and Controlled Substances Act 1981
- Mental Health Act 2014
- Children, Youth and Families Act 2005.

## Principles that Inform Our Policy

- All decision making about our privacy and confidentiality procedure is carried out in accordance with the principles of our Privacy and Confidentiality Policy.
- We are committed to ensuring that information is used in an ethical and responsible manner.
- We recognise the need to be consistent, cautious and thorough in the way that information about clients, stakeholders, staff, Board members, students and volunteers are recorded, stored and managed.

- All individuals, including clients, stakeholders, staff, Board members, students and volunteers, have legislated rights to privacy of personal information.
- In circumstances where the right to privacy may be overridden by other considerations (for example, child protection concerns), staff act in accordance with the relevant policy and/or legal framework.
- All staff, Board members, students and volunteers are to have an appropriate level of understanding about how to meet the organisation’s legal and ethical obligations to ensure privacy and confidentiality.

### Key Terms

Term	Meaning	Source
Confidentiality	The non-disclosure of information, particularly related to the patient, except to another authorised person. It is seen as the patient’s right and is enshrined in Article 8 of the European Convention on Human Rights.	The legal dictionary
Consent	Voluntary agreement to some act, practice or purpose. Consent has two elements: knowledge of the matter agreed to and voluntary agreement.	Australian Law Reform Commission
Individual	A natural person; any person such as a service user, staff member, board member, volunteer, student, contractor or a member of the public.	Law Insider Dictionary
Personal information	Personal information means information or an opinion (including information or an opinion forming part of a database) about an individual (Office of the Federal Privacy Commissioner, 2001). It may include information such as names, addresses, bank account details and health conditions. The use of personal information is guided by the Privacy Act 1988 (Cth).	Privacy Act 1988
Privacy provisions	Privacy provisions of the Privacy Act 1988 (Cth) govern the collection, protection and disclosure of personal information provided to us by service users, board members, staff, volunteers, students and stakeholders.	Privacy Act 1988

### Links to other Policies and Documents

- Child Safeguarding Policy
- Code of Conduct
- Complaints Policy and Procedures
- Record Keeping Policy and Procedures
- Staff Management and Professional Development Policy and Procedures
- Service User Rights Policy

## **Induction and Ongoing Training**

Empowered Care requires that induction and ongoing training of all staff include the Privacy and Confidentiality Policy to enable staff to fulfil their roles effectively. In addition, Empowered Care promotes information sharing at staff meetings, sharing of information received from industry trends or changes in legislation, and consultation at policy review sessions.

## **Monitoring, Evaluation and Review**

This policy will be reviewed annually or on the occurrence of any relevant legislative Management of Empowered Care will conduct reviews in consultation with educators at staff meetings.

## **Privacy and Confidentiality Procedure**

The privacy of personal information is defined by legislation, the Privacy Act 1988 (Cth). At all times, we act according to these legal requirements underpinned by the procedures outlined below.

We also strive to respect the confidentiality of other sensitive information. However, in the spirit of partnership, we share information with service users and other involved individuals and organisations (subject to consent) where it would be in the best interest of the service user or other individuals to do so.

### Collection of Information

Personal information collected by us is only for purposes that are directly related to the functions or activities of the organisation. These purposes include:

- enquiry about programs
- referral to programs
- providing treatment and support to service users
- administrative activities, including human resources management
- sector development activities.
- community development activities
- fundraising
- complaint handling.

For more detailed information about these purposes and the information handling practices that apply, refer to the File Management Policy, Human Resources Management Policy and Complaints Policy and Procedure.

We provide information to service users on collecting health and personal information, including:

- purpose of collecting information
- how the information will be used
- who information may be transferred (if anyone), and under what circumstances will information be transferred
- limits to the privacy of personal information

- how a service user can access or amend their health information
- how a service user can make a complaint about the use of their personal information.

See also the Consumer Needs Policy and Procedures and Consent to Collect and Share Information Form.

### **Use and Disclosure**

We only use personal information for the purposes for which it was given or for purposes that are directly related to one of the functions or activities of the organisation.

It may be provided to government agencies, other organisations, or individuals if:

- the individual has consented
  - it is required or authorised by law
  - it will prevent or lessen a serious and imminent threat to somebody's life or health.
- Further information regarding the use and disclosure of service user information can be found in the File Management Policy, Child Protection Policy and Suicide and Self-Harm Policy.

### **Data Quality**

We take steps to ensure that the personal information collected is accurate, up-to-date and complete. These steps include maintaining and updating personal information when individuals advise us that it has changed (and at other times as necessary) and checking that information provided about an individual by another person is correct.

All patient notes must be kept in chronological order, with the most recent notes at the front of the file. These notes must be concise, clear and legible.

### **Data Security**

We take steps to protect the personal information held against loss, unauthorised access, use, modification or disclosure and against other misuses.

These steps include reasonable physical, technical and administrative security safeguards for the electronic and hard copies of paper records, as identified below.

Reasonable physical safeguards include:

- locking filing cabinets and unattended storage areas
- physically securing the areas in which the personal information is stored
- not storing personal information in public areas
- positioning computer terminals and fax machines so that they cannot be seen or accessed by unauthorised people or members of the public.
- Reasonable technical safeguards include:
  - using passwords to restrict computer access and requiring regular changes to passwords
  - establishing different access levels so that not all staff can view all information
  - ensuring information is transferred securely (for example, not transmitting health information via non-secure email)
- using electronic audit trails
- installing virus protection and firewalls.



Reasonable administrative safeguards include the existence of policies and procedures for guidance and training to ensure staff, board members, students, and volunteers are competent in this area.

### **Access and Correction**

Individuals may request access to personal information held about them. Access will be provided unless there is a sound reason under the Privacy Act 1988 or other relevant law. Other situations in which access to information may be withheld include the following:

- There is a threat to the life or health of an individual.
- Access to information creates an unreasonable impact on the privacy of others.
- The request is clearly frivolous or vexatious or access to the information has been granted previously.
- There is an existing or anticipated legal dispute resolution proceedings.
- Denial of access is required by legislation or law enforcement agencies.

We are required to respond to a request to access or amend the information within 45 days of receiving the request.

Amendments may be made to personal information to ensure it is accurate, relevant, up-to-date, complete and not misleading, taking into account the purpose for which the information is collected and used. If the request to amend information does not meet these criteria, We may refuse the request.

If the requested changes to personal information are not made, the individual may make a statement about the requested changes, which will be attached to the record.

More information can be found in the File Access Procedure.

The manager is responsible for responding to queries and requests for access and/or amendment to personal information.

### **Anonymity and Identifiers**

Wherever it is lawful and practicable, individuals will have the option of not identifying themselves or requesting that we do not store any of their personal information.

As required by the Privacy Act 1988, we will not adopt a government-assigned individual identifier number, e.g., Medicare number, as if it were its own identifier/client code.

### **Collection Use, and Disclosure of Confidential Information**

Other information we hold may be confidential, pertaining either to an individual or an organisation. The most important factor to consider when determining whether the information is confidential is whether the general public can access the information.

Staff members are to refer to the Community Centre Manager before transferring or providing information to an external source if they are unsure if the information is sensitive or confidential to us, its service users, staff and stakeholders.

Personal information is only collected with the person's informed consent. Personal information will only be disclosed to a third party with the clients' consent, except where the personal information is required or authorised by or under law.

Personal information is only collected for which Empower Care Community Services requires for its primary function. All personal information is protected from loss, modification and misuse. All client personal information held by Empower Care Community Services is accessible to them and they have the rights to seek any correction.

Clients are asked to provide the name of a next to kin or designated guardian who they wish to have access to their personal information. All personal information collected is stored in locked filing cabinets.

All personal information stored on computer files is password protected. When a client's file is transferred from Empower Care Community Services office to the client's home, all personal information is kept secure in a locked briefcase. These are supplied by Home Care Support.

For clients who receive ongoing community care, their personal file is kept in their homes, and it is the responsibility of the client. For clients receiving 24-hour support, their personal information is kept in their homes in a locked cabinet.

All staff of Empower Care Community Services have a responsibility to protect clients' rights to privacy and confidentiality. Staff are not to disclose or discuss any information about a client without the necessary authority except where it relates to their daily care of that individual during the course of their work.

#### 1. Collection, use, and disclosure of confidential information

All staff, board members, students and volunteers agree to adhere to the Code of Conduct when commencing employment, involvement or a placement.

The Code of Conduct outlines the responsibilities of the organisation related to the use of information obtained through their employment/involvement/placement.

#### **The Code of Conduct states that individuals will:**

- Use information obtained through their involvement, employment or placement only to carry out their duties and not for financial or other benefit or to take advantage of another person or organisation.

#### 2. Staff information

The Human Resources Management Policy details how the organisation handles staff records to manage privacy and confidentiality responsibilities, including storing and accessing staff personnel files and the storage of unsuccessful position applicants' information.

#### 3. Stakeholder information

We work with a variety of stakeholders, including private consultants. The organisation may collect confidential or sensitive information about its stakeholders as part of a working relationship.

Staff will not disclose information about its stakeholders that is not already in the public domain without stakeholder consent.

The manner in which staff members manage stakeholder information will be clearly articulated in any contractual agreements that the organisation enters into with a third party.

#### 4. Service user information

Detailed information regarding the collection, use and disclosure of service user information can be found in the File Management Policy and associated procedures.

#### 5. Breach of privacy or confidentiality

If staff are dissatisfied with the conduct of a colleague with regard to privacy and confidentiality of information, the matter should be raised with the staff member's direct supervisor. If this is not possible or appropriate, follow the delegations indicated in the Complaints Policy and Procedures. Staff members who are deemed to have breached privacy and confidentiality standards set out in this policy may be subject to disciplinary action.

If a service user or stakeholder is dissatisfied with the conduct of a staff member, a complaint should be raised as per the Complaints Policy and Procedures. Information on making a complaint will be made available to service users and stakeholders. Additionally, any staff member can take a complaint over the phone.

# Referrals Policy and Procedure

## Policy Statement

The Referrals Policy's purpose is to document the steps staff are expected to follow when referrals to health care specialists, practitioners or other agencies are needed. This ensures the process is consistent and that the needs of clients are being met in a timely manner. Having a clear policy in place helps to ensure clients receive the appropriate care and/or clinical support from specialists. Where Empowered Care cannot directly support clients, any issues are identified and addressed early on.

This documentation ensures that clients receive appropriate care and support from specialists while proactively addressing potential issues. Additionally, a documented referral policy helps the organisation meet regulatory standards and provide the best possible support and care for clients.

## Scope

This policy applies to clients, staff, management, medical professionals and visitors of Empowered Care.

## Background

Empowered Care embeds a person-centered care approach to service delivery. This requires prioritising the client's aspirations and strengths within the context of their capacity. In supporting clients, Empowered Care staff place the needs of people who seek our care first. Critical to this approach is careful observation to identify changes in behaviour that may indicate that a client requires additional support.

Ensuring that clients receive a referral to specialist services to support them is vital to Empowered Care's person-centred care approach.

## Legislative Requirements

- Information Privacy Act 2014
- Privacy Act 1988
- National Framework for Alcohol, Tobacco and Other Drug treatment 2019-2029
- National Quality Framework for Drug and Alcohol Treatment Services
- Severe Substance Dependence Treatment Act 2010
- Drugs, Poisons and Controlled Substances Act 1981
- Mental Health Act 2014
- Children, Youth and Families Act 2005.

## Principles that Inform Our Policy

All decision-making about our referral procedure is carried out in accordance with the principles of our referral policy.

- We are committed to ensuring that information is used in an ethical and responsible manner.
- We recognise the need to be consistent, cautious and thorough in ensuring that information about clients, stakeholders, staff, board members, students and volunteers is recorded, stored and managed.
- All individuals, including clients, stakeholders, staff, board members, students and volunteers, have legislated rights to privacy of personal information.
- In circumstances where the right to privacy may be overridden by other considerations (for example, child protection concerns), staff act in accordance with the relevant policy and/or legal framework.
- All staff, board members, students and volunteers are to have an appropriate level of understanding about how to meet the organisation's legal and ethical obligations to ensure privacy and confidentiality.

### **Concerning Client Needs**

- Empowered Care has a culture of inclusion and respect for clients as people. As a result, people need to be informed of and agree to undertake referral for specialist services.
- Empowered Care supports clients to exercise choice and independence and actively partners with the client to inform ongoing care assessment and planning. Empowered Care acknowledges a Dignity of Risk that allows people to utilise our services to make informed decisions about recommended referrals.
- Empowered Care will carry out an ongoing assessment and planning with the client, their official representatives, and others who the client wants to be involved in their care and services assessment and planning. Referrals are made to improve the health and lives of the people in our care.
- Consistent and ongoing sharing of information, asking for feedback from the client, and supporting and encouraging clients to take part in assessing and planning their own care and services are paramount and aligned with a person-centred practice approach. Referrals are recommended by authorised staff based on the principle of improving health outcomes. Referrals can be supported by documented observations, incidents and a person's own requests that are recorded in Empowered Care's client management system. Empowered Care relies on a list of approved specialist service providers who are provided access to relevant recorded information to support the needs of clients in our care.
- A person-centred approach recognises that making decisions about their own life, and having those decisions respected, is an essential right of each client. It improves their health and wellbeing and demonstrates the organisation's values to the client.
- The client may choose to have a relative, partner, or friend as a representative involved in decisions about their care. Where a client cannot make decisions, they may have a court or tribunal-appointed guardian to make decisions on their behalf. Privacy of information practices at Empowered Care ensures that only the client or their legally appointed representatives are informed of interactions related to referrals.
- Assessment and planning are also expected to include other organisations, individuals or service providers involved in caring for clients. Empowered Care will ensure an effective

- communication framework is in place with other service providers and relevant other parties such as unpaid carers, family, and friends. Collaborative assessment and planning (if the client wishes) can help Empowered Care improve its knowledge and sensitivity related to the client’s needs, goals and preferences and improve the continuity of care and services for the client.
- Regarding the outcome of referrals, specialists engaged are required to ensure the following:
  - Make sure clients understand referral outcomes.
  - Report to Empowered Care any proposed actions beyond the referral before implementing the action. Empowered Care will ensure the client and any recognised representatives are consulted regarding a decision on proceeding with the additional action.
- Empowered Care respects client privacy and will comply with obligations relating to the privacy of information when coordinating care and information exchange with other organisations, individuals, or service providers.

### Key Terms

Term	Meaning	Source
Practitioner	A person actively engaged in an art, discipline, or profession, especially medicine.	Oxford Dictionary
Clinical	Pertaining to a clinic. Concerned with or based on actual observation and treatment of disease in patients rather than experimentation or theory.	ww.dictionary.com
Referral	The act of directing someone to a different place or person for information, help, or action, often to a person or group with more knowledge or power	Cambridge Dictionary
Personal information	Personal information means information or an opinion (including information or an opinion forming part of a database) about an individual (Office of the Federal Privacy Commissioner, 2001). It may include information such as names, addresses, bank account details and health conditions. The use of personal information is guided by the Privacy Act 1988 (Cth).	Privacy Act 1988

### Links to other Policies and Documents

- Child Safeguarding Policy and Procedures
- Code of Conduct
- Accessing an Interpreter or Translator Policy and Procedures
- Housing and Homelessness Policy and Procedures
- Career Planning Policy and Procedures
- Network and Partnering Policy and Procedures
- Intervention and Behaviour Support Policy and Procedures
- Domestic and Family Violence Policy and Procedures
- Dependence and Addiction Policy and Procedures
- Planning Policy and Procedures
- Health and Nutrition Policy and Procedures
- Mandatory Reporting Policy and Procedures

### **Induction and Ongoing Training**

Empowered Care requires that induction and ongoing training of all staff include the Referrals Policy to enable staff to fulfil their roles effectively. In addition, Empowered Care promotes information sharing at staff meetings, sharing of information received from industry trends or changes in legislation, and consultation at policy review sessions.

### **Monitoring, Evaluation and Review**

This policy will be reviewed annually or on the occurrence of any relevant legislative change. Management of Empowered Care will conduct reviews in consultation with educators at staff meetings.

### **Referrals Procedure**

Who can request a referral?

Empowered Care will always have Case Managers working in their facilities in shifts. Any support staff who observe a need to refer a person to a specialist or external organisation for support must ensure the following.

Here are a few indicators:

- Note the observation or request from the client in Empowered Care's client management system, known as Access1, in the client's care plan.
- They are then to raise the referral with the Case Manager directly in person.
- The Case Manager then evaluates the client. If a referral is needed, Empowered Care staff who initiated the referral will make an appointment with:
  - the client's preferred specialist or with Empowered Care's approved specialists
  - the external partnering agency best suited to the needs of the client.

Referrals respond to clients' needs. In cases where the person is suffering from pain, discomfort, or at risk, assessments are to be conducted as a priority and asap with the client's or their representative's agreement.

**Essential:**

- Ensure that before a request for a referral is made, the client or their representative (in cases where the person has another person legally acting on their behalf) is consulted to ensure their opinion and preferences are considered and remain paramount.
- In emergency situations, immediate steps are to be taken to support the client. Note: respect and court orders.

**Procedure:**

(Non-emergency/not involving pain/discomfort)

- Support staff log a need for a referral in the care plan for the person in Empowered Care's Client Management System (Access1), but a copy is not needed to be placed in the client's actual file.
- Always include the client's full name and date of birth, plus a detailed summary of the reason for referral.
- When completing the referral request, ensure you don't use emotive language or convey your own feelings regarding the situation. Referrals must be based on facts and direct observation only.
- A Case Manager will determine if a referral is required. The Case Manager may consult with doctors and other specialists or agencies, including NDIS, when making any decision. Support staff, along with the Case Manager, ensure the client being cared for is involved in the requirement for referrals.
- On the approval of the Case Manager, Empowered Care staff are to arrange for an appointment. In some cases, people will have their own preferences for specialists (such as a doctor), which will be recorded in their care plan. Appointments are recorded in Access1 and in the start of shift diary that support staff refer to.
- Specialists will require information about the referral and the service required. Specialists may visit on-site and use our facilities to provide services.
- Empowered Care staff will ensure that the client is prepared to meet appointments. At the start of a shift and at handover, staff will ensure the following:
  - Read any planned appointments in the start of shift diary.
  - Be advised of appointments by the shift handing over.
  - Clients may require or need support during referrals. Empowered Care staff are to ensure people are assisted as needed.

**Documentation including reports, case notes and other relevant records**

Regardless of the type of written documentation, to ensure that they are of the highest quality to meet legal and organisational standards it is important to comply with the following:

- Be certain the client's name is written on each page of the document.
- Date all entries
- Always use blue or black ink.
- Avoid the use of white out in handwritten documents. Draw a line through an error, date and sign.
- Your writing should be neat and legible.



- Be objective and use understandable language (only use abbreviations approved by the Empower Care Community Services).
- Don't leave spaces between entries, draw a line through unused spaces on the paper.
- Be concise, accurate and factual.
- Present the information in a logical order.
- When recording a client's statement use quotation marks.
- Sign your name then print your name and status (i.e. Care Worker) on any written information.
- Do not complete documentation on behalf of another staff member.
- Any significant change in the client's physical, emotional, behavioural and environmental condition must be conveyed to the supervisor immediately.

## Key Laws/Legislations

Empower Care Community Services is subject to a variety of legislation related to community care services as well as general business practices. Empower Care Community Services is committed to compliance with all relevant Federal and State/Territory legislation, standards and codes.

This legislation includes:

### Anti-discrimination legislation

- Australian Human Rights Commission Act 1986
- Age Discrimination Act 2004 (Cth)
- Disability Discrimination Act 1992
- Racial Discrimination Act 1975
- Sex Discrimination Act 1984

### Relevant State/Territory Anti-discrimination legislation:

State or Territory	Appropriate Legislation
Australian Capital Territory	Australian Capital Territory Discrimination Act 1991 (ACT)
New South Wales	New South Wales Anti-Discrimination Act 1977 (NSW)
Northern Territory	Northern Territory Anti-Discrimination Act 1996 (NT)
Queensland	Queensland Anti-Discrimination Act 1991 (QLD)
South Australia	South Australia Equal Opportunity Act 1984 (SA)
Tasmania	Tasmania Anti-Discrimination Act 1998 (TAS)
Victoria	Victoria Equal Opportunity Act 1995 (VIC)
Western Australia	Western Australia Equal Opportunity Act 1984 (WA)

Empower Care Community Services is committed to fair and equitable treatment of all persons and does not discriminate on the basis of:

- Gender
- Age
- Race
- Religion
- Marital Status
- Disability
- Colour
- Nationality
- Ethnicity
- National Origin

Further information regarding this legislation can be found at the National Anti-Discrimination Information Gateway – <http://www.antidiscrimination.gov.au>.

## Privacy legislation

- Privacy Act 1988
- Privacy Regulations 2006

Relevant State/Territory Privacy legislation:

<b>State or Territory</b>	<b>Appropriate Legislation</b>
Australian Capital Territory	Health Records (Privacy and Access) Act 1997
New South Wales	Privacy and Personal Information Protection Act 1998 Health Records and Information Privacy Act 2002
Northern Territory	Information Act 2002
Queensland	Information Privacy Act 2009
South Australia	No State legislation applicable
Tasmania	Personal Information Protection Act 2004
Victoria	Information Privacy Act 2000 Health Records Act 2000
Western Australia	No State legislation applicable

Empower Care Community Services Community Care respects the privacy concerns of all persons and is committed to the standards laid down in the 10 National Privacy Principles (NPPs).

## Workplace Health and Safety legislation

- Work Health and Safety Act 2011
- Work Health and Safety Regulations 2011

Relevant State/Territory WHS legislation:

<b>State or Territory</b>	<b>Appropriate Legislation</b>
Australian Capital Territory	Work Health and Safety Act 2011 Work Health and Safety Regulations 2011
New South Wales	Work Health and Safety Act 2011 Work Health and Safety Regulations 2011
Northern Territory	Work Health and Safety Act 2011 Work Health and Safety Regulations 2011
Queensland	Work Health and Safety Act 2011 Work Health and Safety Regulations 2011

South Australia	Work Health and Safety Act 2011 Work Health and Safety Regulations 2011
Tasmania	Work Health and Safety Act 2011 Work Health and Safety Regulations 2011
Victoria	Occupational Health and Safety Act 2004 Occupational Health and Safety Regulations 2007
Western Australia	Occupational Safety and Health Act 1984 Occupational Safety and Health Regulations 1996

Empower Care Community Services is committed to ensuring a safe environment for clients, family members, staff and visitors. Workplace Health and Safety (WHS) practices will be managed consistently and within WHS legislative requirements.

Further information regarding this legislation can be found at the Safe Work Australia website – <http://www.safeworkaustralia.gov.au>

#### **Environmental legislation**

- Environment Protection and Biodiversity Conservation (EPBC) Act 1999
- Environment Protection and Biodiversity Conservation (EPBC) Regulations 2000
- Ozone Protection and Synthetic Greenhouse Gas Management Act 1989
- Ozone Protection and Synthetic Greenhouse Gas Management Regulation 1995
- Ozone Protection and Synthetic Greenhouse Gas Management Amendment Regulation 2012 (No 1)

Relevant State/Territory environmental legislation:

<b>State or Territory</b>	<b>Appropriate Legislation</b>
Australian Capital Territory	Environmental Protection Act 1997
New South Wales	Protection of the Environment Operations Act 1997
Northern Territory	Environmental Assessment Act 1982
Queensland	Environmental Protection Act 1994
South Australia	Environment Protection Act 1993
Tasmania	Environmental Management and Pollution Control Act 1994
Victoria	Environment Protection Act 1970
Western Australia	Environment Protection Act 1986

Empower Care Community Services is committed to contributing toward an environmentally sustainable future. All work is conducted in an environmentally sustainable manner consistent with environmental legislative requirements.

Further information regarding this legislation can be found at the Department of Sustainability, Environment, Water, Population and Communities website – <http://www.environment.gov.au>

### **Other legislation**

- Aged Care Act 1997
- National Mental Health Laws

### **National Mental Health Laws and Regulations**

#### **1. Mental Health Acts:**

- Each state and territory in Australia has its own Mental Health Act that outlines the legal framework for the care and treatment of individuals with mental health issues.
- These acts typically address issues such as involuntary treatment, compulsory assessment, and the rights of individuals with mental illness.

#### **2. Involuntary Treatment:**

- Mental health laws outline the circumstances under which a person can be involuntarily admitted to a mental health facility for assessment or treatment.
- The criteria for involuntary treatment and the rights of the individuals involved are usually specified in these laws.

#### **3. Rights and Advocacy:**

- Mental health legislation in Australia often includes provisions for protecting the rights of individuals receiving mental health care.
- Advocacy services may be available to support individuals in understanding and asserting their rights within the mental health system.

#### **4. Community Treatment Orders (CTOs):**

- Some jurisdictions have provisions for Community Treatment Orders, allowing individuals to receive treatment while living in the community, subject to certain conditions.

#### **5. Advance Directives:**

- Some states and territories allow individuals to create advance directives or mental health advance directives, outlining their preferences for treatment in the event they are unable to make decisions about their care.

#### **6. Privacy and Confidentiality:**

- Privacy laws govern the collection, use, and disclosure of personal information, including mental health information.
- Mental health professionals must adhere to strict confidentiality requirements, with some exceptions related to safety concerns.

**7. Capacity and Consent:**

- Laws address issues of capacity to consent to treatment and the circumstances under which treatment can be provided in the absence of consent.

**8. Criminal Responsibility:**

- Mental health laws also intersect with criminal law, particularly concerning the treatment of individuals with mental illness who come into contact with the criminal justice system.

**9. Guardianship and Administration:**

- In cases where individuals lack the capacity to make decisions about their care, guardianship and administration laws may come into play, allowing for the appointment of guardians to make decisions on their behalf.

**10. Complaints and Review Processes:**

- Mental health legislation typically includes mechanisms for individuals to lodge complaints or seek reviews of decisions related to their care and treatment.

# Style Guide

## **Purpose**

The purpose of this document is to help individuals and departments prepare company documentation consistent with the Empower Care Community Services style. The Style Guide explains the style to be applied to company documentation (i.e. not including specialised publishing requirements) together with information on typography and advice for writing and producing documents. It is recognised that there will be documentation that is outside these guidelines, but the general format should be followed wherever possible.

## **The Development of the Style**

This Style Guide has been developed to encompass the character of Empower Care Community Services and reflects the new progressive approach to the expansion of the organisation whilst still maintaining the sense of tradition and history.

## **Style Guide Elements: Documents**

Documents can be in the form of a letter, fax, memo, report, invoice, quote, order and landscape style document. All documents should use black and white to colour headings, tables, etc. Colour should only be used to highlight key outcomes in financial reports.

## **Writing Style**

The composition should be concise, friendly, and professional in keeping with the mission statement of Empower Care Community Services. Documents should be visually appealing and use unambiguous language.

## **Standard Operating Environment**

Empower Care Community Services Publishing's standard operating environment (SOE) is Microsoft Windows. Documentation should be produced using Microsoft Word or Microsoft Excel. This will ensure portability of files and consistency of operation.

## **Filenames**

Empower Care Community Services Services Attire Publishing has adopted the following convention for file names:

Directory path: \department name\client name

## **Text**

All documents will use Arial Typeface.

## **Headers**

Headers are used for all documents of more than one page. They contain the Empower Care Community Services Attire logo, the title of the document and the title of the current section (if applicable).

## **Footers**

Footers are used for all documents and must contain the automatic filename and path feature.

## Email

- Use a clear subject line: The subject line should accurately reflect the content of the email and provide a brief summary of the purpose of the email. This helps recipients quickly understand the context of the email and prioritise their responses.
- Start with a polite and professional greeting: Use a proper salutation such as "Hello," "Hi," or "Dear [Recipient's Name]", depending on the formality of the email and your relationship with the recipient.
- Be concise and to the point: Keep your emails brief and focused. Avoid lengthy paragraphs or unnecessary details. Use bullet points or numbered lists to organise information when appropriate.
- Use a professional tone: Maintain a polite, respectful, and professional tone throughout your email. Avoid using jargon or technical language that may not be easily understood by the recipient. Use a friendly tone, but avoid overly casual language or slang.
- Use proper grammar and spelling: Proofread your emails for grammar and spelling errors before sending them. Use a spell-check tool if needed. Sloppy writing can give a negative impression and undermine your professionalism.
- Provide context: Clearly state the purpose of your email and provide any necessary background or context to help the recipient understand the issue or request. Include relevant details such as names, dates, and account numbers, if applicable.
- Use a professional email signature: Include your name, title, and contact information in your email signature. This adds a professional touch to your emails and makes it easy for recipients to reach you if needed.

## REFERENCES AND ACKNOWLEDGEMENTS

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