



ROGHANI, MARYAM

NDIS POLICIES AND PROCEDURES MANUAL

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DIVISION 1 - RIGHTS AND RESPONSIBILITIES

DECISION MAKING AND CHOICE POLICY AND PROCEDURE

The intent of this policy and procedure is to describe Aurora Early Intervention and Behavioural Services method of empowering and facilitating participants to make informed choices regarding their state of risk. Which covers all Aurora Early Intervention and Behavioural Services employees and visitors and applies to all future and existing Aurora Early Intervention and Behavioural Services participants, members of their families, carers, and other stakeholders of the organisation.

The policies and procedures comply with appropriate laws, regulations, legislation, and standards.

Definitions

1. **Advocate** – a person who assists a participant to express their needs, or who speaks on behalf of a participant. Advocates can be a family member, friend, or an Independent Advocate. They are not substitute decision makers but are there to ensure the participant’s needs and wants are listened to.
2. **Independent advocate**, in relation to a person with disability, means a person who is independent of the NDIA, the NDIS Commission and any NDIS providers providing supports or services to the person; provides independent advocacy to assist them to exercise choice and control and have their voice heard in matters that affect them.
3. **Child’s representative** – a person responsible for undertaking acts and making decisions in relation to the NDIS Act 2013 on behalf of a child. A child’s representative is usually a person with parental responsibility. However, in some cases it may be a legal guardian, a state or territory government agency, or a person appointed by the NDIA.
4. **Court-appointed decision-maker** – a person who, under a law of the Commonwealth, or a State or Territory, has guardianship of a participant or who is appointed by a court, tribunal, board or panel to make decisions for the participant.
5. **Decision making capacity** - a person’s ability to make decisions about things that affect their daily life. This usually means that they are able to: understand the situation and the decision required; understand what the choices are; weigh up the consequences of the choices; understand how the consequences affect them; and communicate their decision.
6. **Dignity of risk** - the right of an individual to choose to take some risk in engaging in life experiences.
7. **Nominee** – a person who is appointed in writing, at the request of a participant or their guardian, or on the initiative of the NDIA, to act on behalf of, or make decisions on behalf of a participant. Under the NDIS, there are 2 types of nominee, a plan nominee and correspondence nominee. One person can be appointed as both and either type can be appointed either indefinitely or for a specified term.
8. **Participant-appointed decision-maker** – a person who is able to make a decision on the participant’s behalf under a formal arrangement between that person and the participant (e.g., a power of attorney, an advance health directive or an enduring guardian under State or Territory law).

POLICY

Participants have the rights to make their own decisions.



Participants have the right to maintain their personal attributes, preferences and the right to dignity.

Aurora Early Intervention and Behavioural Services will provide opportunities for service users to make informed decisions and choices on a day-to-day basis according to their individual needs.

Participants make informed decisions and choices with regard to themselves and the services they receive or;

If participant is unable to make decisions because of disability or impairment, an authorised representative identified, or administrator can be legally appointed to make decisions on their behalf.

PROCEDURES

Aurora Early Intervention and Behavioural Services will provide participant or their representatives with access to information to enables them to participate in the decisions making process affecting participant's needs. Information provided to a participant is in clear and concise language and if necessary, interpreting and translation services can be used.

Aurora Early Intervention and Behavioural Services will provide information in its participants' information package about independent bodies and agencies that can assist participant.

Aurora Early Intervention and Behavioural Services will respect and act upon the outcomes of a participant and/or their representative's input into decision-making on participant's needs.

Aurora Early Intervention and Behavioural Services will respond to the changing needs, goals, aspirations and choices of participants and will facilitate and support their informed decision-making and choice.

If a participant has the capacity for decision making, risks and possible consequences must be communicated to participant and all relevant stakeholders.

The safety of the participant is important at all times to Aurora Early Intervention and Behavioural Services.

If a decision doesn't place anyone at risk of harm, staff are to comply with the participant's decision.

Informal substitute decision-making

Informal decision-making is where a person making a decision on behalf of another person has not been legally appointed. People who can make informal decisions include the person's family, friends, carer or nominated support.

Most decisions can be made informally, including decisions about who a person wishes to see, their work, leisure, recreation, holidays or accessing services.

Staff must ensure that all informal decision-making arrangements are clearly recorded on the participant's file and communicated to other relevant staff. Decisions can then be pursued through the agreed informal arrangements.

Formal substitute decision-making

Formal decision-making arrangements must be implemented when informal decision-making is insufficient, such as when there is conflict over decisions being made about the person; where specific legislative requirements exist (e.g., consent to medical treatment); or where the person has a guardian or appointed nominee or decision maker.



Formal arrangements should take a rights-based approach and consider the participant's individual wishes as much as possible regardless of their impaired decision-making capacity.

Staff must record and maintain information about formal decision-making arrangements on participant files. Any amendments to a person's decision-making arrangements must be clearly recorded and communicated to relevant staff as soon as practicable.

Staff must refer any issues relating to formal decision making to the Case Manager or Operations Manager.

Staff will undergo training and continuous professional development on responding to the needs of participants, maintaining and promoting participant's independence and decision making.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

PARTICIPANTS RIGHTS AND RESPONSIBILITIES POLICY AND PROCEDURE

The purpose of this policy and procedure is to demonstrate Aurora Early Intervention and Behavioural Services's commitment to participants' rights and set out how these rights will be communicated Aurora Early Intervention and Behavioural Services.

POLICY

Aurora Early Intervention and Behavioural Services commits to upholding the human rights of all participants.

Aurora Early Intervention and Behavioural Services requires that people with disability have the same human rights as other members of the community.

Aurora Early Intervention and Behavioural Services will comply with all relevant legislations and standards.

Aurora Early Intervention and Behavioural Services ensures its participants are made aware of their rights and responsibilities during the service entry process at each plan review.

The Aged Care Participant Charter and NDIS Participant Charter sets out participant responsibilities, which contribute to ensuring the rights of all participants and staff are upheld.



PROCEDURES

Participants have a right to:

- recognition as a person and equality and to protection against discrimination.
- right to life.
- protection from torture and cruel, inhuman and degrading treatment.
- freedom from slavery or forced work.
- freedom of movement.
- right to not have one's privacy, family, home or correspondence arbitrarily or unlawfully interfered with, and one's reputation unlawfully attacked.
- freedom of thought, conscience, religion and belief.
- freedom of expression.
- peaceful assembly and freedom of association.
- right to take part in public life.
- practice and enjoy culture, religion and language.
- to not be deprived of property other than in accordance with law.
- liberty and security of person.
- humane treatment when deprived of liberty.
- detained child to be segregated from detained adults.
- fair hearing
- presumption of innocence when charged with a criminal offence.
- not to be tried or punished more than once for an offence already been finally convicted or acquitted in accordance with the law; and
- with respect to the operation of certain retrospective criminal laws.

Aurora Early Intervention and Behavioural Services will provide all prospective and existing participants with information about their rights.

Aurora Early Intervention and Behavioural Services will take into account the specific requirements of individuals when ensuring participants fully understand their rights through providing information in a format that suits their individual communication needs (e.g., in clear and concise English).

Staff will undergo training in participants' rights and responsibilities during inductions.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this



clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.



ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE POLICY AND PROCEDURES

PURPOSE

- Aurora Early Intervention and Behavioural Services wishes to recognise the Traditional Owners of the Land and the Aboriginal Communities served by our service.
- Aurora Early Intervention and Behavioural Services will provide services and supports that meet the needs of Aboriginal and Torres Strait Islander people.
- To work cohesively with local Aboriginal and/or Torres Strait Islander people.
- Aurora Early Intervention and Behavioural Services to ensure staff is trained in culturally appropriate actions and requirements.

SCOPE

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

POLICY

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

PROCEDURE

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

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

- Designing and using images that reflect indigenous symbols or pictures into brochures, on the website or located in the environment.
- Displaying a Statement of Traditional Owners.
- Clarifying if participants identify as an Aboriginal and Torres Strait Islander.
- Contacting and maintaining networks with local Aboriginal and Torres Strait Islander communities.
- Working with community networks for the benefit and support of the participant.
- Contacting the participant's family, extended family and community.
- Establishing communication processes for maintaining an individual's indigenous supports.
- Working with other services in a coordinated manner to enhance supports for the participant.



Planning will include actions that promote cultural safety and connectedness and respect the cultural and spiritual identity of Aboriginal and Torres Strait Islanders.

Encouraging and researching community events for the participants, then sharing this information with Staff.

Working with the local communities in the provision of services, referrals, consortia involvement and memorandums of understanding.

Advocacy information

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

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

Staff and Volunteer Training

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

VIOLENCE, ABUSE, NEGLECT, EXPLOITATION AND DISCRIMINATION

Purpose

Aurora Early Intervention and Behavioural Services recognises the right of all participants to feel safe and to live in an environment that provides protection from assault, neglect, exploitation, discrimination or any other form of abuse. People with disabilities, children and young people are some of the most vulnerable groups in our society. It's essential that Aurora Early Intervention and Behavioural Services identify, consult and respond to instances where persons with disabilities, children or young persons are at risk of significant harm.

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

- Domestic and family violence
- Physical, sexual and emotional abuse
- Neglect

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



Learning and development
Physical and mental health
Behaviour

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

Scope

Aurora Early Intervention and Behavioural Services will encourage and support any person who has witnessed the abuse of a service user or, who suspects that abuse has occurred, to make a report and be confident of doing so without fear of retribution.

Definition

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

POLICY

This policy aims to:



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

In the case that situation meets the criteria of a reportable incident, then the 'Reportable Incident, Accident and Emergency Policy and Procedure' will apply.

Statement of commitment to safety

Aurora Early Intervention and Behavioural Services is committed to the safety and wellbeing of all participants. This commitment is the primary focus of our support and decision making. Aurora Early Intervention and Behavioural Services is committed to providing a safe environment where participants are safe and feel safe; their voices are heard and included in decisions that affect their lives. Attention is paid to the cultural safety of participants from culturally or linguistically diverse backgrounds.

All Aurora Early Intervention and Behavioural Services Staff members have a responsibility to understand the critical and specific role they play, both individually and collectively, to ensure the wellbeing and safety of all participants and young people are at the forefront of all they do and every decision they make.

Safe Code of Conduct

Aurora Early Intervention and Behavioural Services is committed to the safety and wellbeing of participants. Our business recognises the importance of, and responsibility for, ensuring our environment is a safe, supportive and enriching environment that respects and fosters the dignity and self-esteem of all people, enabling them to thrive.

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



Aurora Early Intervention and Behavioural Services management support the implementation and monitoring of the Code of Conduct. We will plan, implement and monitor arrangements to provide inclusive and safe environments.

All Staff, volunteers, and any other community members involved in participant-related work are required to comply with the Code of Conduct by observing expectations for appropriate and acceptable behaviour (see '4.3 Acceptable behaviors' below). The Code of Conduct applies in all situations, including planned activities and the use of digital technology and social media.

Acceptable behaviours

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

Upholding Aurora Early Intervention and Behavioural Services's Statement of Commitment for the participant's safety
Treating the participant, their family and advocates with respect within the environment and during outside activities as part of normal social and community activities

Listening and responding to the views and concerns of the participant, particularly if they are reporting that they or another person have been abused; or that they're worried about their safety or the safety of another participant

Promoting cultural safety, participation and empowerment of Aboriginal and Torres Strait Islander people through interactions with their community leaders and members

Promoting cultural safety, participation and empowerment of people with culturally or linguistically diverse backgrounds through engagement with the community accessing the service

Promoting the safety, participation and empowerment of people with disabilities

Reporting any allegations of abuse or any personal safety concerns to management

Understanding and complying with all reporting or disclosure obligations (including state mandatory reporting), as they relate to protecting the participant from harm or abuse

- Maintaining the right to live in a safe environment by promoting and informing the participants of their rights
- Ensuring participants are safe and protected from harm, as quickly as possible, once abuse is suspected

Identifying themselves to a participant upon entering premises and show any required identification.

Unacceptable behaviours

As front-line workers, volunteers and community members involved in participant-related work, we must not:

Ignore or disregard any concerns, suspicions or disclosures of abuse

Develop a relationship with any participant that could be viewed as favoritism or grooming behaviour, e.g., Offering gifts

Exhibit behaviours, or engage in activities, with participants that can be interpreted as abusive and unjustifiable in an educational, therapeutic or service delivery context

Ignore behaviours by other adults towards young participants when they're overly familiar or inappropriate



Discuss content of an intimate nature or use sexual innuendo with participants, except where it occurs relevantly in the context of parental/advocate guidance or a therapeutic setting

Treat a participant unfavorably because of their disability, age, gender, race, culture, vulnerability, sexuality or ethnicity

Communicate directly with an underage participant, through personal or private contact channels, e.g., Social media, email, instant messaging or texting, except where that communication is reasonable in all the circumstances, related to work or activities, or where there is a safety concern or other urgent matter.

Screening, supervising, training and human resource practices to reduce risk

The Staff will be required to undertake checks including disability worker checks, relevant police, and working with children checks and the mandatory NDIS Worker Orientation Module. All records will be maintained in their personnel file.

PROCEDURE

Strategies to identify and reduce or remove the risk of harm

Aurora Early Intervention and Behavioural Services recognise that creating a safe organisation begins with a clear understanding of the potential risks to the participant and Staff in an organisation's setting. Aurora Early Intervention and Behavioural Services will identify possible issues and problems and plan to reduce or remove these risks.

To reduce the likelihood of harm Aurora Early Intervention and Behavioural Services will consider, define and act against its organisational risks.

These strategies include:

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

- Planning how to make all activities as safe as possible

- Developing a safety plan for participants who require additional supports

- Supporting participants with disabilities to understand plans and safety procedures using appropriate communication methods

- Informing participants that they have the right to live in a safe environment

- Acting proactively to reduce the likelihood of any risks.

Reporting violence, abuse, neglect, exploitation and discrimination

A report must be made if:

- A participant shows a change in behaviour or mood which may indicate they're being abused

- Someone is observed behaving towards a participant in a way that makes others feel uncomfortable



- A participant advises they're being abused by another person
- A person advises that they're abusing another participant
- A participant or visitor informs that they've observed abusive acts
- A participant advises that they feel discriminated against, e.g., Language and actions
- A participant presents as unkempt or seeking food
- There is evidence of unexplained bruising or similar
- An action or inaction is witnessed that may be considered abusive
- When an individual, for any reason, believes a participant is being abused.

Failure to report an abusive situation may result in a criminal offence.

Reporting procedure below relates to:

- Abuse or neglect of a person with disability
- Unlawful sexual or physical contact with, or assault of, a person with disability
- Sexual misconduct, committed against, or in the presence of, a person with disability, including grooming of the person with disability for sexual activity
- Unauthorised use of restrictive practices in relation to a person with disability

Reporting Roles

The organisation will establish the following roles and ensure that allocated staff are aware of their responsibilities:

1. Approved Reportable Incident Approver responsibilities
 - have the authority to review reports prior to submission to the NDIS Commission.
 - submit new Reportable Incidents
 - view previous Reportable Incidents submitted by their organisation.
2. Authorised Reportable Incidents Notifier responsibilities
 - supports the 'Authorised Reportable Incidents Approver' to collate and report the required information.
 - creates new Reportable Incident notifications to be saved as a draft for review and submission by the authorised 'Approver'

How to report

Management Team will review the information and contact the police immediately to inform them of the suspected abuse.

Important note: To find out how to report abuse against children go to the 'Working with Children Policy and Procedure'.

Reportable Incidents are submitted via the NDIS Commission Portal, 'My Reportable Incidents' page.



1. Complete an Immediate Notification Form and submit within 24 hours
 - Approved Reportable Incident Notifier will create for approval
 - Approve Reportable Incident Approver will approve and submit
 - Note: Approved Reportable Incident may create and submit, as required by the circumstance of the incident.
2. 5 day form to be completed within 5 days of key stakeholders being informed
 - Approved Reportable Incident Notifier will create for approval
 - Approve Reportable Incident Approver will approve and submit
 - Note: Approved Reportable Incident may create and submit, as required by the circumstance of the incident.
3. Final Report will be submitted if requested by the NDIS Commission.
 - Approved Reportable Incident Notifier will create for approval
 - Approve Reportable Incident Approver will approve and submit
 - Note: Approved Reportable Incident may create and submit, as required by the circumstance of the incident.

Details to provide

The Management Team will give the following information to the authorities:

- Participant's name, age, date of birth and address
- Description of injury, abuse and neglect (outline current and previous)
- Participant's current situation
- Location of the participant and alleged perpetrator, if known
- Explanation of when and how abuse was discovered and by whom.

- Note: NDIS forms must be submitted to NDIS Commission. Required Police contact will use the above information.

Investigating allegation or incident

Management Team undertakes a review of the allegation or incident by:

- Gathering data from relevant person/s
- Analyzing the situation to determine what occurred, how it occurred, and the parties involved
- Determining the effect on the participant/s



Consulting with relevant stakeholders; never seek information from children, as this requires a specialist, any questioning will be conducted by appropriate authorities once the incident is reported
Informing the participant or their family that they have access to a support advocate
Reviewing the outcome against practices
Undertaking action to prevent the incident from being repeated.

Support the participant

Reported allegations or incidents require the Management Team to gather all the relevant information and make a report to the relevant authority such as the police or via each state's reporting process.

Support will be provided to the participant relevant to the allegation or incident. Participant will be provided an appropriate advocate, if required.

Documentation

Record all allegations and incidents in the Incident Register.
Complete Incident Investigation Form, if required.
Reports to be included in the participant's file.
Complete Immediate Notification Form and 5 Day Form and NDIS Report as required
Maintain records for seven (7) years.

PERSON-CENTRED SUPPORTS POLICY AND PARTICIPANT SERVICE CHARTER OF RIGHT

PURPOSE

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

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

SCOPE

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

POLICY



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

Aurora Early Intervention and Behavioural Services takes a person-centered and evidence-based approach to any services that we provide, where the participant, family or their advocate is primary to any decisions being made.

Aurora Early Intervention and Behavioural Services exists to work with our participants, their advocates, family members and other service providers as relevant, to provide the services to meet our participant's need, within the scope of our services.

We will provide support and work with community groups or education programs directly, or in partnership with other services. You can find information about our services on our website, Aurora Early Intervention and Behavioural Services or by asking one of our staff.

Aurora Early Intervention and Behavioural Services will work with other groups, services and programs either directly or in partnership to ensure that relevant supports are provided.

Our Charter of Rights will be given to participants in the form of a Handbook, Easy Read Format using simple terminologies such as Your Rights, Your Responsibilities and Our Responsibilities.

CHARTER OF RIGHTS

Your Rights

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

You have the right to:

- Have access and supports that promote, uphold and respect your legal and human rights.
- Exercise informed choice and control.
- Freedom of expression, self-determination and decision-making.
- Access supports that respect your culture, diversity, values and beliefs.
- A service that respects your right to privacy and dignity.
- Be supported to make informed choices which will maximise independence.
- Access supports free from violence, abuse, neglect, exploitation or discrimination.
- Receive supports which are overseen by strong operational management.
- Access services which are safeguarded by Caring Carers well-managed risk and incident management system.
- Receive services from workers who are competent, qualified and have expertise in providing person-centered supports.



Consent to the sharing of information between providers during the transition.
Opt-out of giving information as required by NDIS.

Your Responsibilities

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

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

Your Right to give Feedback

Aurora Early Intervention and Behavioural Services values your feedback. This may be on something that we did well or something that we need to do better. Do not be silent; let us know you are not happy with the service you have received or believe you have not been treated fairly and. Here are several ways that you can do this:

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

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



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

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

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

NDIS Code of Conduct

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

Provide complete and accurate information about yourself, and your situation

Explain if there is a change in your health.

Let your Staff know if things change, or if you cannot keep an appointment or commitment.

Complete consent forms, so we can work with your advocate (if applicable).

Act respectfully and safely towards other people using the service, and towards our frontline staff.

Provide feedback about the service, and how you think we could do things better for you.

Report back to us if unhappy with our services or if there is any matter of concern.

Our commitment to participants

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

Always treat you with respect.

Treat you fairly and without discrimination.

Inform you of your rights and responsibilities through our orientation process, easy read documents and handbooks.

Protect your personal information and only use it for the right reasons.

Involve you in decisions about the services that you access.

Support you to connect with other services if needed.

Tell you how to provide us with feedback on our service,

Ensure your safety and undertake practices that prevent injury to you and others.

Help you to access and use our services.

Comply with your signed Service Agreement.

Inform you of your rights and responsibilities.

Arrange for an interpreter or other language services, if you need this.

Be polite and respect your views, opinions, personal circumstances and cultural diversity.

Provide you with advice and different options on other supports and services that may be available.

Provide staff that has the appropriate skills and competencies to meet your needs.

Treat you with dignity, fairness and respect, without discrimination or victimisation.

Inform you how you can make a complaint and provide information on how we will respond to that complaint.



Provide support and care that recognises and acknowledges each person's preferences, choices, interests, and capability.

Support your rights to receive quality care, and support in an appropriate environment which promotes your participation.

Provide services that meet or exceed relevant industry standards such as the NDIS Practice Standards and Quality Indicators, NDIS Rules and the Charter of Rights.

ADVOCACY SUPPORT POLICY AND PROCEDURE

PURPOSE

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

SCOPE

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

DEFINITION

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

Below is a list of types of advocacies:

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

POLICY

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



Staff will work cooperatively with the participant's nominated advocate and will show the same respect to the advocate as is shown to the participant. Where participants cannot advocate for themselves, it is Aurora Early Intervention and Behavioural Services's policy to ensure that the participant's interests are represented and supported using a substitute decision-maker.

Advocacy Principles

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

PROCEDURE

Initial Assessment (Participant without an Advocate)

Discuss the participant's right to appoint an advocate at any time and to have an advocate present to speak on their behalf.

Provide the participant with advocacy information.

Explain to the participant their rights regarding advocacy as per the Aurora Early Intervention and Behavioural Services's Service Agreement and Charter of Rights, and the NDIS Practice Standards and Quality Indicators 2018.

Advise the Participant that if they wish to utilise advocacy services, then Aurora Early Intervention and Behavioural Services can assist them in contacting any of these services.

Provide the form; "Authority to Act as an Advocate" to the Participant. In the event that they decide to utilise the services of an advocate. The completed and signed form is kept in the participant's file.

Discuss and document any specific communication issues or protocols to be used; between the service and the advocate (such as email, phone or any other method).

Inform the participant that they can withdraw approval for an advocate to act on their behalf at any time.

Initial Assessment (Participants with Advocates/Representatives)

Prior to Initial Assessment

- At initial contact with the participant ensure that the person is informed of their right to an advocate and record the advocate's details if the individual has an advocate.
- Advise the Participant of the need to complete the Authority to Act as an Advocate form and provide this form to the Participant.
- Contact the advocate to ensure they are aware that they have been nominated as an advocate and agree to do so.
- The completed Authority to Act as an Advocate for is kept in the participant's file.



- Ensure the potential participant is aware of their advocacy rights, including the right to have an advocate present for all assessments, meetings and communication between the Participant and Aurora Early Intervention and Behavioural Services.
- Schedule the Participant's initial assessment at a time and date that will enable the advocate to be present.
- Ensure an identified Advocate is present at the assessment.

At initial assessment

- If not already received, request the completion of the Authority to Act as an Advocate form. Explain that this must be completed for Aurora Early Intervention and Behavioural Services to formally recognise the nominated person as the Participant's advocate.
- Gather information about the advocate, such as contact details and methodology.
- Explain that the Participant has the right to change their advocate at any time. Changes should be documented with written confirmation from the Participant using the Authority to Act as an Advocate form.

Working with Advocates

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

Continuing work with Advocates

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

Note: there is a web-link to access advocacy services which require the input of a postcode. Aurora Early Intervention and Behavioural Services will guide and assist participants in this matter. <https://disabilityadvocacyfinder.dss.gov.au/disability/ndap/>

ADVOCACY INFORMATION

Australian Centre for Disability Law – disabilitylaw.org.au

Autism Asperger's Advocacy Australia (A4) - a4.org.au

The Autistic Self Advocacy Network of Australia and New Zealand - www.asan-au.org



- Blind Citizens Australia - bca.org.au
- Brain Injury Australia - braininjuryaustralia.org.au
- Children with Disability Australia - cda.org.au
- Deaf Australia - deafau.org.au
- Deafness Forum of Australia - deafnessforum.org.au
- Disability Advocacy Network Australia (DANA) - dana.org.au
- First Peoples Disability Network (FPDN) - fpdn.org.au
- Human Rights Council of Australia – hrca.org.au
- Intellectual Disability Rights Service (IDRS) - idrs.org.au
- Mental Health Australia - mhaustralia.org
- National Council on Intellectual Disability (NCID) - ncid.org.au
- National Ethnic Disability Alliance (NEDA) - neda.org.au
- Physical Disability Australia (PDA) - pda.org.au
- People with disabilities Australia pwd.org.au
- Short Statured People of Australia - sspa.org.au
- Women with Disabilities Australia (WWDA) - wwda.org.au

INDIVIDUAL VALUES AND BELIEFS POLICY AND PROCEDURE

PURPOSE

People with disabilities have the same right as other members of Australian society to realise their full potential. They should be supported to participate in and contribute to social and economic life.

Inclusion of, and access for, people with disabilities to mainstream and community-based activities and other government initiatives. (National Disability Strategy 2010-2020)

To inform the community of Aurora Early Intervention and Behavioural Services’s service provision capacity, including the priority of access process and eligibility criteria requirements. We will encourage and manage requests for service from potential participants and referrals to and from other agencies.

Aurora Early Intervention and Behavioural Services commits to cultural diversity and to the support of our participants by respecting their culture, diversity, values and beliefs. We will recognise and value the multicultural nature of Australian society and give specific acknowledgement and support to the customs of Australian Indigenous peoples.

SCOPE

This policy is inclusive of all community groups and will include people such as Aboriginal and Torres Strait Islander, culturally and linguistically diverse, various ages and stages of development, sexual orientation and disability. This policy will apply to a Staff engaged to work with the participants. This policy applies to Aurora Early Intervention and Behavioural Services's staff and management.

POLICY



Aurora Early Intervention and Behavioural Services will deliver flexible services that are designed to meet the needs of diverse peoples. We will actively provide a work environment which supports values and encourages cultural diversity through training staff to develop their cultural understandings.

Aurora Early Intervention and Behavioural Services will identify any real or potential barriers for the participant to access our services.

Our strategies to ensure equity for all peoples may include:

- Treating all people equally according to their human rights.

- Including all people regardless of their background, ethnicity, culture, language, beliefs, gender, age, sexual orientation, and socioeconomic status, level of ability, additional needs, family structure or lifestyle.

- Promoting inclusive practices and ensuring the successful involvement of participants in the community to enable them to reach their goals and aspirations.

Aurora Early Intervention and Behavioural Services will collaborate with the participant to identify their culture, diversity, values and beliefs. Aurora Early Intervention and Behavioural Services acknowledges the participant's right to practice their cultures, values and beliefs. Aurora Early Intervention and Behavioural Services will work with the participant to ascertain how and when they wish to participate in any religious or cultural practices. The team must respond sensitively to the participant's requirements and work with the participant to access their required supports.

Aurora Early Intervention and Behavioural Services recognises, respects, promotes and celebrates the value of cultural diversity. Our team will adopt and implement inclusive and culturally diverse policies and strategies.

Aurora Early Intervention and Behavioural Services is committed to social inclusion and community participation in both the delivery and expansion of services to disadvantaged participants. Our team will work in partnership with the community, Aboriginal and Torres Strait Islander people, culturally and linguistically diverse groups, people with different sexual orientations and those with disabilities.

To improve and support the varying needs of people with disabilities, their families and advocates, we will access links between other service systems.

We will:

- Consult our participants to facilitate the provision of fair, equitable and transparent services.

- Work with services in the community to ensure our participants are provided with relevant contacts to other services and community networks to enable the development of their personal goals, outcomes and aspirations, and in line with their support plan.

- Actively encourage and support our participants to maintain personal networks, community connections and participate in their community.

- Use networks and community engagement feedback to inform management processes.



Aurora Early Intervention and Behavioural Services will gather information about the participant's cultural, beliefs, values and diversity. Participant's decisions and choice on practicing their beliefs and cultural practices are supported and recorded in their support plan.

Aurora Early Intervention and Behavioural Services's commitment is to make sure people with disabilities are connected into their communities by:

- Providing information on mainstream services and community activities which will benefit people with disabilities, as well as their families and advocates.

- Contributing to relevant links and networks within the community.

- Providing participation and inclusion of people with disabilities by working in partnership with community organisations.

Aurora Early Intervention and Behavioural Services is committed to identifying and liaising with other stakeholders. Stakeholder identification and contact are dependent on the participant but may include local community support organisations, job networks, training organisations, and housing agencies.

Aurora Early Intervention and Behavioural Services will uphold and promote the legal and human rights of all people and abide by the United Nations Convention on the Rights of People with Disabilities.

Aurora Early Intervention and Behavioural Services will treat all people with courtesy, dignity and recognise their human rights to self-determination and privacy.

PROCEDURE

Aurora Early Intervention and Behavioural Services will ensure that all participants are treated fairly and in a non-discriminatory manner. This intent incorporates both intake and service delivery processes. Information provided will be in an easy read format, but we will arrange relevant support in the form of home language, or using an interpreter, as required. If a participant has a barrier of not being able to read or understand information, then a support person will be supplied to assist the participant in understanding what is being said or explained.

Aurora Early Intervention and Behavioural Services will support the participant to access supports linked to their culture, diversity, values and beliefs. The type of support and responses will be determined through consultation with the participant and following the choices made by the participant. To assist the participant in making choices about their level of participation in their relevant supports, our team may:

- Actively pursue contacts that have been chosen by the participant.

- Contact local communities such as cultural, religious, sexual orientation groups or spiritual groups including Aboriginal and Torres Strait Islander communities.

- Contact government agencies to support individual participants.

- Seek community members and groups to receive input into the service,

- Contact advocates assisting with the development of community support plans for the participants.



Actively support the rights of the participant to seek contact with those in the community, relevant to their wishes, goals and aspirations. The participant will be encouraged to join with related community links, as required. Following the participant's aspirations and needs to participate in the community actively.

Aurora Early Intervention and Behavioural Services will make relevant contacts for the participant to assist in initial involvement with their selected group or individual.

Aurora Early Intervention and Behavioural Services will work with Aboriginal and Torres Strait Islander peoples and culturally diverse groups to actively engage with their communities. The support plan will Support from their community will be incorporated within the support plan. This support will be assessed, monitored and reviewed to ensure that goals and aspirations of participants are met using the relevant support.

Aurora Early Intervention and Behavioural Services will provide services that meet the aspirations and goals of the participant for inclusion in the community.

Aurora Early Intervention and Behavioural Services will work with the community to actively encourage the participant to participate in various activities, including employment, education, sporting activities, cultural events, and any relevant activities.

Aurora Early Intervention and Behavioural Services is committed to building relationships with key stakeholders, including Government, organisations and communities working together to get the best result for their participants.

Aurora Early Intervention and Behavioural Services will ensure that their services are tailored to ensure that they are meeting their participant's needs in a flexible way, acknowledging that each person's needs are different.

Aurora Early Intervention and Behavioural Services will give a high priority to providing early intervention and prevention towards each participant's situation, thus heading off problems by understanding the root causes and intervening early.

Aurora Early Intervention and Behavioural Services will undertake Cultural Competence training for staff to increase knowledge and strategies of working in an inclusive manner.

Aurora Early Intervention and Behavioural Services promotes inclusion by:

- Working closely with a network of health and allied health professionals to be able to support the holistic needs of our participants.

- Building effective partnerships with the participants and their families, advocates and support people to discuss and foster shared priorities and the participant's individual needs and goals.

- Focused efforts on building social inclusion and participation opportunities within the range of services provided.

- Providing information on community events and other relevant networks that meet participant's needs and identified goals.

- Working within the participant's networks and supports, including childcare, kinder, school or home environments, which allows Aurora Early Intervention and Behavioural Services to assist the participant in fostering relationships and participation in familiar surroundings.



Having a community linkages policy that outlines the ways in which Aurora Early Intervention and Behavioural Services will work with other communities for the betterment of their participants.
Operating in a manner that ensures all people can access our services

PRIVACY AND DIGNITY POLICY AND PROCEDURE

Purpose

Aurora Early Intervention and Behavioural Services will manage and ensure that our organisation provides the participant access to services and supports that respect and protect their dignity and right to privacy.

Scope

This policy applies to all Staff.

POLICY

Aurora Early Intervention and Behavioural Services is committed to protecting and upholding all stakeholders right to privacy and dignity; including participants, staff, management and representatives of agencies, we deal with.

Aurora Early Intervention and Behavioural Services is committed to protecting and upholding the participants right to privacy and dignity as we collect, store and handle information about them, their needs and the services provided to them.

Aurora Early Intervention and Behavioural Services requires Staff and management to be consistent and careful in the way they manage what is written and said about individuals and how they decide who can see or hear this information.

Aurora Early Intervention and Behavioural Services is subject to NDIS (Quality and Safeguards) Commission rules and regulations. Aurora Early Intervention and Behavioural Services will follow the guidelines of the Australian Privacy Principles in its information management practices.

Aurora Early Intervention and Behavioural Services will ensure that each participant understands, and agrees to, what personal information will be collected and informed of the reason for the collection. The participant will be informed and agree to this information is being recorded material in an audio and/or visual format.

Aurora Early Intervention and Behavioural Services will advise each participant of privacy policies using the language, mode of communication and terms that the participant is most likely to understand. (Easy Read documents are made available to all participants).

Aurora Early Intervention and Behavioural Services will ensure that:

It meets its legal and ethical obligations as an employer and service provider in relation to protecting the privacy of participants and organisational personnel.

The participants are provided with information about their rights regarding privacy and confidentiality.



The participants and organisational personnel are provided with privacy, and confidentiality is assured when they are being interviewed or discussing matters of a personal or sensitive nature.

All staff, management and volunteers understand what is required in meeting these obligations.

Participants are advised of Aurora Early Intervention and Behavioural Services's confidentiality policies using the language, mode of communications and terms that are most likely to be understood. Aurora Early Intervention and Behavioural Services will attempt to locate interpreters and will use easy access materials.

This policy conforms to the Federal Privacy Act (1988) and the Australian Privacy Principles, which govern the collection, use and storage of personal information.

This policy will apply to all records, whether hard copy or electronic, containing personal information about individuals, and to interviews or discussions of a sensitive personal nature.

PROCEDURES

Dealing with personal information

In dealing with personal information, Aurora Early Intervention and Behavioural Services staff will:

Ensure privacy for the participants, staff, or management when they are being interviewed or discussing matters of a personal or sensitive nature.

Only collect and store personal information that is necessary for the functioning of the organisation and its activities.

Use fair and lawful ways to collect personal information.

Collect personal information only with consent from the individual.

Ensure that people know of the type of personal information being held, the purpose of keeping the information and the method it is collected, used, disclosed, and who will have access to it.

Ensure that personal information collected or disclosed is accurate, complete, and up-to-date, and provide access to the individual to review information or correct wrong information about themselves.

Take reasonable steps to protect all personal information from misuse and loss and from unauthorised access, modification or disclosure.

- Destroy or permanently de-identify personal information no longer needed and/or after legal requirements for retaining documents have expired.
- Ensure that participants understand and agree with what personal information will be collected and why.
- Ensure participants are informed when any recordings occur in either audio and/or visual format. The participant's involvement in any recording must be agreed to in writing.

Participant Records

Participant records will be kept confidential and only handled by staff directly engaged in the delivery of service to the participant. Information about participants may only be made available to other parties with the consent of the participant, or



their advocate, guardian or legal representative. A written agreement giving permission to the recording must be maintained in the participant's file.

All hard copy files of participant records will be kept securely in a locked filing cabinet, in the office space.

Responsibilities for Managing Privacy

All staff is responsible for the management of personal information to which they have access. Director is responsible for the content in Aurora Early Intervention and Behavioural Services publications, communications and on the website and must ensure the following:

- Appropriate consent is obtained for the inclusion of any personal information about any individual, including Aurora Early Intervention and Behavioural Services personnel (Consent Policy and Procedure)
- Information being provided by other agencies or external individuals conforms to privacy principles
- That the website contains a Privacy Statement that makes clear the conditions of any collection of personal information from the public through their visit to the website.

The Director is responsible for safeguarding personal information relating to Aurora Early Intervention and Behavioural Services's staff, management and contractors. The Director will be responsible for:

- Ensuring that all Staff is familiar with the Privacy Policy and administrative procedures for handling personal information.
- Ensuring that participants and other relevant individuals are provided with information about their rights regarding privacy and dignity.
- Handling any queries or complaints about a privacy issue.

Privacy Information for Participants

At the first interview, participants will be notified of the type of information is being collected about them, how their privacy will be protected, and their rights in relation to this data. Information sharing is part of our legislative requirements. Participants must give consent to any information sharing between our organisation and government bodies. The participant is offered to opt-out of any NDIS information sharing during audits.

Privacy for Interviews and Personal Discussions

To ensure privacy for participants or Staff when discussing sensitive or personal matters, Aurora Early Intervention and Behavioural Services will only collect personal information which is necessary for the provision of supports and services and which:

- Is given voluntarily; and
- Will be stored securely on the Aurora Early Intervention and Behavioural Services database.

When in possession or control of a record containing personal information, Aurora Early Intervention and Behavioural Services will ensure that the record is protected against loss, unauthorised access, modification or disclosure, by such steps as it is



reasonable in the circumstances to take. If it is necessary for that the record be given to a person in connection with the provision of a service to Aurora Early Intervention and Behavioural Services, everything reasonable will be done to prevent unauthorised use or disclosure of that record. Aurora Early Intervention and Behavioural Services will not disclose any personal information to a third party without the individual's consent unless that disclosure is required or authorised by or under law.

CONFIDENTIALITY POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure Aurora Early Intervention and Behavioural Services upholds each participant's individuality, dignity and privacy. The policy sets out Aurora Early Intervention and Behavioural Services's responsibilities relating to the collection and protection of participant's information.

Definition

Health information – Any information or an opinion about the physical, mental or psychological health or ability (at any time) of an individual.

Personal information – Recorded information (including images) or opinion, whether true or not, about a living individual whose identity can reasonably be ascertained.

Sensitive information – Information or an opinion about an individual's racial or ethnic origin, political opinions, membership of a political party, religious beliefs or affiliations, philosophical beliefs, membership of a professional or trade association, membership of a trade union, sexual preference or practices, or criminal record.

POLICY

Privacy and confidentiality of participant's information are of paramount importance to Aurora Early Intervention and Behavioural Services.

Aurora Early Intervention and Behavioural Services will only collect information necessary for effective service delivery.

Aurora Early Intervention and Behavioural Services will only use information collected for the purpose it was collected and secure it appropriately.

Aurora Early Intervention and Behavioural Services will collect, use and disclose information in accordance with relevant state and Federal privacy legislation.

PROCEDURES

Aurora Early Intervention and Behavioural Services will keep participants informed of their rights.

Aurora Early Intervention and Behavioural Services will ensure participant and or their authorised representative has access to participant personal information.

Aurora Early Intervention and Behavioural Services will keep participant information secure.



Computers and laptops will be protected by user access credentials.

Aurora Early Intervention and Behavioural Services will not release information related to participants to other individuals or services without the consent of the participant or their representative.

Aurora Early Intervention and Behavioural Services will respect participant's right to withdraw from consent at any time.

Aurora Early Intervention and Behavioural Services will collect, use and disclose information in accordance with relevant state and Federal privacy legislation.

All staff are responsible for upholding Company's privacy and confidentiality responsibilities.

Management will make arrangements for participants with special needs to assist with protecting their privacy and dignity.

Aurora Early Intervention and Behavioural Services will give due consideration to individuals and groups with special needs when upholding their privacy, dignity and confidentiality.

Aurora Early Intervention and Behavioural Services will capture participant information the privacy of their home or in our office and ensure that it is in an area that prevents other people from hearing their personal details.

Participant privacy will be respected, and assistance will be given in a dignified and appropriate manner during social outings or in their own home.

Staff will ensure time and space for participant privacy, respecting and encouraging participant independence.

Individual choice will be respected in regard to clothing and grooming, taking into account various factors such as the weather to ensure warmth if cold or to avoid overheating during hot seasons.

Employees will show respect for the participant's home and participant belongings.

Company will collect, use and disclose information in accordance with relevant state and Federal privacy legislation.

Participant Information will not be collected or released to other individuals or services without informed consent from the participant or their representative, or in exceptional circumstances i.e., where legislation requires, in case of life threatening emergency.

Clinical records to be kept in a locked filing cabinet when not being used in the office; if a home file is kept this is to be kept discretely and privately in the participant's home where the participant wishes to keep it.

Company will not provide participant information over the phone as it is difficult to determine the identity of the caller(s).

Company will ensure improvements identified through staff and participant feedback, are actioned through the company's Continuous Improvement Plan.

Company will monitor staff knowledge and application of confidentiality and privacy principles on-the-job and through yearly Performance Reviews.

Company will provide additional on-the-job and formal training to staff where required.

Staff Privacy and Confidentiality

Staff information Aurora Early Intervention and Behavioural Services collects includes, but is not limited to tax declaration form; employment / engagement contract; personal details; emergency contact details; medical details; Police and Working with Children Check records; Qualifications; First Aid, CPR and Anaphylaxis certificates; medical history; personal resume; payroll information; and Superannuation details



Staff information may be accessed the Management Team.

Staff have the right to request access to personal information Aurora Early Intervention and Behavioural Services holds about them, without providing a reason for requesting access; access this information; and make corrections if they consider the information is not accurate, complete or up to date.

If an individual requests access to or the correction of personal information, within a service benchmark of 2 working days (and no more than 45 days after receiving the request), staff will provide access, or reasons for the denial of access; correct the personal information, or provide reasons for the refusal to correct the personal information; or provide reasons for the delay in responding to the request for access to or correction of personal information.

Staff personal and health information will only be disclosed for medical treatment or emergency; with written consent from the staff member; or when required by Commonwealth Law, or to fulfil legislative obligations such as mandatory reporting.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

MANAGEMENT OF DATA BREACH POLICY AND PROCEDURE

Purpose

To meet legislative compliance requirements as a mandatory reporter of eligible data breaches to both the Office of the Australian Information Commissioner (OAIC) and any individuals who may be potentially affected by a data breach; to inform relevant authorities of any breach, and to limit and reduce risks to the business and ensure continuous improvement in maintenance of data held by our organisation.

Scope

All Staff are required to maintain the confidentiality of all data relating to participants and other Staff members. This policy relates to all personal data regarding both participants and team members.

Definition



Terminology	Description
Data breach (Eligible Data Breach)	Unauthorised access to or unauthorised disclosure of personal information or personal information is lost in circumstances where unauthorised access to, or unauthorised disclosure of the information is likely to occur.
Likely (likely to result in serious harm)	To be interpreted to mean more probable than not
Reasonable person	<p>A person in Aurora Early Intervention and Behavioural Services who is properly informed, based on information immediately available or following reasonable enquiries, or an assessment of the data breach.</p> <p>OAIC's guidance states that the reasonable person is not to be taken from the perspective of an individual whose personal information was part of the data breach or any other person, and, generally, entities are not expected to make external enquiries about the circumstances of each individual whose information is involved in the breach.</p>
Likely to result in serious harm	<p>An assessment as to whether an individual is likely to suffer 'serious harm' because of an eligible data breach depends on, among many other relevant matters:</p> <ul style="list-style-type: none"> ● the kind and sensitivity of the information subject to the breach ● whether the information is protected and the likelihood of overcoming that protection ● if a security technology or methodology is used in relation to the information to make it unintelligible or meaningless to persons not authorised to obtain it - the information or knowledge required to circumvent the security technology or methodology ● the persons, or the kinds of persons, who have obtained, or could obtain, the information ● the nature of the harm that may result from the data breach.
Potential forms of serious harm	Could include physical, psychological, emotional, economic and financial harm, as well as harm to reputation.



Remedial action	There are a number of exceptions to the notification obligation, including importantly where an entity is able to take effective remedial action to prevent unauthorised access to, or disclosure of, information when it is lost or to prevent any serious harm resulting from the data breach. Where such remedial action is taken by an entity, an eligible data breach will not be taken to have occurred, and therefore an entity will not be required to notify affected individuals or the OAIC
Suspicion of an eligible data breach	If Aurora Early Intervention and Behavioural Services merely suspects that an eligible data breach has occurred, but there are no reasonable grounds to conclude that the relevant circumstances amount to an eligible data breach, the entity must undertake a “reasonable and expeditious assessment” of whether there are in fact reasonable grounds to believe that an eligible data breach has occurred
Assessment time frame	Within 30 days after the day, it became aware of the grounds that caused it to suspect an eligible data breach.
Personal Information	<p>Personal information includes a broad range of information, or an opinion, that could identify an individual. What is personal information will vary, depending on whether a person can be identified or is identifiable in the circumstances.</p> <p>For example, personal information may include:</p> <ul style="list-style-type: none"> ● an individual’s name, signature, address, phone number or date of birth ● sensitive information ● credit information ● staff member record information ● photographs ● internet protocol (IP) addresses ● voiceprint and facial recognition biometrics (because they collect characteristics that make an individual’s voice or face unique) ● location information from a mobile device (because it can reveal user activity patterns and habits)



POLICY

Aurora Early Intervention and Behavioural Services views data breaches as having serious consequences, so the organisation must have robust systems and procedures in place to identify and respond effectively.

Aurora Early Intervention and Behavioural Services will delegate relevant staff members with the knowledge and skills required to become a Response Team member.

Staff are required to inform the Director or their delegate of the potential, or suspected, data breach immediately. Within forty-eight (48) hours, the Director is to complete a Data Breach Process Form and ensure that, as a regulated entity, they notify the particular individuals and the Commissioner about eligible data breaches as soon as practicable (no later than thirty (30) days after becoming aware of the breach or suspected breach).

If a staff member becomes aware that there are reasonable grounds to believe that there has been an *eligible data breach*, Aurora Early Intervention and Behavioural Services is required to promptly notify any individuals at risk of being affected by the data breach and the OAIC.

Aurora Early Intervention and Behavioural Services will undertake the following when an eligible data breach has occurred:

- 1) Prepare a statement that, at a minimum, contains:
 - a) Aurora Early Intervention and Behavioural Services contact details:
 - i) If relevant, the identity and contact details of any entity that jointly or simultaneously holds the same information, in respect of which the eligible data breach has occurred, e.g., due to outsourcing, joint venture or shared services arrangements. If information of this sort is included in the statement, the other entity will not need to report the eligible data breach separately.
 - b) A description of the data breach.
 - c) The kinds of information concerned.
 - d) The steps it recommends individuals take to mitigate the harm that may arise from the breach (while the entity is expected to make reasonable efforts to identify and include recommendations, it is not expected to identify every recommendation possible following a breach).
- 2) Provide a copy of the prepared statement to the OAIC using online Notifiable Data Breach Form.
- 3) Undertake such steps, as are reasonable in the circumstances, to notify affected or at-risk individuals of the contents of the statement. Individuals will be notified by email, telephone or post, depending on the situation; if direct notification is not practicable Aurora Early Intervention and Behavioural Services will publish the statement on its website and take reasonable steps to publicize its contents.



PROCEDURE

Stage 1. Assess and determine the potential impact

Once notified of the potential data breach, the Director must consider whether a privacy data breach has (or is likely to have) occurred and then make a preliminary judgement as to its possible severity. Advice on how to manage the data breach should be sought from appropriate managerial Staff.

Criteria for determining whether a privacy data breach has occurred:

- Is personal information involved?
- Is the personal information of a sensitive nature?
- Has there been unauthorised access to personal information, or unauthorised disclosure of personal information or loss of personal information, in circumstances where access to the information is likely to occur?

Criteria for determining the severity of the breach:

- Type and extent of personal information involved.
- The number of individuals that have been affected.
- If information is protected by any security measures (password protection or encryption).
- Type of person/s who now have access.
- Whether there is (or could be) a real risk of serious harm to the affected individuals.
- If there could be media or stakeholder attention due to the breach/suspected breach.

With respect to the above, serious harm could include physical, physiological, emotional, economic/financial or harm to reputation and is defined in *Section 26WG* of the *National Data Breach Act*.

The Director and relevant staff will take a preliminary view as to whether the breach (or suspected breach) may constitute a Notifiable Data Breach. Accordingly, the Director will issue pre-emptive instructions as to whether the data breach should be managed at the local level or escalated to the Data Breach Response Team (Response Team); this will depend on the nature and severity of the breach.

Stage 2. Select appropriate data breach management option

Data breach managed at a local level by managerial Staff



1. The Director will ensure implementation of immediate corrective action if this has not already occurred. Corrective action may include retrieval or recovery of the personal information, ceasing unauthorised access, shutting down or isolating the affected system.
2. A Data Breach Process Report is to be completed within 48 hours of receiving instructions. The report will contain a:
 - description of the breach or suspected breach
 - summary of action taken
 - summary of outcomes from the action taken
 - outline of processes implemented to prevent a repeat situation
 - recommendation outlining why no further action is necessary.
3. The Director will sign-off, confirming that no further action is required.

Data breach managed by the Data Breach Response Team

1. When the Director instructs that the data breach be escalated to the Response Team, the Director will convene the Response Team and notify any relevant managerial staff.
2. The Response Team will consist of:
 - Director
 - Human Resource nominee
 - Information Technology nominee
 - Marketing and external relations nominee
 - Other people nominated by the Director.

Primary role of the Data Breach Response Team

There is no single method of responding to a data breach. Each incident must be dealt with, on a case by case basis, by assessing the circumstances and associated risks to inform the appropriate course of action.

The following steps may be undertaken by the Response Team, as appropriate:

1. Immediately contain the breach, if this has not already occurred. Corrective action may include retrieval or recovery of the personal information, ceasing unauthorised access, shutting down or isolating the affected system.
2. Evaluate the risks associated with the breach, including collecting and documenting all available evidence of the breach, having regard for the information outlined above.
3. Call upon the expertise of, or consult with, relevant Staff in specific circumstances.
4. Engage independent cybersecurity or a forensic expert, as appropriate.
5. Assess whether serious harm is likely (with reference above and to *Section 26WG* of the *National Data Breach Act*).



6. Make a recommendation to the Director whether this breach constitutes an NDB for mandatory reporting to the OAIC, and the practicality of notifying affected individuals.
7. Consider developing a communication or media strategy including the timing, content and method of any announcements to participants, Staff or the media.
8. The Response Team must undertake its assessment within 48 hours of being convened.

Secondary role of the Data Breach Response Team

Once the data breach has been dealt with appropriately, the Response Team should turn its attention to the following steps:

1. Identify lessons learnt and remedial action that can be taken to reduce the likelihood of a recurrence; this may involve a review of policies, processes and refresher training.
2. Prepare a report for submission to senior management.
3. Consider conducting an audit to ensure that necessary outcomes are affected and effective.

Stage 3. Notify the Office of the Australian Information Commissioner

- Taking into consideration the Response Team's recommendation, the Director will determine whether there are reasonable grounds to suspect that a Notifiable Data Breach has occurred.
- If there are reasonable grounds, the Director must prepare a prescribed statement and provide a copy to the OAIC as soon as practicable (and no later than 30 days after becoming aware of the breach or suspected breach).

DIVISION 2 – GOVERNANCE AND OPERATIONAL MANAGEMENT CORPORATE GOVERNANCE POLICY AND PROCEDURE

Purpose

The purpose of this policy and procedure is to ensure that Aurora Early Intervention and Behavioural Services understands it is accountable to all stakeholders including participant, staff and community. Aurora Early Intervention and Behavioural Services will implement sound systems that guide best practice and professional service delivery.

Definitions

Operational plan – A detailed plan used to provide a clear picture of how a business, or its specific areas or teams will contribute to the achievement of the Strategic Plan. Operational Plans are usually developed annually and reviewed at regular intervals.

Strategic plan – A document used to communicate the long-term direction of a business, describing what it's going to do and how. Strategic Plans are long term – developed usually for a period of at least 3 years – and reviewed at least annually.

Scope



Principal accountability and approaches to corporate governance include:

- Fulfilling our duty to all Aurora Early Intervention and Behavioural Services stakeholders including participants, participants representatives, advocates, Staff, contractors and any person conducting business with our organisation
- Providing services of value to our participants
- Providing meaningful employment for our Staff
- Contributing to the welfare of the community.

POLICY

Aurora Early Intervention and Behavioural Services will have effective quality management systems and processes in place to guide and support its operations.

Aurora Early Intervention and Behavioural Services's strategic business plans are to be developed in a three-year Business Plan.

Aurora Early Intervention and Behavioural Services's business operations shall be reviewed on annually bases.

Aurora Early Intervention and Behavioural Services's Management Team are responsible for ensuring that the organisation is compliant with all relevant legislation, regulations and standards.

PROCEDURES

- Aurora Early Intervention and Behavioural Services's Management Team develops Strategic Plans, which identify the key outcomes the business wants to achieve. A new Strategic Plan is developed every three years.
- Strategic Plans are implemented through annual Operational Plans. These form the basis of the Management Team's expectations of each year and set out how the business will achieve the goals set out in its Strategic Plan.
- Develop communication strategies to keep participants, staff and other stakeholders informed.
- Management Team will meet with staff and participants regularly and document minutes of sessions noting actions on items raised.
- Develop information systems that ensure staff are guided in their practice and are able to access relevant websites to assist with compliance.
- Ensure regulatory compliance is at the forefront at all meetings, that professional standards are adhered to, and that relevant current legislation and standards are understood and met at all times.
- Management Team will meet on a monthly basis or as necessary to ensure that Aurora Early Intervention and Behavioural Services provides the highest quality of care.
- Management Team will oversee human resources requirements including the development of job description and staffing recruitment (refer to human resources policy and procedure).
- Management Team is expected to have the qualifications and experience to deal with issues relating to financial and legal matters, human resources, service management and service promotion.
- Management Team will set out a calendar of yearly audits to be undertaken and report on audit findings as required.



- The Management will meet on a monthly basis to review the delivery of services, financial management, information management and overall compliance with regulatory requirements.
- The Management Team will review and update the organisations business plan annually at the minimum.
- Aurora Early Intervention and Behavioural Services will comply with all data collection, service delivery and financial reporting requirements of all relevant State and Commonwealth government agencies.
- Aurora Early Intervention and Behavioural Services understands its' responsibilities in relation to managing conflicts of interest when delivering NDIS (refer to Conflict of interest policy and procedure).
- Management team will be responsible for mitigating risks to the organisation and its stakeholders.

BUSINESS FOCUS

Commitment to quality

Aurora Early Intervention and Behavioural Services is committed to providing high-quality services to its participants in a supportive environment. This commitment is in line with National Disability Insurance Service requirements.

Aurora Early Intervention and Behavioural Services will use information from the management of continuous improvement, complaints and feedback, incidents, work health and safety, information feedback and risk management to adjust our policies and practices so that we meet participant and community requirements.

Aurora Early Intervention and Behavioural Services will seek feedback from participants and the community to ensure that we're meeting their requirements and to provide high quality, responsive service. Information and feedback gained through surveys and consultation with community and stakeholders will be collated and forwarded to management to review and make recommendations about any adjustments to policies and practices as required. Managerial meetings will document discussions and outcomes. This will be fed back into continuous improvement.

Target group

There are two (2) target groups within the community in which we work:

1. Participants: Individuals with special needs who require support.
2. Service providers: Disability services organisations who seek support for their participants.

Services provided

Aurora Early Intervention and Behavioural Services provides the support services for participants with a disability as per the initial scope of audit.

Management and reporting structure

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



We also engage specialist consultants and contractors to support business functions and assist with a range of participant support services.

Knowledge, skills and experiences of all partners and key personnel, who influence the company, are reviewed to ascertain if additional training is required to address any identified gaps.

Performance planning and review

The planning and review process are included in the 'Human Resource Management Policy and Procedure'. Aurora Early Intervention and Behavioural Services will monitor and review the performance of Staff on an annual basis to:

- Determine Staff performance matches the current role description
- Evaluate if Staff members performance is meeting the needs of the participants
- Establish additional training to meet changes in contemporary practices
- Provide support to Staff to meet the required level of supports
- Match skills and knowledge to the target audience.

Conflict of interest

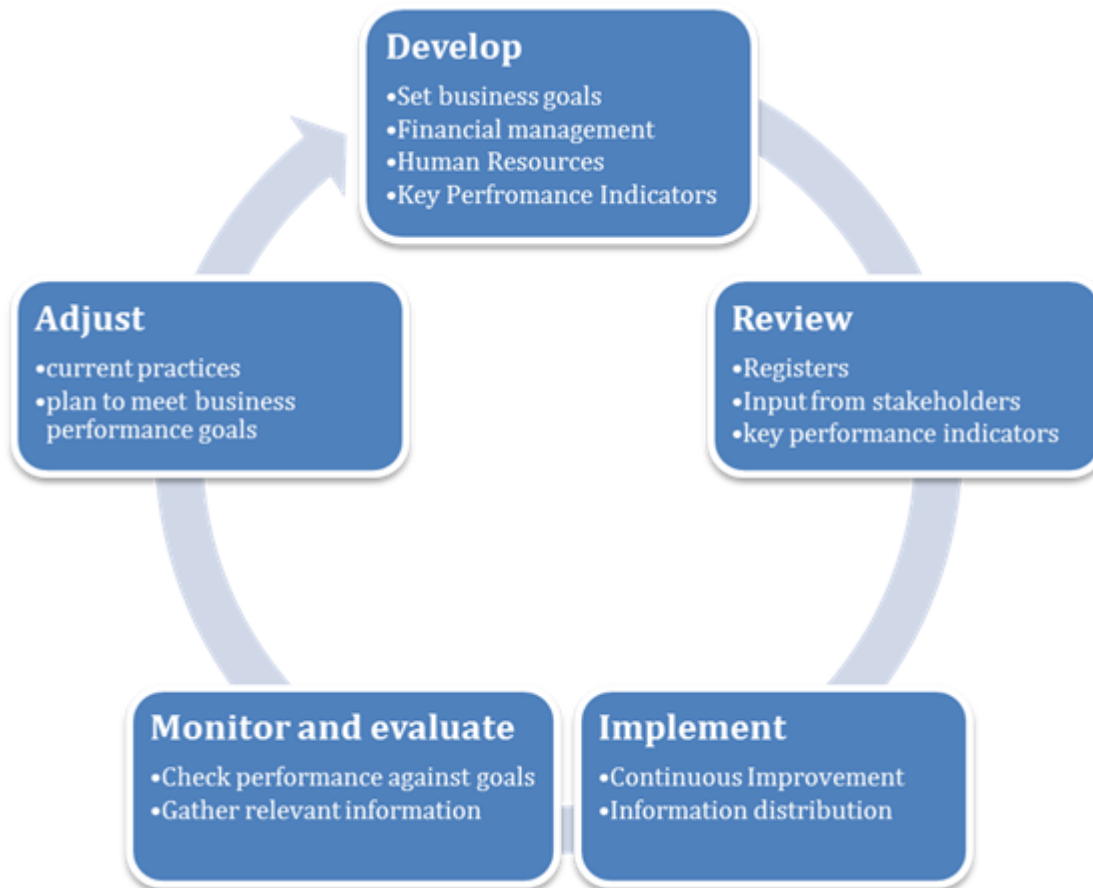
All key personnel and Staff must inform Aurora Early Intervention and Behavioural Services's management regarding any situation in which they will derive personal benefit from actions or decisions made in their official capacity. The person concerned must complete a Conflict of Interest Declaration.

Corporate governance principles

Aurora Early Intervention and Behavioural Services will be governed to ensure the best interests of all stakeholders and to remain viable and productive. Our corporate governance principles include, but are not limited to, the following:

- Services are regularly monitored, reviewed and improved
- Risk management reviews are conducted regularly
- Continuous improvement strategies are undertaken and implemented
- Implementation of necessary reviews and audits of all systems, policies and procedures
- Planning processes incorporate community engagement
- Effective management of human resource requirements, so all services meet the requirements of the participant and community
- Additional training and supervision will be provided to our workers, as needed
- Contractual obligations are to always be met
- Effective management and implementation of appropriate financial and funding arrangements.

Business Planning & Review



Financial management

The Aurora Early Intervention and Behavioural Services will undertake all requirements linked to NDIS contractual arrangements and other business practices.

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

Business financial management

Roles and tasks:

- Financial roles and responsibilities are determined by Aurora Early Intervention and Behavioural Services.
- An accountant will be used to complete the required financial compliance and obligations.



- Financial decisions are the responsibility of Aurora Early Intervention and Behavioural Services.

Business financial management practices

The following practices apply to financial management, including the recording of business earnings and documentation of the company as a legitimate enterprise with a clear revenue stream and records of deductible business expenses.

Documentation and organisation of information regarding company transactions will be used to facilitate financial management for tax purposes.

Bank accounts

- All bank accounts are maintained, and separate bank accounts are always used for business and private purposes.
- For monies withdrawn from any bank account, whether by EFT or other online payment method, approvals are required by Director to authorise each payment.
- Each payment made must be supported by invoice, receipt or other appropriate documentation and the authorisations must be attached to this documentation prior to payment
- Any variations to banking arrangements can be made or varied by Director who will delegate the responsibility for updating the financial system and/or bank account register with the new information.

Credit cards

The business credit card can only be used for travel, authorised entertainment and purchases of small value expenses or equipment up to the value of \$ 500.

No cash advances are to be taken using the business credit card unless authorised by Director.

Where a business credit card is lost or stolen, then the owner of this card is to notify Director who is responsible for notifying the issuing agency and ensuring the card is cancelled.

The use of the business credit card is not to be used for personal expenses.

All holders of business credit cards are required to attach all receipts for payments made on the credit card. Upon completion and authorisation of the monthly expense statement, these documents are to be forwarded to Director for payment of the credit card statement.

All business credit cards are to be returned to the business when the person is requested to by Director or where they cease employment with the business.

Budget

Aurora Early Intervention and Behavioural Services develops an annual budget with the support of a financial adviser.

The budget will include:

time frames

fixed costs – salaries, rent, insurances and any other known costs

variable costs – utilities, cost of materials, staff wages



income – over budget period

Books of accounts

Aurora Early Intervention and Behavioural Services is responsible for maintaining accounts, assisting the financial adviser in the preparation of the annual budget and for preparing monthly, quarterly and annual financial reports.

Aurora Early Intervention and Behavioural Services or their delegate is responsible for processing all receipts and payments.

Issuing Petty Cash

Petty cash is approved by Director. Each payment made must be supported by invoice, receipt or other appropriate documentation and the authorisations must be attached to this documentation prior to payment before any cash is taken from the petty cash float. Only up to \$50 can be disbursed at any one time.

Once the petty cash is spent, a receipt or invoice should be attached to the voucher and returned to petty cash with any balance of money unspent.

- Petty cash float is to be reconciled with a delegated staff member.

Income

All money received is deposited in our bank account. All monies received are receipted and recorded in the electronic financial system. Unallocated direct deposits of more than one week will be investigated fully to determine source of deposit. Where the source cannot be identified, the deposit will be allocated to a separate bank account until the source is recovered.

Income is matched against invoices to determine when payments have been received and when additional actions are required.

Payments

All payments (except petty cash) are made by electronic transfer. Payments must be accompanied by an invoice and matched against services or equipment received prior to authorisation. Payments are authorised by Director.

Recurrent payments

Recurrent payments, wherever possible, are made electronically. All recurring payments must be approved by Director who will delegate the arrangement for the payment to be authorised by the bank.

Director or their delegate is responsible for carrying out the following duties regarding payment stop on a payment:

- ensuring the payment has not already been made
- getting authorisation to action the stop payment using appropriate forms from the bank
- ensuring the bank receives notification of the stop payment notice
- receiving confirmation of action from the bank of the stop payment
- ensuring the details of the stop payment are kept.



Supplier accounts

When purchases are charged to the accounts of established suppliers the account will be paid in full, upon receipt of the statement or invoice, within the required terms of payment.

Asset register

The Asset Register will list the assets owned by Aurora Early Intervention and Behavioural Services. It will contain pertinent details about each fixed asset to track the value and physical location. The register will show the quantity and value of items such as office equipment, motor vehicles, furniture, computers, communications systems and equipment.

Reconciliations and ATO reports

The following reconciliations and Australian Taxation Office (ATO) reports are completed at the end of each month:

- Bank's accounts are reconciled against bank statements.
- The Instalment Activity Statement is completed and forwarded to the ATO.

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

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

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

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

Audit

Annual acquittal statements and audited financial reports will be forwarded, as per contractual requirements, to the relevant government bodies.

An annual audit is undertaken each year by a qualified external auditor.

Participant fees and payments

Payments and pricing (NDIS)

Aurora Early Intervention and Behavioural Services must adhere to the NDIS Price Guide or any other agency pricing arrangements and guidelines as in force from time to time.

Aurora Early Intervention and Behavioural Services must declare relevant prices, any notice periods or cancellation terms to participants before delivering a service. Participants are not bound to engage the services of Aurora Early Intervention and Behavioural Services once our prices have been disclosed.



Aurora Early Intervention and Behavioural Services can make a payment request once that support is delivered or provided.

No other charges can be added to the cost of the support, including credit card surcharges, or any additional fees including any 'gap' fees, late payment fees or cancellation fees. These requirements apply to all Aurora Early Intervention and Behavioural Services participants whether the participant self-manages their funds or a plan manager or the agency manage it.

A claim for payment is to be submitted within a reasonable time, and no later than sixty (60) days from the end of the service booking to the participant or the NDIS.

Aurora Early Intervention and Behavioural Services will not charge cancellation fees except when provided explicitly in the NDIS Price Guide.

Aurora Early Intervention and Behavioural Services and participants (except for those that are self-managing) cannot contract out of the Price Guide.

Where there are any inconsistencies between the Service Agreement and the NDIS Price Guide, the NDIS Price Guide prevails.

As required, Aurora Early Intervention and Behavioural Services will obtain a quote for services which the participant is required to approve prior to commencement of the service.

Marketing

Market targets

- Participants
- Individuals
- Legal guardians
- Plan managers
- Small organisations that seek reliable support for their participant/s.

Marketing strategy

Contact local networks and communities to provide information about the services we provide.

Work with the community and other coordinating participant services; advise details of services provided and associated fees.

Incorporate community languages into all marketing collateral and on our website.

Provide a single point of contact for enquiries; someone who can provide clear, relevant and accurate information.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.



Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

DELEGATION OF RESPONSIBILITY POLICY AND PROCEDURE

Purpose

Delegations of authority are the mechanisms by which Aurora Early Intervention and Behavioural Services enables the staff of Aurora Early Intervention and Behavioural Services to act on behalf of Aurora Early Intervention and Behavioural Services.

The purpose of this policy is to establish a framework for delegating authority within Aurora Early Intervention and Behavioural Services, in a manner that facilitates efficiency and effectiveness and increases accountability levels of our staff and volunteers' performances.

Delegations are a crucial element in effective governance and management of Aurora Early Intervention and Behavioural Services and provides formal authority to staff and volunteers to commit the organisation and incur liabilities on behalf of the organisation.

Delegations of authority within Aurora Early Intervention and Behavioural Services are intended to achieve four objectives:

1. To ensure the efficiency and effectiveness of the organisation's administrative processes.
2. To ensure that the appropriate officers have been provided with the level of authority necessary to discharge their responsibilities.
3. To ensure that the most suitable and best-informed individuals exercise delegated authority within the organisation.
4. To ensure internal controls are adequate.

Scope

The policy applies to all staff and volunteers of Aurora Early Intervention and Behavioural Services who have delegated authority to act and sign documents on behalf of Aurora Early Intervention and Behavioural Services.

POLICY

This policy sets out the circumstances under which the Director may delegate their responsibilities.

The Director is responsible for the management of the organisation and can delegate any of its functions. However, the Director may not delegate its power to adopt the organisation's:

- strategic plan
- business plan



- annual budget

The Director is:

- charged with the duty of promoting the interests and furthering the development of Aurora Early Intervention and Behavioural Services
- responsible for the administrative, financial, and other business of Aurora Early Intervention and Behavioural Services
- responsible for exercising general supervision over the staff and volunteers of Aurora Early Intervention and Behavioural Services

The Director may delegate any function, power, or duty conferred or imposed upon them, subject to this policy, to any member of the staff of the organisation.

Aurora Early Intervention and Behavioural Services is committed to the highest standards of integrity, fairness and ethical conduct; including full compliance with all relevant legal requirements and, in turn, requires that all managers, staff, volunteers and contractors, acting on its behalf, meet those same standards of integrity, fairness and ethical behaviour, including compliance with all legal requirements.

There is no circumstance under which it is acceptable for Aurora Early Intervention and Behavioural Services or any of its staff or contractors to, knowingly and deliberately, not comply with the law, or to act unethically in the course of performing or advancing Aurora Early Intervention and Behavioural Services 's business.

PROCEDURE

The overarching delegation policy applies to Aurora Early Intervention and Behavioural Services as a whole. Units within the organisation must align their delegation policies with the central strategy. Delegations are to be exercised in a manner to ensure that delegated staff hold the requisite qualifications and skills.

Delegations to the Director

1. Delegations are attached to the position occupied, not to the occupant of the position. The responsibilities of a position appear in a duty statement, role statement, or statement of responsibility appropriate to the position.
2. Delegations reflect Aurora Early Intervention and Behavioural Services's organisational structure. Levels of authority are hierarchical through relevant lines of responsibility, up to and including the Director. Formal authorities held by any delegate are included in those held by that delegate's supervisor or line manager; a delegate who sub-delegates authority remains responsible and accountable for the decision or action.
3. The Director may, at any time, vary or terminate any delegation, subject to confirmation by the Board at its next meeting.
4. A delegation cannot be exercised where the officer holding the delegation has a conflict of interest or where the delegation will result, either directly or indirectly, in any tangible benefit to the delegate. In such cases, a transfer of the function to another appropriate position must be arranged by the Director.



5. Permanent changes to delegations, either permissive or restrictive, require written authority from the Director. The Director must approve any significant variation to the standard delegations.
6. This policy applies only to formal delegations. Delegations of an informal nature, where no commitment or liability is incurred on behalf of Aurora Early Intervention and Behavioural Services, are carried out in the normal business of the organisation without the requirement of a written authority.
7. A staffing delegation can only be actioned by the delegate who holds management responsibility for the individual staff member.

QUALITY MANAGEMENT POLICY

PURPOSE

The Quality Management System has been established to provide focus and direction within an Aurora Early Intervention and Behavioural Services to have a positive impact on operational effectiveness resulting in a high-quality service. The policy is developed to ensure:

The alignment of people and resources is guided by the Mission and Vision.

The alignment of the planning, quality and risk management systems, and their integration into all areas of our operations.

There is a clear focus on the stakeholders, foster collaboration, exchange of 'best practice' and critical self-evaluation.

A whole-of-service approach that reflects our governance and organisational structure with clear responsibilities and accountabilities; and

There is continuous improvement.

SCOPE

The Quality Management Policy supports the development of a quality culture in which all staff assume responsibility for quality and engage in quality management at all levels and areas of the organisation.

It is the responsibility of Director to manage the Quality Management System and to undertake appropriate measures.

It is the responsibility of staff engaged in service delivery to follow our quality policies.

POLICY

Aurora Early Intervention and Behavioural Services recognises the importance of managing a quality system. This policy will give an overview of the systems. (Refer to the policy for the details of the process and the detail of each policy listed). The Quality Management System is designed to support service delivery and ensure that the service meets the requirements under the NDIS Quality Standards and Practice Indicators.

Aurora Early Intervention and Behavioural Services's Quality Management System includes:

Using data gained from complaints and feedback to improve services and procedures (Complaints and Feedback Policy).



Managing the continuous improvement system to determine areas of improvement, including input from:

- Complaints and Feedback Policy and Procedure.
- Risk Management Policy and Procedure.
- Reportable Incident, Accident and Emergency Policy and Procedure.
- Continuous Improvement Policy and Procedure.

Reporting all relevant improvements from the Continuous Improvement Register into management and Corporate Governance processes to inform the management of the service.

Risks highlighted through the Risk Management Policy will be used to reduce hazards and improve practices.

Human resources to include training staff in providing quality support to meet the individual needs of participants, including the register – qualifications, checks, and registers.

Participants are to access to quality services and be able to have input via Complaints and Feedback.

An internal audit schedule has been devised to ensure that our organisation continues to:

- Reviewing legislation that directly affects service provision
- Auditing and reviewing policies and procedures to meet National Disability Insurance Standards, Rules and Guidelines.

Service delivery to meet best-practice standards, including evidence-based, person-centred support plans designed for the individual participant.

Review of policies and procedures combined with feedback strategies allow for quality management of services.

Monitoring the quality plan

● Being Human Support Services will hold regular managerial meetings with relevant stakeholders (may include, but not limited to, managerial staff, staff representative, accountant or bookkeeper, community members).

● Monitoring strategies include a review of the following data:

- a. Participant's risks.
- b. Environmental risks.
- c. Working with participant's risks (work health safety).
- d. Feedback from participants, staff and community.
- e. Complaints from participants, staff and community.
- f. Incidents (both non-reportable and reportable).
- g. Accident information.
- h. Compliance changes (including legal).
- i. Human resources (requirements, vacancies, potential adjustments).
- j. Financial (NDIS income, outgoings).
- k. Technology issues.



- l. Continuous Improvement Register (new and ongoing).
- m. Building maintenance and safety issues.

Managerial meetings will use an agenda which will include the following items:

- a. Financial report
- b. Director's report
- c. Ratification of executive decisions
- d. Funding and compliance
- e. Organisational risk management
- f. Continuous Improvement
- g. Complaints, compliments, concerns
- h. Human Resources (issues, people, planning)
- i. Work health safety risk management
- j. Information management
- k. Incidents (if applicable)
- l. General business

Review

1. Management meetings and input from various sources are used to determine any adjustment to the:

- strategic or business plans
- policies and procedures
- current practices.

2. Review the Continuous Improvement Register to:

- sign off actions
- reallocate responsibilities, if required.

Update

After monitoring and reviewing current information, the Director or their delegate will:

- ensure that staff are trained in new practices
- record training in staff files
- adjust policies and procedures and implement versioning control
- inform participants of changes.



CARE ASSESSMENT AND REVIEW POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure a process that enables the organisation to provide a comprehensive and holistic assessment of each participant, taking into account their current individual needs and circumstances and to negotiate with the participant agreed strategies based on their assessment.

POLICY

The policy ensures Aurora Early Intervention and Behavioural Services's operations are in line with all regulatory requirements.

Aurora Early Intervention and Behavioural Services will work closely with participants when developing strength-based individualised Care Plan which will incorporate participant's needs and preferences (Aged care participants).

Aurora Early Intervention and Behavioural Services will work with participant's families, carers and/or representative and other stakeholders during the planning and assessment and review process (Aged care participants).

PROCEDURES

Aurora Early Intervention and Behavioural Services will discuss participants' rights and responsibilities with participant during assessments, reassessment activities. Aurora Early Intervention and Behavioural Services will confirm participants' understanding verbally, using an interpreter or representative where required.

Aurora Early Intervention and Behavioural Services will provide participants with information on how participants can access a representative who can assist with access to service.

Interpreting and translation services can be accessed if required.

Aurora Early Intervention and Behavioural Services will conduct comprehensive assessment in collaboration with the participant and/or their representative and document the assessment outcomes

Aurora Early Intervention and Behavioural Services will consult with medical practitioners and allied health professionals when required

Assessment will take into consideration available information such as NDIS Plan, ACAS assessments and other existing plans

Participants will be provided with Home Care Agreement/Service Agreement which will consist of Care Plan and Individualised Budget.

The individualised Care Plan will comprehensively reflect the needs of the individual participant.

Aurora Early Intervention and Behavioural Services requires participant and/or authorised representatives to sign the Home Care Agreement/Service Agreement to show they understand and agree to the care and services to be provided

If participant cannot sign the Home Care Agreement/Service Agreement because of any physical incapacity an authorised representative may sign the agreement on behalf of the participant in accordance with relevant legislation.



Aurora Early Intervention and Behavioural Services will contact medical practitioners, allied health professionals and notify next of kin if changes occur in participant needs which impact participant safety

- Aurora Early Intervention and Behavioural Services will ensure interventions are in place to assist the participant where necessary to reach and maintain maximum independence.

Aurora Early Intervention and Behavioural Services will conduct specific assessment and care plan reviews when participant needs change.

Aurora Early Intervention and Behavioural Services will amend interventions in response to assessed changes to needs or events in consultation with the participant and/or their representative.

Aurora Early Intervention and Behavioural Services will review the Care Plan in consultation with the participant and/or their representative at a minimum of three-monthly intervals.

Aurora Early Intervention and Behavioural Services will re-assess participant if significant changes have occurred that require a change in the Care Plan

Aurora Early Intervention and Behavioural Services will adapt or change interventions in response to identified changes that have occurred over the intervening period or at the request of the participant and or their representative, medical practitioner or allied health professional.

Where required Aurora Early Intervention and Behavioural Services will provide referrals and linkages to other services. Documentation relating to participant's assessments will be kept in participant file and stored Aurora Early Intervention and Behavioural Services's Participant Management System.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

PARTICIPANT CASE NOTES POLICY AND PROCEDURE

Purpose and Scope

The purpose of this policy and procedure is to provide staff with set guidelines on how to record case files notes to ensure participant information is recorded in a standardised, timely and accountable manner.

This policy and procedure apply to all staff and meets relevant legislation, regulations and standards as set out in Schedule 1, Legislative References for NDIS Services.

NDIS documents relevant to this policy and procedure:



Privacy and Confidentiality Policy and Procedure
Records and Information Management Policy and Procedure

Definitions

Case note - A 'case note' is the term applied to a chronological record of interactions, observations and actions relating to a particular participant. Case notes are an essential part of a participant's file where staff succinctly record details to document the participant's support services provided by Aurora Early Intervention and Behavioural Services. File notes are a tool for reflecting on a participant's progress towards their goals as identified in their plans, and also represent a record of events on each support session, interaction and event, as well as promote efficient communication between staff.

POLICY

Aurora Early Intervention and Behavioural Services is committed to the transparent and accountable recording of service delivery to participants. The recording of accurate and quality case notes is integral to supporting the following functions of the organisation:

- Recording and Planning Service Delivery.
- Supervision of Staff.
- Legal Accountability.
- Risk Management Planning.
- Participant Support Planning; and
- Participant Support Reviews

PROCEDURES

What to Include in Case Notes:

When recording case files, staff are to ensure the information recorded is related to the following:

- a participant's progress towards goals or values identified on their plan (actions taken, progress made, or barriers identified).
- the participant's significant achievements or changes.
- information relevant to the participant's Risk Management Plan (potential and current risk issues and strategies developed and/or implemented to respond to the identified risk issues).
- appointments attended.
- all communication, including attempts, with other services involved with the participant.
- referrals made.
- group activity participation.



any information given to the participant Aurora Early Intervention and Behavioural Services specific information, health information, etc.).

all informed consent decisions (e.g., “Participant provided consent for staff to discuss low mood with.”).

participant case reviews (outcomes, follow up actions, progress); and

any follow up required.

What to Avoid in Case Notes:

When making case notes, staff are to avoid the following:

emotional reactions.

personal opinions.

value judgements or opinions.

false information; and

unfounded speculations/opinion.

Guidelines

Staff shall be aware that participant files can be subpoenaed at any time and staff can be subject to cross examination in court in relation to the content of their file notes.

All personal information relating to the participant shall be maintained within the participant’s file and subject to the security, confidentiality, access and storage requirements detailed within Aurora Early Intervention and Behavioural Services Records and Information Management Policy and Procedure.

Staff must make notes as soon as possible after the support session, interaction, meeting or event and must reflect the participant’s communication and behaviour, accurately and fairly. Staff will act in accordance with Aurora Early Intervention and Behavioural Services Privacy and Confidentiality Policy and Procedure when managing and recording personal and sensitive participant information.

The Director will ensure appropriate time is allocated for staff to complete case notes at the earliest possible time post support session. If staff find it difficult to complete case notes (due to timing restrictions, access to files, etc.), they are to discuss this with the Director.

Staff must be mindful when recording case notes that participants have the right to request to read their own file notes at any time.

MONITORING AND REVIEW

This policy and procedure will be reviewed at least biennially by the Management Team. Reviews will incorporate staff and other stakeholder feedback.

Feedback collection mechanisms, such as staff and participant satisfaction surveys, will assess:

satisfaction with Aurora Early Intervention and Behavioural Services records and information management and privacy and confidentiality processes.



whether stakeholders have received adequate information about privacy and confidentiality including how their records will be stored and disposed of and how they can access and change them; and the extent to which participants and their supporters feel their privacy and confidentiality has been protected.

Aurora Early Intervention and Behavioural Services Continuous Improvement Register will be used to record identified improvements and monitor the progress of their implementation. Where relevant, this information will be fed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

CONSENT POLICY AND PROCEDURE

Purpose

Aurora Early Intervention and Behavioural Services must gain consent from the participant before sharing any information with family, advocates, other providers and government bodies.

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

Scope

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

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

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

Implied consent is adequate for most of the support provided by the organisation.

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

Written consent should be gained for the use of an advocate or to share information. by both the participant and the healthcare professional. Note: Participants automatically opt-in and must be asked to opt-out during NDIS audit requirements.

Photography: Written consent will be obtained from any participant having their photograph taken.

POLICY



Aurora Early Intervention and Behavioural Services recognises the importance of maintaining the privacy and confidentiality of all participants. There are times when it is essential to share information with other parties, such as government bodies and other service providers.

Aurora Early Intervention and Behavioural Services will not give any information to person or authority without the participant's consent unless the disclosure is a legal requirement.

Aurora Early Intervention and Behavioural Services will inform all participants (upon entry into the service) about their rights to privacy and confidentiality.

Aurora Early Intervention and Behavioural Services will notify all participants that they have an opt-out option if their information is requested for audit purposes.

GUIDING PRINCIPLES

People have the right to make decisions about things that affect their lives.

People are presumed to have the capacity to make their own decisions and give consent when it is required unless there is evidence otherwise.

People are supported to make informed decisions when their consent is required.

Consent is obtained from the person, or a legally appointed guardian, for life decisions such as accommodation, medical treatment, forensic procedures, and behaviour support.

Consent for financial matters is obtained from the person, or a legally appointed financial manager or the person appointed under a Power of Attorney.

People are supported to identify opportunities to make decisions about their own lives and to build their decision-making confidence and skills.

When support to make decisions is wanted or needed by the person, it is provided in ways preferred by the person and by a supporter of their choice.

Support with decision-making respects the person's cultural, religious and other beliefs.

If the person wants to be supported by natural supporters, such as family and friends, this is encouraged and facilitated.

Support is provided in ways that uphold the person's right to self-determination, privacy, and freedom from abuse and neglect.

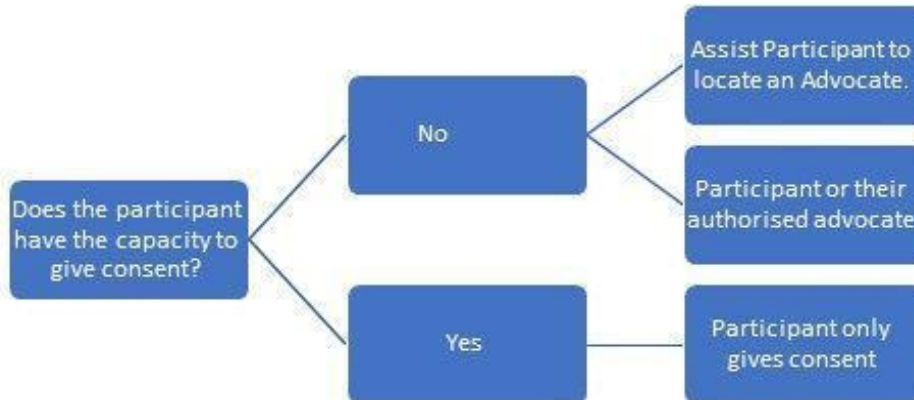
Decision-making and self-determination are not limited by the interests, beliefs or values of those providing the decision-making support.

The amount or type of support required by people to make decisions will depend on the specific decision or the situation.

People are supported to make decisions that affect their own lives even if other people don't agree with them or regard the decisions as risky.

People are supported to access opportunities for meaningful participation and active inclusion in their community where they want this.

Information is provided in formats that everyone can understand, and enables the person, their supporters and other relevant people, such as legally appointed guardians, to communicate effectively with each other.



PROCEDURE

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

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



SUCCESSION PLANNING POLICY AND PROCEDURE

The purpose of this policy and procedure is to set out Aurora Early Intervention and Behavioural Services system for ensuring it is able to continue operating effectively and meet the business' Mission and objectives when key personnel vacate their position.

Definitions

Key personnel - a member of the group of people responsible for the executive decisions of a business or any other person who has authority or responsibility for (or significant influence over) planning, directing or controlling the activities of the business. A person who is responsible for the executive decisions of a business includes a member of the business' governing body, including a body corporate that is incorporated, or taken to be incorporated, under the Corporations Act 2001 (Cth).



POLICY

Aurora Early Intervention and Behavioural Services conducts succession planning that identifies current and future workforce needs, as well as specific replacement strategies for key personnel.

PROCEDURES

- Implement sound corporate governance including budgeting processes and regular audits.
- To develop a sustainable workforce for Aurora Early Intervention and Behavioural Services, its Management Team must develop and continuously review a Succession Plan for all key personnel.
- Aurora Early Intervention and Behavioural Services Succession Plan must assess key personnel positions, both now and for the future; objectively identify high potential internal candidates; and develop strategies to ensure continuity for key personnel positions.
- The Succession Plan should align with Aurora Early Intervention and Behavioural Services Strategic and Operational Plans and consider Aurora Early Intervention and Behavioural Services's future direction, continuity risks or areas where significant disruption may be experienced if key staff leave; age profiles and retirement plans of key personnel; and performance assessments of key personnel.
- The Management Team will formally review and update the Succession Plan each financial year and at times of significant and unanticipated change.
- Operational Plans are reviewed at monthly Management Team meetings as well as at performance reviews for Management Team members.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

COMPLIANCE POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure that Aurora Early Intervention and Behavioural Services complies with the range of legislative, regulatory and contractual requirements that apply to its operations and keeps abreast of changes to these requirements. This policy and procedure apply to all Aurora Early Intervention and Behavioural Services staff and meets relevant legislation, regulations and standards

Definitions



1. Commissioner of the NDIS Quality and Safeguard Commission (NDIS Commissioner) – the person who leads the NDIS Commission.
2. Approved Quality Auditor – a person or body approved by the NDIS Commissioner to be an approved quality auditor for the purposes of the NDIS Act 2013 (Cth).
3. Banning Order – a written notice provided by the NDIS Commissioner to an NDIS provider or person employed or engaged by an NDIS provider, prohibiting them from certain activities. A banning order may apply generally or be of limited application. It may also be permanent or for a specified period.
4. Certification – an assessment by an approved quality auditor of an applicant, or of a registered NDIS provider, against an applicable standard (such as the NDIS Practice Standards) by conducting:
 - A desk audit of the applicant or provider, including reviewing the applicant’s or provider’s relevant documentation, in relation to the standard.
 - An inspection of the sites, facilities, equipment and services used, or proposed to be used, in the delivery of supports or services by the applicant or provider in relation to the standard; and
 - Interviews with relevant persons, including key personnel of the applicant or provider and persons receiving, or to receive, supports or services from the applicant or provider in relation to the standard.
5. Compliance Notice – a written notice provided to an NDIS provider by the NDIS Commissioner if the NDIS provider is not complying with the *NDIS Act 2013 (Cth)*. Failure to comply with a Compliance Notice will result in a civil penalty (fine) and may lead to the provider’s registration being suspended or revoked.
6. Enforceable Undertaking – in the context of the NDIS and this Policy and Procedure, an agreement made between the NDIS Commission and a registered NDIS Provider that is legally binding and enforceable in a court. In these circumstances, the commitment would relate to activities the provider has agreed to undertake to address or rectify compliance issues.
7. NDIS Code of Conduct – a code of conduct that applies to NDIS providers and the people employed or otherwise engaged by NDIS providers, regardless of whether they are registered. The NDIS Code of Conduct supports the rights of people with disability in the NDIS to have access to safe and ethical supports and reflects the core values and principles set out in the National Standards for Disability Services, the National Mental Health Standards and the *NDIS Act 2013 (Cth)*.
8. NDIS Practice Standards - standards concerning the quality of supports or services to be provided by registered NDIS providers. Non-compliance with the NDIS Practice Standards by registered NDIS providers constitutes a breach of registration.
9. NDIS Provider Register – a register kept by the NDIS Commission containing the details of all registered NDIS providers. It includes:
 - business details, including contact person, ABN and contact details.
 - the approved registration period.
 - the classes of supports or services the business is registered to provide.
 - the classes of people the business is registered to support.
 - any conditions placed on the registration.
 - details of any previous or current suspension.
 - details of any previous or current banning order.
 - information about any previous or current compliance notices in force; and



- information about any enforceable undertaking the business has committed to.

The NDIS Provider Register may also include information about unregistered NDIS providers or NDIS providers who have had their registration revoked, as well as any other information that it is relevant to the provision of supports or services to people with disability

10. NDIS Quality and Safeguard Commission (NDIS Commission) – an independent body that regulates the NDIS market and supports the high quality and safe delivery of NDIS supports and services. It is responsible for:
 - registration and regulation of NDIS providers.
 - compliance monitoring, investigation and enforcement action.
 - responding to concerns, complaints and reportable incidents, including abuse and neglect of a person with disability.
 - national oversight of behaviour support, including monitoring the use and reduction of restrictive practices within the NDIS; and
 - leading collaboration with states and territories to design and implement nationally consistent NDIS worker screening processes.
11. Revocation – a written notice removing the registration of a person as a registered NDIS provider due to the reasons outlined in the definitions above. The Commissioner may also revoke the registration of a registered NDIS provider upon written request from the provider.
12. Suspension – The NDIS Commissioner may suspend the registration of a registered NDIS provider for a specified period. The Commissioner may also suspend the registration of a registered NDIS provider upon written request from the provider. While suspended, registration ceases to have effect. A Suspension may be enforced if the provider is not complying with the *NDIS Act 2013 (Cth)*, their registration application contained false or misleading information, where they or their key personnel are considered unsuitable to provide services to people with disability or if they become an insolvent under administration.
13. Verification – an assessment by an approved quality auditor of an applicant, or of a registered NDIS provider, against an applicable standard by conducting a desk audit of the applicant or provider, including reviewing the applicant's or provider's relevant documentation, in relation to the standard.

POLICY

Aurora Early Intervention and Behavioural Services is committed to maintaining compliance with all relevant regulatory, legislative and contractual requirements.

Aurora Early Intervention and Behavioural Services acknowledges that its Director(s) and the Management Team are ultimately responsible for ensuring that the service remains compliant.

Aurora Early Intervention and Behavioural Services will comply with all requirements set down by the state and Federal governments.

Aurora Early Intervention and Behavioural Services will comply with the NDIS Code of Conduct.

PROCEDURES



To maintain its NDIS provider registration Aurora Early Intervention and Behavioural Services must:
 comply with all applicable requirements imposed by a law of the Commonwealth or a law of the State or Territory in which it operates as a registered NDIS provider.

comply with all applicable requirements of the NDIS Code of Conduct.

comply with all applicable standards and other requirements of the NDIS Practice Standards.

comply with all applicable requirements relating to record keeping required by the NDIS Rules.

implement and maintain a complaints management and resolution system that complies with the NDIS Rules.

implement and maintain an incident management system and comply with all applicable requirements relating to reportable incidents under the NDIS Rules; and

if requested, give information to the Commissioner of the NDIS Quality and Safeguards Commission within the period specified in the request.

Aurora Early Intervention and Behavioural Services must also comply with any conditions specified in its NDIS Certificate of Registration, or imposed by the NDIS Quality and Safeguard Commission at a later time, such as:
 the types of quality audits it must undergo.

the timing of such quality audits; and

requirements relating to supports or services for which it is registered to provide, including circumstances in which supports, or services can or cannot be provided.

Aurora Early Intervention and Behavioural Services must notify the NDIS Commission of a change of circumstances that materially affects its suitability, or the suitability of any of its key personnel, to provide the supports or services it is registered to provide. The change must be notified to the Commissioner within 28 days of the change occurring on the form approved by the Commissioner. Changes of circumstances include:

event that significantly affects Aurora Early Intervention and Behavioural Services's ability to comply with its conditions of registration.

- a change that adversely affects access to supports or services by people with disability currently receiving those supports or services from Aurora Early Intervention and Behavioural Services.
 an adverse change in Aurora Early Intervention and Behavioural Services's financial capacity to provide the supports or services it is registered to provide; and
 a significant change in Aurora Early Intervention and Behavioural Services's organisation or governance arrangements.

Management Team members are responsible for:

supporting ongoing compliance in all areas of Aurora Early Intervention and Behavioural Services operations.

ensuring staff understand their compliance responsibilities; and

fostering a compliance culture within their area of responsibility.

Aurora Early Intervention and Behavioural Services may request that the NDIS Commissioner make a correction to the NDIS Provider Register, using the approved form, if it becomes aware that the Register contains incorrect information.

Aurora Early Intervention and Behavioural Services's Compliance Coordinator and Operations Manager will report on compliance issues to the Management Team on a monthly basis, and these will be tracked by the Operations Manager in Aurora Early Intervention and Behavioural Services Compliance Register.

All staff are responsible for managing compliance within their areas of influence.



The Management Team must monitor changes to legislation and regulatory compliance requirements through, for example, ongoing contact with relevant government agencies, scanning relevant websites for updates, membership of peak organisations and internal audits. All staff are to be made aware of any relevant changes as soon as possible.

Reporting Compliance Failure

Aurora Early Intervention and Behavioural Services encourages proactive reporting of compliance failures, breaches, issues, incidents and complaints so that these matters can be rectified openly and in a timely manner.

All staff must notify their immediate supervisor or the Operations Manager once they become aware that a compliance failure has occurred or is likely to occur, or that a compliance-related complaint has been made. The Operations Manager must address identified compliance failures or compliance-related complaints upon becoming aware of them, in order to re-establish compliance and provide protection to Aurora Early Intervention and Behavioural Services as quickly as possible.

All compliance failures or compliance-related complaints must be reported to the Compliance Operations Manager, who will track them in the Compliance Register and report them to the Management Team.

As a NDIA Registered NDIS Provider, Aurora Early Intervention and Behavioural Services must comply with the NDIS Terms of Business for Registered Providers and the NDIS Provider Registration Guide to Suitability. Aurora Early Intervention and Behavioural Services will assess its compliance with these documents as part of its annual self-assessment against the NDIS Practice Standards. =

Aurora Early Intervention and Behavioural Services must comply with the following NDIS Practice Standards, set out in Schedules to the NDIS (Provider Registration and Practice Standards) Rules 2018.

NDIS CODE OF CONDUCT

In providing supports or services to people with disability, Aurora Early Intervention and Behavioural Services and its staff will:

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

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and



practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

CONTINUOUS IMPROVEMENT POLICY AND PROCEDURE

Aurora Early Intervention and Behavioural Services will pursue continuous improvement in all aspects of service management so that its operations are in line with legislation and relevant standards and compliance requirements through an ongoing cycle of review and evaluation of processes and procedures.

POLICY

Aurora Early Intervention and Behavioural Services pursue innovation and promote culture of continuous improvement in its corporate governance service delivery to participants.

Aurora Early Intervention and Behavioural Services will include all stakeholders including participants and staff in its continuous improvement activities to ensure participants' needs are met effectively.

PROCEDURES

Aurora Early Intervention and Behavioural Services puts the participant at the centre of decision-making in all aspects of their life and support participants to actively participate in their community and pursue their interests and goals.

Aurora Early Intervention and Behavioural Services encourages innovation and participation in its service.

Aurora Early Intervention and Behavioural Services provides opportunities for ongoing staff education and professional development.

Aurora Early Intervention and Behavioural Services will develop a Continuous Quality Improvement Plan and report on this regularly at staff and participant meetings.

Aurora Early Intervention and Behavioural Services will encourage participant, staff and stakeholder feedback and document and act on feedback.

Aurora Early Intervention and Behavioural Services will review its complaints register regularly as part of its continuous improvement activities to ensure participants' needs are met effectively.

Aurora Early Intervention and Behavioural Services will drive continuous improvement through regular surveys, meetings and audits.

Aurora Early Intervention and Behavioural Services staff are encouraged to participate in developing strategies for ongoing improvements.

Establish and maintain an effective information system for continuous improvement.

Aurora Early Intervention and Behavioural Services will identify opportunities for improvement and evaluate accidents, incidents or emergencies to minimise risks and improve service.

Aurora Early Intervention and Behavioural Services will include staff, participants and other relevant stakeholders in continuous improvement activities to ensure services are of a high quality and meet participant needs.



Aurora Early Intervention and Behavioural Services will provide feedback on to stakeholders including participants and staff on service improvements.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

RISK MANAGEMENT POLICY AND PROCEDURE

The purpose of this policy and procedure is to eliminate or minimise risk for participants and staff by establishing an effective risk management framework. This policy and procedure apply to all staff, contractors and volunteers.

Definitions

1. **Risk** – any internal or external situation or event that has the potential to have a negative impact by causing harm to people associated with the organisation, preventing the organisation from successfully achieving its outcomes and delivering its services, reducing the organisation’s viability or damaging its reputation. From a Risk Management perspective, risk is the combination of the likelihood (chance) of an event occurring and the consequences (impact) if it does.
2. **Managed Risk** – the level of risk remaining after risk treatment plans have been put in place and are being followed
3. **Unmanaged Risk** – The level of risk before any action has been taken to manage it.
4. **Risk Analysis** – the process to understand the nature, sources and causes of risks to determine the degree of risk. The degree and consequences of risk together inform risk evaluation and decisions about risk treatment.
5. **Risk Assessment** – the overall process for identifying, analysing and evaluating risks. Risk assessments assist in determining what levels of harm can occur; how harm can occur; and the likelihood that harm will occur.
6. **Risk Evaluation** – The process of determining whether a risk is tolerable or whether it requires ‘risk treatment’
7. **Risk Identification** – the process of finding, recognising and describing risks.
8. **Risk Treatment** – a measure, work process or system used to eliminate a risk, or if this is not possible, reduce the risk so far as is reasonably practicable. Options include:
 - Avoiding the Risk – where the level of risk is unacceptable, and the means of risk control are either not viable or not worthwhile or not actionable, risk could be eliminated by not proceeding with the activity that could generate the risk.
 - Changing the Risk Consequence – undertake actions aimed at reducing the impact of the risk.
 - Changing the Risk Likelihood – undertake actions aimed at reducing the probability of the risk occurring.
 - Retaining or Accepting the Risk – Accept the risk as it is. This is appropriate where the rating of a risk is sufficient to justify other potential risk treatment options, or when it is not possible or uneconomic to treat the risk, or when the risk level is tolerable.



Sharing the Risk – Responsibility for treating the risk can be transferred or allocated to other parties best able to manage it. For example, using insurers.

POLICY

Aurora Early Intervention and Behavioural Services is committed to identifying and managing all types of organisational risks, including compliance and Workplace Health Safety.

Aurora Early Intervention and Behavioural Services will provide staff with relevant safety equipment to assist them in their roles.

Aurora Early Intervention and Behavioural Services is committed to providing training to its staff in Workplace Health Safety (WH&S) and provide guidelines for their work in participant homes and the wider community.

Aurora Early Intervention and Behavioural Services's approach to risk management, including its Risk Management Model and Principles, is aligned with Australian and New Zealand Standard AS/NZS 31000:2009 (Risk Management Principles and Guidelines).

PROCEDURES

Aurora Early Intervention and Behavioural Services's Risk Management Model consists of the following steps:

Identify: Identify the risk events that may prevent or delay the achievement of Company's strategic goals and objectives.

Analyse: Outline the causes, impacts and existing treatments in order to assess the consequence and likelihood of the risk and determine the risk rating.

Treat: Implement existing and future treatments to prevent or mitigate the risk.

Monitor: Continually monitor and evaluate the risks and treatments to maintain the effectiveness and appropriateness of Company's risk management.

Report: Provide regular reports and updates in order to assure Company and its stakeholders that risks are being appropriately managed and treated.

- Management Team is responsible for monitoring and reviewing the organisation's risk management practices.
- Management Team members will develop, implement and monitor Risk Management Plans and Risk Treatment Plans for the following:
 - Child Safety and promoting a Child Safe Environment.
 - Incident Management.
 - Complaints Management.
 - Work Health and Safety, including with respect to Aurora Early Intervention and Behavioural Services's supported independent living services.
 - Human Resource Management.
 - Financial Management.
 - Information Management; and
 - Governance.



Aurora Early Intervention and Behavioural Services will educate staff in Workplace Health Safety (WHS) and provide guidelines for their work in participant homes and the wider community.

Aurora Early Intervention and Behavioural Services will provide staff with relevant safety equipment (PPE) to assist them in their roles.

Aurora Early Intervention and Behavioural Services will provide staff with information about personal safety, driver safety, universal precautions, infection control, cultural awareness and behaviour management.

Aurora Early Intervention and Behavioural Services will ensure all equipment is fit-for-use and electrical equipment is tested and tagged.

Aurora Early Intervention and Behavioural Services will provide compulsory yearly manual handling education for staff.

Aurora Early Intervention and Behavioural Services will provide induction to staff on risk management and the importance of being aware of their surroundings.

Staff are responsible for managing risk within their areas of work.

Aurora Early Intervention and Behavioural Services will review its Risk Management Plans on a monthly basis and report on risks relevant to their areas of influence to the Management Team.

Identified risks will be tracked by the designated personnel using the Risk Register.

Aurora Early Intervention and Behavioural Services will foster a risk “awareness culture” by including risk awareness and identification on staff meetings.

Risks to children

Children with a disability or developmental delay are at higher risk than other children of harm, abuse and neglect.

Staff must recognise that children are less likely to tell adults when they don't feel safe and, while their behaviour may change, others may not read these changes as a sign something is wrong. As such, staff must proactively look to prevent and identify risks to a child's safety and wellbeing at all stages of service delivery.

Participant Risk Assessments

A Participant Risk Assessment must be undertaken for all participants at their initial assessment and reviewed during formal Support Plan reviews. Participant Risk Assessments must also be reviewed every three months or sooner if there are changes to the person's environment or existing risk, or if new risks emerge. Where supports are to be provided in a participant's home, the Participant Risk Assessment must include a Home Risk Assessment (see Work Health and Safety Policy and Procedure).

The purpose of a Home Risk Assessment is to identify potential hazards in the participant's home and put appropriate controls in place to reduce the risk of injury or illness for staff, the participant, carers and other workers. This must be done in collaboration with the participants, their families and/or landlords.

As part of both risk assessment processes, staff must identify potential control measures which should become part of the participant's Support Plan. If either assessment shows that staff would be exposed to significant risks, the Operations Manager must determine if supports should be modified or suspended until the risk has been adequately controlled.

Participant Risk Assessments and reviews must be undertaken in collaboration with participants, their supporters and any other stakeholders involved in managing a specific risk. If the participant is a child, assessments and reviews should be undertaken in collaboration with the participant's family. Enabling the person to achieve their lifestyle goals and their ability to have greater choice and control, more opportunity to try new things and develop skills must be considered. Risk assessments must also



consider any incident reports that relate to the participant and whether specialist positive behaviour support arrangements should be put in place or changed.

Staff should raise any issues or concerns regarding Participant Risk Assessments with Compliance Coordinator or Case Manager, and significant risks should be escalated to the Operations Manager or the Director. Participant Risk Assessments and reviews must be kept on participant records.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

WORKPLACE HEALTH AND SAFETY POLICY AND PROCEDURE

The purpose of this policy and procedure is to demonstrate that the organisations commitment to providing workplace that is safe and minimize risks to employees and participants by encouraging all employees and Management to take fair and reasonable means to ensure safe work practices.

Definitions

Duty of Care – A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonably foreseeable risk of injury. In the context of this policy, duty of care refers to the responsibility of Aurora Early Intervention and Behavioural Services staff to provide participants, students, volunteers, contractors and anyone visiting the service with an adequate level of care and protection against reasonably foreseeable harm and injury.

Safety Data Sheet (SDS) – Provides staff and emergency personnel with safety procedures for working with toxic or dangerous materials. The safety data sheet includes all relevant information about the material such as physical properties (e.g., melting/boiling point, toxicity and reactivity), health effects, first aid requirements and safe handling procedures (e.g., personal protective equipment, safe storage/disposal and management of spills).

Workplace – any place where work is carried out on behalf of Aurora Early Intervention and Behavioural Services.

POLICY

The health and safety of staff and participants is of paramount importance to Aurora Early Intervention and Behavioural Services.

Workplace Health and Safety is the responsibility of all Aurora Early Intervention and Behavioural Services stakeholders including management staff, employees, volunteers, contractors, participants, families, carers and visitors.



If services are delivered in participants' homes, participants must provide a safe and health working environment for Aurora Early Intervention and Behavioural Services's staff.

Aurora Early Intervention and Behavioural Services will take steps to ensure the health, safety and wellbeing of employees, participants and their representatives, volunteers, contractors and visitors.

Aurora Early Intervention and Behavioural Services employees and volunteers are not expected to carry out work that is unsafe.

PROCEDURES

Aurora Early Intervention and Behavioural Services will develop best practice working routines, instructions, procedures, processes and systems that minimize reduce or remove risks for staff and participants

Aurora Early Intervention and Behavioural Services will provide protective clothing and equipment (PPE) as required, to protect employees.

Aurora Early Intervention and Behavioural Services will consult about and endeavour to continuously improve, safety measures.

Aurora Early Intervention and Behavioural Services staff complete risk assessments before commencing work in a participant's home.

Aurora Early Intervention and Behavioural Services provides staff with annual emergency training.

Aurora Early Intervention and Behavioural Services maintains a system of hazard identification and outcomes with the aim to reduce hazards.

Aurora Early Intervention and Behavioural Services will provide manual handling as mandatory yearly training for staff. Workplace Health Safety are reported to the appointed manager.

Management will address or respond to WH&S issues or nominate a suitable staff representative to do so.

Aurora Early Intervention and Behavioural Services will track issues progress and outcomes in Workplace Health Safety Improvement Register and.

Workplace Health Safety matters are to be reported to the Management Team monthly bases.

Upon commencement, all staff will undergo Induction, which will include general and task specific WH&S training where appropriate.

The Management Team is responsible for ensuring the company meets its obligations under WH&S legislations.

Management Team Responsibilities

Management Team will be vigilant in ensuring that each employee is safe from injury and risks to health while at work by actioning the following:

Provide and maintain a safe working environment.

Provide adequate facilities.

Provide instruction, orientation and training.

Monitor working conditions including home safety assessments.

Monitor health and safety of employees (review any injuries).

Keep records of any work-related injuries.

Identify hazards and potential risks and minimise or eliminate where possible.



- Develop, implement and regularly review WHS procedures and policies.
- Consult regularly with employees and have WHS as a mandatory part of all meetings.
- Be aware of and always follow, the WHS Act.
- Ensure WHS policies and procedures are followed.
- Ensure any risks or potential risks are identified, assessed and controlled.
- Provide employees with a thorough induction and information, instruction and ongoing training and supervision to ensure all work is carried out safely.
- Provide contractors with relevant information to safely carry out their work and to comply with the Company WHS responsibilities.

Staff Responsibilities

- Take reasonable care to protect own health and safety
- Use equipment provided by Company to protect own and participant health, safety and wellbeing
- Follow the company's health and safety instructions and procedures
- Do not be affected by drugs or alcohol at work
- Report hazards and incidents/injuries to Management immediately
- Be aware of and follow Workplace Health & Safety Act.

Responsibilities of contractors, participants, families and representatives

- Be familiar with this policy.
- Report hazards or incidents immediately to Management to enable effective control and management of any problems.
- Public liability insurance to cover any injuries they cause to their participants and/or the public (contractors)
- Cooperate with reasonable WHS rules and practices implemented by Aurora Early Intervention and Behavioural Services.
- Not act recklessly or placing the health and safety of others at risk.
- Ensure their actions or failure to act do not put themselves or Aurora Early Intervention and Behavioural Services's staff at risk.
- If services are delivered in participants' homes, participants must provide a safe and health working environment for Aurora Early Intervention and Behavioural Services's staff.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.



INFORMATION MANAGEMENT POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure Aurora Early Intervention and Behavioural Services has effective management of information and records.

Definitions

1. **Information** – knowledge communicated or received. It is the result of processing, gathering, manipulating and organising data in a way that adds to the knowledge of the receiver.
2. **Information management** – a system for creating, producing, collecting, organising, storing, retrieving and disseminating information that may be in any format and available from internal or external sources.
3. **Record** – recorded information in any form (including data in a computer system) that is required to be kept as evidence of the activities or operations of the organisation.
4. **Records management** – the efficient and systematic control of the creation, receipt, maintenance, use and disposal of records, including processes for capturing and maintaining evidence of and information about business activities and transactions in the form of records.

POLICY

Aurora Early Intervention and Behavioural Services is committed to having effective records management system to support its participant services operations.

Good recordkeeping practices underpins Aurora Early Intervention and Behavioural Services's day-to-day business operations.

Aurora Early Intervention and Behavioural Services is committed to establishing and maintaining information and records management practices that meet its business needs, legislative and accountability requirements and stakeholder expectations.

Aurora Early Intervention and Behavioural Services is committed to protecting against loss or misuse of the personal information and data.

PROCEDURES

Staff have access to participant information held in files on a 'need to know' basis, and only for the purposes for which it was provided such as to provide disability or aged care services to an individual.

Access to information should be provided to authorised staff for legitimate business purposes only e.g., where the information is necessary for staff to perform their role.

Information is to be treated in the strictest of confidence and is not to be divulged unless for legitimate and legally permissible purposes, in accordance with relevant legislation and standards.

Use of records by staff is monitored and file audits are undertaken to ensure files are complete, up-to-date, and procedures are being followed.

Information or any form of media relating to Aurora Early Intervention and Behavioural Services's work cannot to be taken from the premises without the prior permission of the Management Team.



Electronic records are stored securely with back up and disaster recovery systems in place. The greatest level of care is taken for participant-related records.

Aurora Early Intervention and Behavioural Services's electronic data, including email data, is securely stored on a cloud server, which is protected and backed up.

Aurora Early Intervention and Behavioural Services uses electronic participant management and financial management systems for the capture and storage of specific information and records.

Participant management and financial management systems are password protected and restricted to approved personnel.

Corporate records must not be maintained in email folders, shared folders, personal drives or external storage media as these lack the necessary functionality to protect business information.

Where required, records should be moved securely in a non-transparent container.

Hard copy files are kept in locked filing cabinets in secure, lockable areas with access limited only to authorised staff.

Hard copy files are kept in secure location that are regularly maintained and cleaned.

Staff are expected to lock unattended computers and maintain a 'clean desk' policy.

Regular physical access and digital access internal audits will be undertaken.

Aurora Early Intervention and Behavioural Services will retain records relating to the provision of aged care services in accordance with the Record Principles 2014.

When information is no longer needed for the purpose for which it was obtained, Aurora Early Intervention and Behavioural Services must take reasonable steps to destroy or permanently de-identify it.

As a registered NDIS provider, Aurora Early Intervention and Behavioural Services must keep records relating to service delivery for 7 years from the date they were created.

Once information can be destroyed it is placed in a secure bag to be collected by a secure destruction service provider for shredding.

Staff must maintain the physical privacy of personal information and organisational records in accordance with state and Commonwealth legislation.

The use and storage of consent and release forms must be used the collection and release of information.

Company will provide participants and government agencies access to records in accordance with any applicable legislation, including Freedom of Information legislation.

Aurora Early Intervention and Behavioural Services will comply with The Notifiable Data Breaches (NDB) Scheme, which requires entities to notify affected individuals and the Commissioner of certain data breaches.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.



PROVIDING INFORMATION AND REFERRAL POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure Aurora Early Intervention and Behavioural Services provide participants and other stakeholders with accurate information in order for participants to access services most appropriate to their needs.

POLICY

Aurora Early Intervention and Behavioural Services will collaborate with other service providers which enhances its own service delivery and provides its participants with appropriate referrals and services that meet their needs

Aurora Early Intervention and Behavioural Services's will inform the community, participants and other services providers about its services and access requirements.

Aurora Early Intervention and Behavioural Services will encourage and facilitate participant and stakeholder participation in services.

PROCEDURES

Aurora Early Intervention and Behavioural Services will build relationships with local agencies, health services and advocacy services and participate in relevant local networks including conferences to increase service and referral options for its participants and other stakeholders.

Aurora Early Intervention and Behavioural Services will work with local Aboriginal and Torres Strait Islander and CALD service providers to assist culturally sensitive service delivery to participants.

Aurora Early Intervention and Behavioural Services will work with participants exiting the criminal justice system.

Aurora Early Intervention and Behavioural Services will build relationships with local agencies and advocacy services and participate in relevant local networks including conferences to increase service and referral options for its participants existing the criminal justice system.

Aurora Early Intervention and Behavioural Services will distribute marketing information about its services in appropriate formats to local community and other relevant agencies.

Management will ensure Aurora Early Intervention and Behavioural Services is listed on relevant directories including NDIS and my aged care website.

Aurora Early Intervention and Behavioural Services will maintain an informational brochure in appropriate formats on its services and distributes to community when appropriate.

Management team will review Aurora Early Intervention and Behavioural Services's participation in service and referral networks annually.

Referrals and requests for services will be handled in accordance with Aurora Early Intervention and Behavioural Services's Service Access Policy and Procedure.

Aurora Early Intervention and Behavioural Services will maintain a Referrals Database.

- Aurora Early Intervention and Behavioural Services will work with participants refused service or participants leaving Aurora Early Intervention and Behavioural Services and identify alternative service providers and will provide support with referral to other service providers.
- Staff providing referrals will take into consideration participants' needs and personal circumstances.



- Staff will acknowledge and address any concerns participant may have and explain the reasons why a particular referral has been made.
- Staff will be provided with training and professional development on handling referrals.
- If there's more than one service that may assist a participant, staff will provide the participant with information about the range of services available and give them the choice over which particular service they wish to use.
- If participant is not satisfied with referrals provided by Aurora Early Intervention and Behavioural Services, they will be directed to complaints and feedback processes.
- Continuous Improvement Plan will be used to record and monitor progress of any improvements identified with the referral process.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

FINANCIAL MANAGEMENT POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure that the organisation maintains sound financial management and accounting principles. This policy and procedure also set out Aurora Early Intervention and Behavioural Services NDIS-specific financial management arrangements.

Definitions

1. **Assets** - non-consumable items of tangible property (including fixtures) that have a service life greater than one year. Assets can include, but not limited to non-medical equipment; equipment or aids to support participants; electronic equipment (such as computers); furniture; and motor vehicles.
2. **Corruption** – dishonest activity in which an executive manager, manager, staff member or contractor of an entity acts contrary to the interests of the entity and abuses his/her position of trust in order to achieve some personal gain or advantage for him or herself or for another person or entity.
3. **Fraud** – dishonest activity causing actual or potential financial loss to any person or entity including theft of money or other property by staff or people external to the entity and where deception is used at the time, immediately before or immediately following the activity. This also includes the deliberate falsification, concealment, destruction or use of falsified documentation used or intended for use for a non-business purpose or the improper use of information or position for financial benefit.

POLICY



Aurora Early Intervention and Behavioural Services will have an open and transparent accounting systems.

Aurora Early Intervention and Behavioural Services will prepare financial statements according to the Australian Accounting Standards.

Aurora Early Intervention and Behavioural Services is committed to having its accounts and records audited in accordance with Australian Auditing Standards.

Aurora Early Intervention and Behavioural Services will implement financial processes that support participants to avoid or limit their debts to Aurora Early Intervention and Behavioural Services.

Aurora Early Intervention and Behavioural Services manage participants who are debtors to assure Aurora Early Intervention and Behavioural Services's financial sustainability; and comply with the NDIS Terms of Business for Registered Providers and the NDIS Price Guide, including: prohibition on advance payments for Agency Managed plans; prohibition of late payment fees, and processes for withdrawal or termination of services.

PROCEDURES

Aurora Early Intervention and Behavioural Services will use an electronic financial management system to support Company's financial management.

Aurora Early Intervention and Behavioural Services will comply with the Australian Accounting Standards issued by the Australian Accounting Standards Board.

All monies received by the organisation are to be recorded.

Aurora Early Intervention and Behavioural Services will monitor financial position of the organisation to minimise the risk and to ensure that expenditure complies with the budget.

The Director is responsible for the delegation of expenditure.

Access to Bank Accounts and EFT transfers is restricted to the Director and its password protected.

Receipts for all expenditure are provided to and retained by the Director.

The Directors/Senior Management will authorise and make reimbursement payments for staff work related expenses.

Assets owned by Aurora Early Intervention and Behavioural Services will be recorded in Company's Asset Register.

Sold assets or otherwise disposed of will be recorded in Company's financial records and recorded in the Asset Register.

Aurora Early Intervention and Behavioural Services's management team will prepare an annual budget for Company.

Aurora Early Intervention and Behavioural Services's management team will prepare a quarterly report of expenditure against the budget.

Aurora Early Intervention and Behavioural Services's management team will prepare Financial Statements for submission to funding bodies as required.

The Financial Report will include:

Profit & Loss year to date.

Balance Sheet for the year to date.

- General Ledger for the year to date; and
Budget vs. Actual for the year to date.

Management team will conduct a financial reconciliation annually in consultation with the independent accountant and prepare a Financial Report.



Management team will appoint a qualified auditor to audit Aurora Early Intervention and Behavioural Services's accounts as required by professional standards.

Fraud and Corruption Control

Aurora Early Intervention and Behavioural Services Operations Manager will raise general awareness amongst staff about what fraudulent practices are, identifying potential fraud, how to report fraud and to make it very clear that fraudulent practices will not be tolerated.

Aurora Early Intervention and Behavioural Services employment screening processes (see Human Resources Policy and Procedure), and staff training.

Where the Management Team, staff member, participant or other stakeholder identifies an instance of suspected fraud or corruption, an initial report must be made to the Director (unless that person may be implicated) and to the relevant authorities including police.

All reports of fraud or corruption should be treated in confidence and referred to the Director. When a report or allegation of fraud or corruption is received, every effort must be made to deal with such reports quickly and decisively.

The Director will record all reports of actual and suspected fraud or corruption, noting the nature of the report, the time received, and remedial actions planned and taken. A copy of these records shall be provided to the relevant authorities upon their request.

In examining cases of suspected fraud, management and staff must ensure that their inquiries do not prejudice any subsequent investigation. If in doubt, do not pursue any further investigations and the Director shall contact the police.

All discipline or misconduct investigations relating to Aurora Early Intervention and Behavioural Services staff will be conducted in accordance with Aurora Early Intervention and Behavioural Services Human Resources Policy and Procedure.

NDIS Specifics & Service Agreements

Aurora Early Intervention and Behavioural Services financial arrangements regarding NDIS service delivery comply with the NDIS Act 2013 (Cth), the NDIS Rules, all relevant NDIS guidelines, and all policies issued by the NDIA including the NDIS Terms of Business for Registered Providers and NDIS Provider Registration Guide to Suitability, and any other relevant Commonwealth or State law or other requirements.

The Management Team will develop pricing structures for Aurora Early Intervention and Behavioural Services that align with the price controls and quoting requirements in place for NDIS supports, in accordance with the NDIS VIC/NSW/QLD/TAS Price Guide and the NDIS Provider SIL Pack Training Guide and FAQs and relevant templates.

The Director and Accounts Manager will maintain full and accurate accounts and financial records of the supports delivered to NDIS participants, along with records of all Service Agreements.

Aurora Early Intervention and Behavioural Services accounts and financial records will be maintained on a regular basis and in such detail that the National Disability Insurance Agency (NDIA) is able to accurately ascertain the quantity, type and duration of support delivered.

Financial records and accounts relating to NDIS service provision will be retained for a period of no less than 5 years from the date of issue. The retention of all records will also comply with all relevant statutes, regulations, by-laws and requirements of any Commonwealth, State or Local Authority.



A NDIS Service Agreement will be used to formalise the supports Aurora Early Intervention and Behavioural Services will provide NDIS participants. Participants have choice over what level of control they have over their finances, and this is reflected in their Service Agreement with Aurora Early Intervention and Behavioural Services. Aurora Early Intervention and Behavioural Services will work collaboratively with participants and their supporters to develop their Service Agreement.

Aurora Early Intervention and Behavioural Services will declare prices to all participants before providing services and include all fees Service Agreements along with detailed information about the supports to be provided. Fees charged will not exceed the price controls set by the NDIA.

Aurora Early Intervention and Behavioural Services Service Agreements will clearly set out the costs to be paid for supports, when delivery of supports is to be performed and the method of payment required. See Aurora Early Intervention and Behavioural Services's Assessment, Planning and Review Policy and Procedure for more information on what the Service Agreement will contain.

The participant must sign the Service Agreement before service delivery can commence. Through its invoicing and statement arrangements, Aurora Early Intervention and Behavioural Services will ensure that participants are regularly provided with details of services delivered and the amount charged for those services.

Service Agreements will be consistent with the NDIS' pricing arrangements, guidelines and the requirements of the A New Tax System (Goods and Services Tax) Act 1999 (Cth) regarding the application of the GST.

Where there is no funding requirement for fees to be charged for services rendered, Aurora Early Intervention and Behavioural Services will charge the participant on a fee for service basis.

Where a participant has difficulty paying their fees, they are encouraged to discuss this with Aurora Early Intervention and Behavioural Services so that mutually acceptable payment arrangements can be put in place.

Accounts are calculated each week and are to be paid weekly. Fees are to be paid by online or direct deposit. Cash will not be kept on Aurora Early Intervention and Behavioural Services premises and Aurora Early Intervention and Behavioural Services will not accept cash payments.

Prices charged to NDIS participants will not exceed the price level prescribed for that support in the NDIS VIC/NSW/QLD/TAS Price Guide. No other charges will be added to the cost of supports provided, including credit card surcharges, additional fees such as 'gap' fees, late payment fees or cancellation fees.

Receipts will be provided at time of payment and reprints provided upon request. Statements of services provided will be issued by mail or email at the beginning of each quarter for the supports provided in the previous quarter.=

Aurora Early Intervention and Behavioural Services will submit claims for payment to the NDIA within a reasonable timeframe, and no later than 60 days for the end of the support booking.

Aurora Early Intervention and Behavioural Services's Account Manager is responsible for establishing effective billing processes and efficient payment collection methods. The Accounts Manager will determine appropriate processing timeframes for the following: Agency-managed plans - Payment Request through NDIS Provider Portal; Plan-managed plans - Invoice to Plan Management Provider; and Self-managed plans - Invoice to participant.

Outstanding debts will be reviewed on a weekly basis by the Accounts Manager, who will decide upon the appropriate action to be taken.

The Accounts Manager will contact debtors regarding overdue payments 15, 22 and 29 days from the date an invoice is issued.



15 days after Issue of Invoice

If the Accounts Manager is successful in speaking to the participant/carer and in gaining assurance of prompt payment, the Accounts Manager will record the promised date for payment in the company's financial management system and email the participant a reminder.

If the Accounts Manager is not successful in gaining assurance of prompt payment, they will email the participant/carer stating services might be withdrawn or terminated if payment is not made within 7 days.

22 days after Issue of Invoice

If the Accounts Manager is successful in speaking to the participant/carer and in gaining assurance of prompt payment, they will record the promised date for payment in company's financial management system and email the participant a reminder. If appropriate, a payment plan may be agreed.

If the participant/carer are not contactable, the Accounts Manager will check the participant's file and speak to any of the participant's care staff to check if they are overseas, in hospital, or otherwise unavailable.

If there is no acceptable reason for non-payment, the Accounts Manager will consider withdrawing/terminating services with immediate effect. If so, they will inform the participant in writing.

If the participant is self-managing their NDIS plan and there are doubts about the participant's capacity to self-manage, the Accounts Manager will escalate to the Director who will contact the NDIA.

The Accounts Manager will email a final demand letter requiring payment within 7 days, stating that unless payment is received in that timeframe, recovery will commence through a debt collection agency without further notice.

29 Days after Issue of Invoice

If a debt is not paid within this timeframe, and an agreed payment plan has not been reached, the Accounts Manager/Case Manager will ensure that services are withdrawn or terminated with immediate effect if this has not already occurred.

The Accounts Manager/Case Manager will inform the participant/carer in writing and decide the further action to be taken (for example, arrangements for debt collection, or a repayment plan).

Finalising Debts

The Accounts Manager may accept a reasonable request for payment by instalments, provided agreement is reached on the terms and the timeframes. Such agreements are to be in writing and confirmed by both parties, with a copy provided to the participant and a copy retained on the participant's file.

In the event of a payment default the full amount of the debt will become due for payment and will be referred to Aurora Early Intervention and Behavioural Services's debt collector.

Prior to referring a debt to a debt collection agency, the Accounts Manager will determine whether this is a financially worthwhile option for Aurora Early Intervention and Behavioural Services.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this



clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

HUMAN RESOURCES POLICY AND PROCEDURE

The purpose of this policy and procedure is to demonstrate that Aurora Early Intervention and Behavioural Services will manage human resources effectively to ensure that adequate and appropriately skilled and trained staff and volunteers are available for the safe delivery of care and services to participants.

POLICY

Aurora Early Intervention and Behavioural Services will ensure it is sufficiently resourced to meet legislative, policy and service standards.

Aurora Early Intervention and Behavioural Services will ensure all staff have clear policies and procedures and work instructions that will enable them to deliver a quality service to participants.

All employees of Aurora Early Intervention and Behavioural Services will maintain up to date Working with Children Check and Police Records Check (Blue card and Yellow Cards for QLD).

Each participant's support needs will be met by staff who are competent in their role, hold relevant qualifications and have relevant expertise and experience to provide person-centred support.

All staff are recruited according to our Equal Employment Opportunity Policy (see below - 3.4. Equal Employment Opportunity Policy). All permanent vacancies are advertised externally and internally. Only those who successfully pass the NDIS Worker Screening Check and NDIS Worker Orientation Program will be employed by Aurora Early Intervention and Behavioural Services. The Director is responsible for the recruitment and administration of all employees.

PROCEDURES

Aurora Early Intervention and Behavioural Services will provide staff with clear policies and procedures and work instructions that will enable them to deliver a quality service to participants.

Staff delivering disability support services must meet the minimum qualification and experience requirements set down by the NDIA.

Staff delivering Aged Care services must meet the minimum qualification and experience requirements in accordance with relevant legislation.

all staff must have, where relevant:

- medication administration credentialing/re-credentialing.



- manual handling training and experience.
- their own car covered by full comprehensive car insurance.
- a Drivers' License – green P provisional or open licence.
- a current National Police Records Check and Working with Children Check or Yellow Cards (QLD).
- a current First Aid and CPR Certificate, including Anaphylaxis and Asthma.
- Aurora Early Intervention and Behavioural Services will screen Police records checks, Yellow cards and Working with Children Checks for new and existing staff, volunteers, students and contractors who work directly with participants every three years.
- Aurora Early Intervention and Behavioural Services will provide ongoing training and development opportunities for staff.
- Aurora Early Intervention and Behavioural Services will conduct performance reviews for all staff on a yearly basis.

Recruitment

1. Aurora Early Intervention and Behavioural Services will develop advertising material and website that stipulates employer requirements.
2. Aurora Early Intervention and Behavioural Services will advertise online and in the local newspapers.
3. Management will review resumes and experience of potential candidates.
4. Management will contact short-listed candidates and arrange interviews.
5. Staff will complete relevant documents: Application for employment; Interview questions; Reference check form; Police Check, Blue Cards and Yellow Cards forms and certified copies of qualifications.
6. Carry out reference checks to finalise choice of candidates.
7. Phone successful candidate/s and send out Letter of Offer.
8. Obtain candidates' acceptance of Offer (Returned Signed Letter).
9. Complete mandatory checks including Police Check, Yellow cards, Working with Children Checks, Tax file declaration, new employee information form.
10. Provide comprehensive induction (Aurora Early Intervention and Behavioural Services's mission, values, organisational structure, policies and procedures, staff code of conduct and WH&S)
11. All new staff must be provided a Staff Handbook, incorporating their job description, staff Code of Conduct, an organisation chart highlighting their direct supervisor and other relevant information to orientate them to the organisation.
12. Issue uniform and other resources to new employee and arrange roster and 'buddy shifts.
13. Add car registration and insurance details to register.
14. Organise mentoring program and professional development trainings.
15. If required Aurora Early Intervention and Behavioural Services will provide cultural awareness training on Aboriginal and Torres Strait Islander and CALD
16. Aurora Early Intervention and Behavioural Services will implement mentoring program, probationary interviews and a yearly performance.
17. Company will develop comprehensive education program and timetable.
18. Company will develop staff monthly meeting schedule to ensure staff concerns are heard and addressed accordingly.
19. Company will ensure contracted staff performance are monitored on a regular basis.



20. Staff members who have been injured or become ill and wish to make a Workers Compensation claim must Complete a Worker's Injury Claim Form, available from WorkSafe Victoria, SafeWork NSW, WorkSafe WA or WorkSafe QLD and submit it to the Management Team.
21. Aurora Early Intervention and Behavioural Services complies with other injury and return to work schemes of each state.

Mandatory Checks

As a NDIS Registered Provider, Aurora Early Intervention and Behavioural Services must screen new and existing staff who:

are a key-personnel.

are in a role for which the normal duties include the direct delivery of specified supports or specified services to a person with disability (see the NDIS Commission's List of Specified Services and Supports); or

are in a role for which the normal duties are likely to require more than incidental contact with people with disability.

If staff have only incidental contact with people with disability as a normal part of their jobs (for example, administrative support staff), it is not mandatory for them to have a check, however, Aurora Early Intervention and Behavioural Services may still require them to get one.

Prior to checks being undertaken, the person being checked must:

consent to Aurora Early Intervention and Behavioural Services undertaking checks, including police record checks and international police record checks, where applicable; and

sign a statutory declaration stating they have fully disclosed all relevant information regarding their criminal record and employment history to Aurora Early Intervention and Behavioural Services.

Aurora Early Intervention and Behavioural Services must also provide an opportunity for prospective employees and volunteers to disclose any criminal record or disciplinary actions as part of the recruitment process.

The Operations Manager is responsible for:

assessing whether a staff member needs a check.

determining who will cover the costs of mandatory record checks.

maintaining a record for all Aurora Early Intervention and Behavioural Services staff including their qualifications, registrations, training and criminal history check status. The Operations Manager must ensure these have been sighted and maintain the details on each staff record; and

maintaining a Criminal History Screening Register that contains the National Police Records Check and Working with Children Check Clearance Numbers, Expiry Dates and Currency Status for all staff.

Employment contracts will stipulate that all staff are obligated to advise the Operations Manager if they are charged with a criminal offence which is punishable by imprisonment or, if found guilty, could reasonably affect their ability to meet the inherent requirements of their job; and disclose formal disciplinary action taken against them by any current or former employer, including findings of improper or unprofessional conduct by a Court or Tribunal and investigations the staff member has been the subject of.

Results of the Police Record Check



Information released as part of a police record check is restricted according to the relevant legislation or release policies operating in the specific police jurisdiction. Where the police record check reveals no disclosable court outcomes, outstanding charges or other matters, their appointment may be confirmed.

In all other cases, the Operations Manager will manage the assessment process in order to determine the applicant's suitability for employment or placement. The Operations Manager will ensure that the applicant, student or volunteer confirms that the details of the disclosable record are correct; assessment of any disclosable record of the applicant, volunteer or student is made in accordance with the assessment criteria detailed below; and any decision made for or against a person is able to be justified and is fully documented.

The Operations Manager should give consideration to the following criteria:

- the relevance of the criminal offence, in relation to the job or placement.
- the nature of the offence and the relationship of the offence to the particular job or placement for which the applicant is being considered.
- the length of time since the offence took place.
- whether the person was convicted or found guilty and placed on a bond.
- whether there is evidence of an extended police record.
- the number of offences committed which may establish a pattern of behaviour which renders the applicant unsuitable.
- whether the offence was committed as an adult or a juvenile.
- the severity of punishment imposed.
- whether the offence is still a crime, that is, has the offence now been decriminalised.
- whether there are other factors that may be relevant for consideration; and
- the person's general character since the offence was committed.

Where the Operations Manager makes the decision not to take on an applicant, volunteer or student with a disclosable record, they must:

- inform the unsuccessful applicant of the decision and its rationale.
- provide an opportunity for the unsuccessful applicant to discuss the results; and
- inform the unsuccessful applicant of the opportunity for the decision to be reviewed.

Working with Children Check (WWC)

WWC Checks are valid for 5 years and assess the level of risk an individual pose to children's safety. They are more extensive and targeted than Police Checks and consist of a national criminal history check and a review of findings of workplace misconduct.

All Aurora Early Intervention and Behavioural Services staff, contractors or volunteers who have any contact with children in the course of their duties must have and maintain a clear WWC check.

Supervisor Support

Aurora Early Intervention and Behavioural Services has a commitment to assist all employee to perform their duties in accordance with the policies and procedures, including regular (6 monthlies at the minimum) supervisor meeting. Supervisor and employee are expected to actively contribute to this process.



Where it is identified that staff are not performing to their required standard, it may result in immediate action including a development plan being implemented which may include further training.

Termination of employment

Staff are required to give the relevant notice as stated in the relevant industrial Award or instrument in the event they choose to end their employment with the organisation.

Aurora Early Intervention and Behavioural Services has the discretion to pay the staff member their notice period in lieu of having them attend work for the notice period.

Aurora Early Intervention and Behavioural Services will ensure all salary and entitlements are paid to the staff member within 14 days of the end of their employment.

Disciplinary Action

Staff who do not comply with Aurora Early Intervention and Behavioural Services Staff Code of Conduct, Policies and Procedures or do not respond to performance intervention may face disciplinary action.

Aurora Early Intervention and Behavioural Services will document performance-related discussions and counselling sessions and these will be kept on staff records.

Where a staff member engages in serious misconduct so that it becomes unreasonable for Aurora Early Intervention and Behavioural Services to continue their employment, the staff member may be dismissed instantly.

Aurora Early Intervention and Behavioural Services will comply with all State and Federal legislation and the staff member's Employment Contract in relation to disciplinary action and employment termination.

Exit Interviews

The Operations Manager will ensure all staff leaving Aurora Early Intervention and Behavioural Services have the opportunity to complete an Exit Interview.

Exit interviews are voluntary and allow departing staff to offer feedback and suggestions that Aurora Early Intervention and Behavioural Services may use to improve its workplace practices and environment.

Staff will be provided with an Exit Interview Questionnaire to complete their Exit Interview.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

NDIS WORKER SCREENING CHECK



- The NDIS Worker Screening Check is an assessment of whether a person who works, or seeks to work, with people with disability poses a risk to them. The assessment determines whether a person is cleared or excluded from working in certain roles with people with disability.
- The NDIS Worker Screening Check is conducted by the Worker Screening Unit in the state or territory where a person applies for it. The Worker Screening Unit also decides whether a person is cleared or excluded. Registered NDIS providers are required to ensure that they only engage workers who have been cleared in certain roles, called risk assessed roles.
- Before the NDIS Worker Screening Check started, registered NDIS providers were required to ensure that their workers in risk assessed roles had an acceptable check that met the transitional and special arrangements that apply to the state or territory where they provide supports and services. Now that the NDIS Worker Screening Check has commenced, registered NDIS providers may be able to continue recognising a person's acceptable check if the person does not have an NDIS worker screening clearance. The period of time that an acceptable check can continue to be recognised depends on the state or territory where the person provides supports or services. Please visit the transitional and special arrangements page for more information.

How to apply for NDIS Worker Screening check

Workers engaged to provide NDIS supports and services to registered NDIS providers, unregistered NDIS providers and self-managed participants can apply for an NDIS Worker Screening Check through a state or territory agency. Each agency has a 'Worker Screening Unit'. The Worker Screening Unit is responsible for accepting and processing NDIS Worker Screening Check applications from workers and will undertake risk assessments to determine whether a worker receives a clearance.

When a worker applies for an NDIS Worker Screening Check, a fee is payable (which is set by the state or territory in which the application is made).

Workers must prove their identity for their application to proceed. The process for this will depend on the state or territory in which a person makes their application.

Workers will nominate the NDIS provider or self-managed participant that engages them (or intends to engage them) to provide NDIS supports and services. The NDIS provider or self-managed participant then needs to verify that they engage (or intend to engage) the worker, for the purposes of delivering NDIS supports and services. The application will not proceed to assessment until the relevant NDIS provider or self-managed participant has verified the application.

It is a condition of registration for registered NDIS providers that they ensure that workers in risk assessed roles have an NDIS Worker Screening Check or an acceptable check under the transitional and special arrangements. This provides a level of safeguarding for NDIS participants by helping to ensure that those in risk assessed roles do not pose an unacceptable risk to the safety and wellbeing of NDIS participants.

Who should have / apply for NDIS Worker Screening check

Registered NDIS providers must ensure that key personnel and other workers in certain types of roles have appropriate worker screening clearances that meet the requirements of the NDIS Practice Standards and Quality Indicators. Appropriate clearances ensure that the key personnel and employees in risk assessed roles do not pose an



unacceptable risk to the safety and wellbeing of our NDIS participants. Compliance with the NDIS Practice Standards and Quality Indicators 2020 is a condition of registration for all registered NDIS providers.

The risk assessed role is linked to the NDIS requirements. All roles identified as risk assessed by Being Human Support Services must meet all NDIS worker screening requirements.

POLICY

As a registered NDIS provider, Being Human Support Services will comply with the requirements relating to worker screening, as per the National Disability Insurance Scheme (Practice Standards – Worker Screening) Rules 2018. It is the responsibility of the Director to verify that all workers performing in a risk-assessed role have applied for and hold the appropriate worker screening clearances, (as determined by the Worker Screening Unit) by reviewing the details recorded in the National Worker Screening Database (NWSD). The Director or an authorised delegate will manage, record and verify worker screening.

The Director will identify which roles are risk assessed roles and ensure all workers in the roles have an NDIS Worker Screening Check or an acceptable check under the transitional and special arrangements. The following table lists the NDIS registration groups that may have risk assessed roles.

* Only employees who work in risk assessed roles require the worker screening clearances. Being Human Support Services is not required to verify that employees, who do not work in risk assessed roles, have an NDIS worker screening clearance or an acceptable check under the transitional and special arrangements.

However, Being Human Support Services or a self-managed participant, may (as a safety measure) require a staff worker to undergo an NDIS worker screening clearance or have an acceptable check under the transitional and special arrangements, before engaging them for a role that is not a risk assessed role.

All workers employed in a risk assessed role must apply for an NDIS Worker Screening Check with the state's Worker Screening Unit. The Worker Screening Unit manages the application process and collects the required application fee.

The Director or a delegated staff member will access the NDIS Portal and validate the worker screening checks. The National Worker Screening Database (NWSD) will advise Being Human Support Services via email of a worker's clearance or exclusion.

The Director, in turn, will inform the staff member of the results. If the NWSD advises of an exclusion or provides negative advice regarding a worker, it is the Director's responsibility to withdraw that particular worker from the risk assessed role immediately.

Supports and services that may have risk assessed roles as described by the NDIS:

- 0102 Assistance to access and maintain employment or higher education
- 0104 High intensity daily personal activities
- 0106 Assist life stage, Transition
- 0107 Assist Personal Activities
- 0108 Assist Travel / Transport
- 0110 Behaviour support



- 0114 Community Nursing care
- 0115 Daily Tasks / Shared living
- 0116 Innov community Participation
- 0117 Development life skills
- 0118 Early childhood support
- 0119 Specialised Hearing Services
- 0121 Interpret / Translate
- 0125 Participate in community
- 0126 Ex Phys Personal Training
- 0127 Plan management
- 0128 Therapeutic support
- 0129 Specialised driver training
- 0132 Specialised support coordination
- 0133 Specialised supported employment
- 0134 Hearing services
- 0135 Customised prosthetics
- 0136 Group and centre-based activities

Definitions

<p>Acceptable check</p>	<p>An acceptable check is the name given when a person fulfils the requirements that apply in the state or territory where they provide supports and services under the transitional and special arrangements contained in Part 4 of the National Disability Insurance Scheme (Worker Screening—Practice Standards) Rules 2018. It allows individuals to work in certain types of roles without an NDIS worker screening clearance during a particular period that applies to that state or territory. In some cases, this acceptable check will continue to be recognised for a period after the NDIS Worker Screening Check has commenced.</p>
<p>NDIS Worker Screening Check (Worker Screening Check)</p>	<p>A nationally consistent assessment conducted by a state or territory Worker Screening Unit to determine whether a person who works or seeks to work with people with disability poses a risk to them.</p>



NDIS Worker Screening clearance	A decision made by a Worker Screening Unit that clears a person who applied for an NDIS Worker Screening Check to work with people with disability in a risk assessed role.
NDIS Worker Screening exclusion	A decision made by a Worker Screening Unit that does not clear a person who applied for an NDIS Worker Screening Check to work with people with disability in a risk assessed role.
Registered NDIS provider	A registered NDIS provider is a person or organisation that is registered with the NDIS Commission in accordance with section 73E of the National Disability Insurance Scheme Act 2013. NDIS providers must be registered to deliver some kinds of supports (e.g. implementing regulated restrictive practices in a behaviour support plan).
Self-managed participants	Self-management is when an NDIS participant manages their own NDIS funding. It gives NDIS participants the flexibility and choice to decide which provider delivers NDIS supports and services to them to meet their plan goals.
Unregistered NDIS provider	A provider of NDIS supports and services that has not been registered with the NDIS Quality and Safeguards Commission. Not all providers are required to be registered. Unregistered NDIS providers usually deliver lower risk supports to NDIS participants – for example, house maintenance. Only participants who self-manage or plan-manage their NDIS funding are able to choose to receive supports and services from unregistered NDIS providers.
Worker	<p>For the purposes of the NDIS Worker Screening Check, a worker is someone employed or otherwise engaged by a registered or unregistered NDIS provider, or someone who provides supports and services to self-managed participants. To note:</p> <ul style="list-style-type: none"> • It includes people in paid, unpaid and self-employed roles, such as employees, contractors, consultants, and volunteers. • It also includes individuals that are themselves a registered or unregistered NDIS provider, each of the key personnel of a registered NDIS provider and a partner of a partnership that is a registered NDIS provider. • Only workers of registered NDIS providers that are engaged in certain roles (called risk-assessed roles) are required to obtain an NDIS worker screening clearance.
Worker screening unit (WSU)	The person or body that is responsible for conducting NDIS Worker Screening Checks in a state or territory under its NDIS worker screening law. WSUs are contained within state or territory government departments, or other state or territory authorities.



DISPUTES AND GRIEVANCES POLICY AND PROCEDURE

The purpose of this policy and procedure is to set out the steps Aurora Early Intervention and Behavioural Services staff are required to take in regard to disputes and grievances. This policy and procedure apply to all staff and meets relevant legislation, regulations and standards.

Definition

1. Dispute – a disagreement or argument that can arise from discrimination, harassment or any other behaviour between staff members or between the organisation and a staff member.
2. Grievance - a formal complaint lodged by one staff member against another or against the organisation.
3. Sexual harassment - any form of unwanted, unwelcome or uninvited sexual behaviour that is offensive, humiliating or embarrassing.
4. Workplace harassment - repeated behaviour, other than behaviour amounting to sexual harassment, of one staff member or group of staff members that is unwelcome, unsolicited and considered to be offensive, intimidating, humiliating or threatening by another staff member.

POLICY

Aurora Early Intervention and Behavioural Services is committed to maintaining positive working relationships between its staff and management. Disputes and grievances should be addressed within the organisation in a timely and confidential manner.

PROCEDURES

Disputes and grievances must be treated by Aurora Early Intervention and Behavioural Services with the utmost confidentiality, and the complainant must not be victimised.

All grievances must be taken seriously and investigated in an impartial manner.

Staff should attempt to resolve disputes with the other person before lodging a grievance. If attempts to resolve the dispute fail, staff must discuss the matter with Operations Manager.

The Operations Manager will mediate and seek an acceptable compromise for both parties. If the dispute involves the Operations Manager, the staff member must discuss the matter with the Director.

Issues of sexual harassment or discrimination should be brought to the notice of the Operations Manager.

If a dispute cannot be resolved, the staff member should lodge a grievance in writing to the Director.

Once a formal grievance is lodged, the Director will investigate the matter within five working days. If the Director has a conflict of interest in the matter, an independent party will conduct the investigation.

Where necessary, the Director will appoint an independent mediator to help resolve disputes; and encourage support person, union or professional association representation and involvement in dispute resolution procedures.

If the investigation reveals that the grievance is valid and depending on the nature of the complaint and its seriousness, the staff member against whom the grievance was lodged may be required to apologise to the staff member who lodged the grievance; given a written warning, counselling, transfer or demotion; or dismissed.



If the grievance is found to be a frivolous claim, and depending on the seriousness of the allegations, the staff member making the complaint may be asked to undertake counselling; make a written apology to the staff member complained about; given a written warning, transfer or demotion; or dismissed.

Staff have the right to appeal decisions relating to disputes. Appeals should be directed in writing to the Director and a final decision will be made by the Management Team. Staff who successfully appeal will have the outcome and actions reassessed for appropriateness. Staff who are not successful in their appeal will have the original decision reconfirmed.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

EQUITY AND ANTI-DISCRIMINATION POLICY AND PROCEDURE

The purpose of this policy and procedure is to demonstrate Aurora Early Intervention and Behavioural Services's commitment to workplace free from harassment and discrimination. This policy and procedure also set out Aurora Early Intervention and Behavioural Services's commitment to equal opportunity.

Definitions

1. Equity – treating all persons fairly and without discrimination.
2. Discrimination – treating a person less favourably than others in similar circumstances because of a personal attribute that has no relevance to the situation.
3. Age discrimination - Discrimination on the basis of age (regardless of age) or on the basis of age-specific characteristics or characteristics generally associated with a person of a particular age.
4. Disability discrimination - Discrimination on the basis of physical, intellectual, psychiatric, sensory, neurological or learning disability, physical disfigurement, disorder, illness or disease that affects thought processes, perception of reality, emotions or judgement, or results in disturbed behaviour, and presence in body of organisms causing or capable of causing disease or illness (e.g., HIV virus).
5. Racial discrimination - Discrimination on the basis of race, colour, descent or national or ethnic origin and in some circumstances, immigrant status.
6. Sex discrimination – Discrimination on the basis of sex, marital or relationship status, pregnancy or potential pregnancy, breastfeeding, family responsibilities, sexual orientation, gender identity or intersex status.
7. Sexual harassment - Any form of unwanted, unwelcome or uninvited sexual behaviour that is offensive, humiliating or embarrassing.



8. Workplace harassment - repeated behaviour, other than behaviour amounting to sexual harassment, of one employee or group of staff members that is unwelcome, unsolicited and considered to be offensive, intimidating, humiliating or threatening by another staff member.

POLICY

Aurora Early Intervention and Behavioural Services will ensure all staff are valued and encouraged to contribute.

Aurora Early Intervention and Behavioural Services's staff are expected to comply with anti-discrimination and harassment legislation.

As an equal opportunity employer, the organisation is bound by all relevant State and Federal legislation in relation to equal employment opportunity (EEO). This legislation ensures that no staff member will be discriminated against unfairly or unlawfully.

Aurora Early Intervention and Behavioural Services is an equal opportunity employer and it will comply with all relevant State and Federal legislation in relation to equal employment opportunity.

PROCEDURES

- Aurora Early Intervention and Behavioural Services complies with EEO requirements in relation to recruitment selection, pay and benefits, training and development, promotion, discrimination and harassment, performance appraisals and terminations.
- Staff will not be discriminated against on the grounds of sex, colour, race, nationality, ethnicity, religion, disability, age, pregnancy, marital or parental status, political belief or sexual orientation.
- Staff are not subject to no will engage in unlawful harassment (including racial vilification, sexual harassment, homosexual and transgender vilifications) or discrimination against another staff.
- Aurora Early Intervention and Behavioural Services has a responsibility to report any allegation of abuse if there is reasonable belief that an incident taken place.
- Aurora Early Intervention and Behavioural Services takes breaches of this policy and procedure very seriously.
- Staff who feel they are the subject of discrimination or harassment should lodge a formal complaint to Director.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and other stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.



WORKPLACE INCIDENT MANAGEMENT POLICY AND PROCEDURE

The purpose of this procedure is to provide guidelines for reporting, investigating and applying appropriate control measures when an accident or near miss occurs. The aim is to provide safe systems of work along with a safe working environment in all Aurora Early Intervention and Behavioural Services worksites.

Definitions

1. Accident – an unforeseen event that causes damage to property, injury or death.
2. Harm – Includes death, or injury, illness (physical or psychological) or disease that may be suffered by a person as a consequence of exposure to a hazard.
3. Hazard – a situation that has the potential to harm a person (cause death, illness or injury) or environment or damage property.
4. Hazard Identification – A process that involves identifying all foreseeable hazards in the workplace and understanding the possible harm that each hazard may cause.
5. Hazard Management – A structured process of hazard identification, risk assessment and control, aimed at providing safe and healthy conditions for staff, contractors and visitors while on the premises.
6. Incident – an occurrence that causes (or could have caused, in the case of a 'Near Miss) damage to property, injury/illness or death.
7. Dangerous Incident (including 'Near Misses') - an incident that exposes any person to a serious risk.

POLICY

Aurora Early Intervention and Behavioural Services is committed to providing a safe workplace for all staff, participants and other stakeholders and to establishing a formal process to report and investigate all workplace accidents, incidents and near miss occurrences. This includes identifying contributing factors and making the necessary recommendations to prevent a recurrence.

Aurora Early Intervention and Behavioural Services will respond to any incident or injury immediately and will support injured staff to return to work in a safe and sustainable way.

PROCEDURES

Management will acquire and keep up-to-date knowledge of WH&S matters including legislative requirement for reporting incidents.

Management will ensure Aurora Early Intervention and Behavioural Services has appropriate resources and processes in place to minimise or eliminate risks to health and safety.

Management will ensure Aurora Early Intervention and Behavioural Services has appropriate resources to manage incidents.

Staff will follow mandatory reporting where the incident involves a participant, in accordance with relevant legislation and standards.



Staff will undergo induction, which will include training in mitigating and responding to incidents, as well as mandatory reporting responsibilities.

Responding to Incidents

Assess the situation and check for danger.

Remove the person from danger if it is safe to do so.

Call Emergency Services (dial 000) if required.

Attend to the immediate needs of the person/s involved.

Assess the situation and ensure no others are at risk of harm.

Do not alter the scene

Notify relevant emergency contacts by telephone as soon as possible.

Should the person not need medical treatment, notify the representatives, or family member.

Types of incidents

Acts, omissions, events or circumstances that occur in connection with providing NDIS supports or services to a person with disability and have, or could have, caused harm to the person with disability

Acts by a person with disability that occur in connection with providing NDIS supports or services to the person with disability and which have caused serious harm, or a risk of serious harm, to another person

Reportable incidents that have or are alleged to have occurred in connection with providing NDIS supports or services to a person with disability

The Aurora Early Intervention and Behavioural Services is fully in compliance with the NDIS incident management guideline and monitor updates.

Reporting Incidents

All incidents and near misses must be reported to the Management within 24 hours through completion of the Incident Report.

Where an incident results in injury to a staff member, this must be recorded in the Injury Register.

The Aurora Early Intervention and Behavioural Services is fully in compliance with the NDIS incident management guideline and monitor updates. All reportable incidents to regulatory bodies including NDIS will be reported immediately.

Investigating and Resolving Incidents

1. The Management will work with the relevant state Workplace Health Safety authority and/or other relevant authorities to investigate the incident.
2. The Management or their nominated representative will commence investigations immediately upon receiving a completed Incident Report.
3. Management will implement the most effective controls that do not introduce other hazards and monitor and review the situation.
4. Consult with staff who are, or are likely to be, directly affected.



5. Provide information and feedback to the Management Team
6. Track all relevant information in the Incident Register.
7. Upon completion of the investigation the Management must finalise the relevant Incident Report and record the outcomes in the Incident Register.
8. The completed Incident Report should be stored on the relevant staff members or participant's file.
9. Incidents will be reviewed by the Management Team on a monthly basis, in order to determine if there are any trends or preventive measures that Company can take to prevent future incidents.

Debrief and Support

Facilitate an informal debrief amongst supervisors and colleagues.

Ensure appropriate support and access to counselling is made available for person involved in incident.

Workers Compensation

All work-related injuries or illnesses must be reported in accordance with the 'Reporting Incidents' section of this policy and procedure.

A staff member who has a work-related injury or illness who is away from work for more than seven consecutive days should nominate and be assessed by a doctor. The doctor will determine the kind of treatment they require, including the frequency and duration of treatment. The doctor will also issue a Certificate of Capacity, which is required to make a worker's compensation claim. The original Certificate of Capacity must be provided to Aurora Early Intervention and Behavioural Services.

The staff member should also complete a Worker's Injury Claim Form and submit it to the Director.

The Director must submit the completed Worker's Injury Claim Form, along with the Certificate of Capacity, to Aurora Early Intervention and Behavioural Services's workers compensation insurer within 7 days of receiving it.

The insurer will write to the staff member and Aurora Early Intervention and Behavioural Services to advise if the claim has been accepted or if further information is required. Insurers are required to provide their decision about the staff member's work capacity and entitlements to the staff member in a single notice.

If awarded workers compensation, staff can claim medical expenses and may receive weekly payments if they need time off work. If they need more than 7 days off work, they must participate in an injury management plan.

Return to Work Program

Aurora Early Intervention and Behavioural Services' Return to Work Program is a summary of the process that will be followed to manage staff with work-related injuries or illnesses. The program must align with the injury management program administered by Aurora Early Intervention and Behavioural Services's workers compensation insurer.

Aurora Early Intervention and Behavioural Services's Management Team and Return to Work Coordinator are responsible for maintaining the program. It must be reviewed at least every two years and should be written in plain English. The policies, procedures, roles, responsibilities and communications described in the plan must support timely, safe and durable recovery at work and align with requirements in the Work Health and Safety Act 2011 and Work Health and Safety Regulation 2011.

MONITORING AND REVIEW



Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

COMPLAINTS, COMPLIMENTS AND FEEDBACK POLICY AND PROCEDURE

The purpose of this policy and procedure is to demonstrate that the organisations commitment to deal with all feedback including suggestions and complaints fairly, promptly, confidentially. Aurora Early Intervention and Behavioural Services will provide feedback in a timely manner and document this feedback following due process to reach mutually satisfactory and agreed outcomes.

POLICY

Aurora Early Intervention and Behavioural Services manages feedback effectively in order to identify areas for improvement.

Aurora Early Intervention and Behavioural Services has an effective complaints, compliment and feedback handling system that addresses the principles of visibility and accessibility, responsiveness, assessment and investigation, feedback and continuous improvement.

PROCEDURES

All complaints are to be dealt with fairly and without reprisal or fear of retribution.

Complaints can be lodged by the following:

Directly with a staff member or by providing a completed Complaints, Compliments and Feedback Form

by email to: maryam@auroraearlyintervention.com.au

by phone on 0416 790 508

in writing to: Aurora Early Intervention and Behavioural Services, <company address>

At any time, people can make a complaint about NDIS service providers or the support they provide to the NDIS Commission.

Complaints to the NDIS Commission can be lodged:

online at www.ndiscommission.gov.au; and

by phone on 1800 035 544

Complaints about the NDIA should be directed to the Agency itself or the Commonwealth Ombudsman.

Complaints to the NDIA can be lodged:

by phone on 1800 800 110; and

by email to feedback@ndis.gov.au.

Complaints to the Commonwealth Ombudsman about the NDIA can be lodged:

by phone on 1300 362 072



online at www.ombudsman.gov.au.

Staff must support people making a complaint about the NDIA to contact the Agency or Commonwealth Ombudsman, where this is required.

Complaints received by the Aurora Early Intervention and Behavioural Services will be handled in the following manner: Within 1 working day all complaints will be recorded on a Complaints, Comment and Compliment form by the complainant or member of staff receiving the complaint.

Within 1 working day the complaint will then be forwarded to the Director or delegate.

If the complaint is about a member of staff, it is to be referred to the Director immediately and the Director will ensure the details are gathered and recorded in writing.

The Director will record details of all complaint in the Complaints Register and allocate a suitable investigating officer unless the complaint is regarding the Director

The Acknowledgement of Complaint letter is sent to the complainant

If the complaint is regarding the Director, details are to be recorded by the person receiving the complaint and forwarded to the Chair of Company's Board within 1 working day. The Board will be convened to ensure a full investigation is undertaken.

In instances when the complaint relates to suspected or actual assault, abuse, neglect or other criminal behaviour the Director will be informed immediately, and the appropriate investigative department will be informed.

The allocated investigating officer (usually a Service Manager) or Director will commence investigation of the complaint within 1 working day.

The investigating officer will contact the complainant within 2 working days of receiving the complaint and:

- Clarify and document the nature of the complaint or concern and the resolution sought by the complainant
- Explain the complaints procedure, individual's rights and what to expect
- Explain their right to an advocate
- Document all information on the Complaint Investigation Form

The investigating officer will interview the involved parties and develop a course of remedial action for the Director to approve.

When the plan of action has been approved the investigating officer is to inform the complaint of the remedial action within 10 working days of meeting with the complainant.

The Director will ensure the complainant is also informed of the final outcome in writing using the Outcome of Complaint Letter and advised of their right to take the matter to the Board or raise it with the relevant external bodies. If either the complainant or other parties involved in the complaint are unsatisfied with the result or want the matter dealt with further, the matter will be taken to the Board of the Company.

When the complaint cannot be resolved internally external mediation will be promoted.

All current complaints resolved and unresolved will be tabled in a non-identifying summary form at the next Management Meeting to inform of any potential problems.

In addition to addressing the specific complaint the organisation will utilise the information for feedback into the organisation's continuous improvement cycle.



Staff will be educated about the complaint's procedure, their role and how to support participants and carers with making complaints. Education will occur when staff commence working at Company and periodically through staff training and the staff newsletter.

Feedback is defined as "any comments or compliments made about any aspects of the services provided by Aurora Early Intervention and Behavioural Services (including the actions of an employee, volunteer or persons otherwise engaged by Aurora Early Intervention and Behavioural Services)".

Feedback may lead to Aurora Early Intervention and Behavioural Services reviewing and adapting an aspect of service or may not require any action beyond acknowledging the feedback and passing on details to relevant parties

Feedback will be recorded on the Complaints, Compliments and Feedback form by the person providing the feedback or the member of staff receiving the information

The information will then be forwarded to the people involved, Service Manager and Director.

The Director will record the details on the relevant register and decide what action is required if any.

If the comment is of a negative nature, it may be necessary to implement the complaints procedure above.

Compliments will also be communicated at staff meetings in order to ensure staff are recognised and examples of best practice identified and acknowledged.

Complaints Escalation and Dispute Resolution

Where a complaint about Aurora Early Intervention and Behavioural Services is made to the NDIS Commission, all staff must comply with any orders or requests made by the NDIS Commission; assist in any resolution process or inquiry undertaken by the NDIS Commission; and ensure the complainant or a person with disability affected by the complaint are not adversely affected or fear retribution because a complaint has been made by them or on their behalf.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

PARTICIPANT INCIDENT MANAGEMENT POLICY AND PROCEDURE

The purpose of this procedure is to provide guidelines for reporting, investigating and applying appropriate control measures when an accident or near miss occurs.

Definitions

1. **Abuse** – Verbal, physical and or emotional mistreatment and or lack of care of a person. Examples include sexual abuse and any non-accidental injury.



2. Child abuse - An act or omission by an adult that endangers or impairs a child's physical and/or emotional health and development. Child abuse can be a single incident but often takes place over time. Abuse, neglect and maltreatment are generic terms used to describe situations in which a child may need protection.
3. Racial, cultural and religious abuse - Conduct that demonstrates contempt, ridicule, hatred or negativity towards a person because of their race, culture or religion.
4. Sexual abuse - When a person uses power or authority over another person (including a child), or inducements such as money or special attention, to involve the other person (or child) in sexual activity. It includes a wide range of sexual behaviour from inappropriate touching/fondling of another person/child or exposing a child to pornography, to having sex with a child or with a non-consenting adult.
5. Bullying - Repeated verbal, physical, social or psychological behaviour that is harmful and involves the misuse of power by an individual or group towards one or more persons. Bullying occurs when one or more people deliberately and repeatedly upset or hurt another person, damage their property, reputation or social acceptance.
6. Child protection - The term used to describe the whole-of-community approach to the prevention of harm to children. It includes strategic action for early intervention, for the protection of those considered most vulnerable and for responses to all forms of abuse.
7. Disclosure (in the context of this policy) – A statement that a child or person makes to another person that describes or reveals abuse.
8. Discrimination – Treating a person less favourably than others in similar circumstances because of a personal attribute that has no relevance to the situation.
9. Impact – the level of harm to a participant as a result of an incident.
10. Incident – also 'Participant Incident' - An event or circumstance that occurs during service delivery, which results in harm or has the potential to harm a participant.
11. Incident Investigation - a formal process of collecting information to ascertain the facts relating to an incident, which may inform any subsequent criminal, civil penalty, civil, disciplinary or administrative sanctions. Investigations may be carried out by service providers, the Department of Health and Human Services or external investigators. In the context of this policy, an incident investigation is an investigation into an allegation of abuse, poor quality of care or unexplained injury of a participant, undertaken or commissioned by Company.
12. Duty of care - Duty of care refers to the responsibility Aurora Early Intervention and Behavioural Services has to provide its participants with an adequate level of care and protection against foreseeable harm and injury.
13. Neglect - The failure to provide a vulnerable person with the basic necessities of life, such as food, clothing, shelter, medical attention or supervision, to the extent that the person's health and development is, or is likely to be, significantly harmed.
14. Negligence - Doing or failing to do something that a reasonable person would, or would not do in a certain situation, and which causes another person damage, injury or loss as a result.
15. Offender/Perpetrator - a person who mistreats and/or harms another person or child.
16. Reportable Incident:
 - the death of a person or child with disability.
 - serious injury of a person or child with disability.
 - abuse or neglect of a person or child with disability.
 - unlawful sexual or physical contact with, or assault of, a person or child with disability.



- sexual misconduct committed against, or in the presence of, a person or child with disability, including grooming for sexual activity; or the use of a restrictive practice in relation to a person or child with disability, other than where the use is in accordance with an authorisation of a State or Territory in relation to the person.

POLICY

Aurora Early Intervention and Behavioural Services has a moral, ethical and legal responsibility to ensure all participants are safe and takes proactive steps to protect them from harm.

Aurora Early Intervention and Behavioural Services's incident management system identifies, assesses, manages and resolves incidents that occur in connection with providing supports or services to a person or child with disability and have, or could have, caused harm to them. The system is appropriate to the business' size and the classes of NDIS supports it provides.

Aurora Early Intervention and Behavioural Services will provide support and assistance to people and children with disability affected by an incident (including information about access to advocates such as independent advocates), to ensure their health, safety and wellbeing.

PROCEDURES

Management will ensure Aurora Early Intervention and Behavioural Services has appropriate resources and processes in place to minimise or eliminate risks to health and safety.

Staff will undergo induction, which will include training in mitigating and responding to incidents, as well as mandatory reporting responsibilities.

Responding to Incidents

Assess the situation and check for danger.

Remove the person from danger if it is safe to do so.

Call Emergency Services (dial 000) if required.

Attend to the immediate needs of the person/s involved.

Assess the situation and ensure no others are at risk of harm.

Do not alter the scene

Notify relevant emergency contacts by telephone as soon as possible.

Should the person not need medical treatment, notify the representatives, or family member.

Reporting Incidents

The staff member who first becomes aware of an incident must report it as soon as practicable to the most senior staff member in the work area. The most senior staff member in the work area is responsible for reporting relevant incidents to the Police. The report must be made as soon as practicable, once immediate safety and medical needs are met.

Staff must report all participant incidents to the Operations Manager or another member of the Management Team as soon as practicable.



Details of all incidents, their investigation and review must be recorded in Aurora Early Intervention and Behavioural Services' Incident Register.

Reportable Incidents requiring notification within 24 hours

The Director or another member of the Management Team must report the following incidents to the NDIS Commission within 24 hours:

- the death of a person or child with disability.
- the serious injury of a person or child with disability.
- the abuse or neglect of a person or child with disability.
- unlawful sexual or physical contact with, or assault of, a person or child with disability; or sexual misconduct committed against, or in the presence of, a person or child with disability, including grooming for sexual activity.

The following information must be provided:

- the organisation's name and contact details.
- a description of the reportable incident.
- a description of the impact on, or harm caused to, the person or child with disability (this may not be required if the reportable incident was a death).
- the immediate actions taken in response to the reportable incident, including actions taken to ensure the health, safety and wellbeing of the person or child affected by the incident.
- whether the incident has been reported to the Police or any other body.
- the name and contact details of the person making the notification.
- if known, the time, date and place at which the reportable incident occurred.
- the names and contact details of the people involved in the reportable incident; and
- any other information requested by the NDIS Commissioner.

Information provided to the NDIS Commission within the first 24 hours of an incident must be provided via telephone or using the Reportable Incident - Immediate Notification Form available at www.ndiscommission.gov.au. Information provided after the initial 24-hour period must be provided using the Reportable Incident – 5 Day Notification Form.

Reportable Incidents requiring notification within 5 business days

The Director or another member of the Management Team must report incidents, other than those that fall into the categories listed above to the NDIS Commission within 5 business days. All of the information listed above must also be provided for these incidents.

Should significant new information about the incident relate to a change in the kind of reportable incident or is a further reportable incident, the Director or other Management Team member must notify the NDIS Commission as soon as reasonably practicable by phoning 1800 035 544 or emailing reportableincidents@ndiscommission.gov.au.

Aurora Early Intervention and Behavioural Services staff are Mandatory Reporters with respect to child protection matters. Staff must report any suspected or actual Reportable Conduct regarding children (see Definitions) to the Police or Child Protection authorities as soon as practicable after becoming aware of that conduct.



Investigating Incidents

The options for investigating incidents are:

1. **No further investigative action** – This may be appropriate where it can be clearly established that the report of the incident is inaccurate or there is no basis for concern about the safety of the participant or the quality of care the participant is receiving. If the decision is not to undertake an investigation, the grounds for this decision must be supported and recorded with reasoning backed up by evidence. The incident must then be the subject of a review (detailed below).
2. **Monitoring and support required** – Certain information may raise issues that do not necessarily warrant an investigation, but nevertheless require changes in practices. Aurora Early Intervention and Behavioural Services may manage these issues by monitoring and supporting affected staff members or participants and documenting this on relevant staff and participant files. The incident must then be the subject of a review (detailed below).
3. **Internal investigation** – This option may be selected only where Aurora Early Intervention and Behavioural Services has the capability to undertake an investigation independently.
4. **External investigation** – In other cases, Aurora Early Intervention and Behavioural Services will need to commission an investigation by an external party to ensure the investigation is robust, objective and expert. The Investigation Manager may commission an investigator, or a person from another organisation, with relevant expertise.

For every Reportable Incident, or where an investigation is ordered by the NDIS Commission, the Director must appoint an Investigation Manager to determine the appropriate investigative action for an incident and oversee the incident's investigation.

The Investigation Manager must determine the appropriate investigative action for all incidents within a maximum of 72 hours of Aurora Early Intervention and Behavioural Services becoming aware of the incident. The Investigation Manager may seek advice from other staff members if appropriate.

Investigations must take a person-centred and rights-based approach, taking into account what is important to the person or child with disability impacted by the incident. The person or child's family should be invited to participate in the investigation and be provided the support they need to do so. The investigation must, however, remain impartial and independent at all times.

All investigations must be completed (including report finalisation) within 28 working days.

Aurora Early Intervention and Behavioural Services must provide information on investigation progress and outcomes to the person or child with disability involved in the incident (or their representative or family) and, with the consent of the person with disability or their representative, any other person.

An investigation report must be completed by the Investigation Manager. A report may also need to be provided to the NDIS Commission within 60 business days of the initial notification, via reportableincidents@ndiscommission.gov.au.

Incident Review

Incident review includes monitoring and acting on trends identified through the analysis of incident information. The purpose of analysing incident data is to learn from patterns of incidents in order to safeguard the safety and wellbeing of individual participants, as well as improve the quality of supports.



The Incident Register must be reviewed at monthly Management Team meetings. The Operations Manager are responsible for ongoing monitoring of the Incident Register, in order to analyse and report on incident trends and identify and address any systemic issues underlying incidents.

Reviews should consider the causes, handling and outcomes of incidents, as well as feedback provided by staff and participants. If trends or preventative measures are identified, these must be tracked in the Continuous Improvement Register.

Indicators of Abuse

Indicators of abuse include but are not limited to:

- a participant alleges that abuse has occurred, by a staff member, another participant, or other person.
- a staff member observes or is told about alleged abuse.
- a staff member suspects that abuse has occurred (for example, a participant may have unexplained injuries, a participant may be distressed or anxious, or clothes may have been ripped).
- a participant's behaviour changes significantly (this might include self-destructive behaviour, sleep disturbances, acting-out behaviour, emotional distress, or persistent and inappropriate sexual behaviour); and
- a participant complains of physical symptoms, or a staff member observes symptoms (this might include bruising, abdominal pain, sexually transmitted disease or pregnancy).

Where a staff member considers that a participant's behavioural changes or symptoms may be a result of abuse, they must report their concerns to the Compliance Coordinator who will refer this to the Operations Manager and Director.

Where an immediate police response is required, staff should call 000. Where a person or child does not consent to the police being called, see Compulsory Reporting in this Policy and Procedure for guidance on situations where police notification is mandatory.

In the case of alleged sexual abuse that has just occurred, to preserve any forensic evidence, the person or child should not be showered or bathed or offered drinks or food until after the Police have been contacted and provide further instruction.

Advising Parties involved of Police Report

In relation to a victim of assault, the staff member who first becomes aware of an allegation must advise the person or child's family that the allegation will be reported to the police.

In relation to an alleged perpetrator, staff should consult with police as to whether the person should be told of the report to police. It is important that any steps taken do not undermine action that police may instigate.

If a victim or witness is under the age of 18 years, a parent, guardian or independent person must be present if they are going to give a statement.

At the time of contact the Police must be advised if the person or child has a cognitive disability or mental illness and needs support of an independent third person during interview or when a statement is being taken. Cognitive disability can include intellectual disability, acquired brain injury and dementia.

Where the person or child uses an alternative form of communication, such as symbols, signs or facilitated communication, an independent third person can usually assist the participant to communicate with the police. It is the responsibility of the Police to contact the independent third person.



The police should be assisted in conducting their investigation. The investigation may involve the police taking photographs of any physical injuries. The police may need staff assistance to explain this procedure to the victim.

Where a Participant is the Alleged Victim

Where a participant is the alleged victim of an assault, Aurora Early Intervention and Behavioural Services staff must assist them to make an informed decision whether to participate in the police investigation. Staff should advise the participant and/or their representative or family that the matter has been referred to the Police, and that the Police may investigate the incident and may want to interview the participant and take a statement. The participant may choose whether or not to participate in the police investigation.

Participants with an intellectual/cognitive disability or a mental illness must have an independent third person present during any interview. The role of the independent third person is to facilitate communication, ensure that the participant understands his or her rights, and to support them. Police are responsible for arranging the independent third person. Aurora Early Intervention and Behavioural Services staff should not act as the independent third person. Where the alleged victim is under 18 years of age, he or she must have a parent, guardian or an independent person present when a statement is being taken. The role of the independent person is to provide support to the participant and ensure that their evidence is accurately recorded. If the child has a cognitive disability, then an independent third person should be present.

The police will decide whether or not to proceed with charging. If the matter is taken to court, the participant will most likely be required to give evidence.

The response by staff to a participant's disclosure of assault can be central to the participant's ongoing safety and their recovery from the trauma of assault.

It is important to listen to and support the participant; reassure the participant that they did the right thing by talking about the assault; ensure the participant's, and others' immediate safety, health and wellbeing needs are met such as medical attention and referral to other specialist/victim support services; ensure the participant's specific support needs are addressed including access to communication aides and resources; tell the participant what you plan to do next; and with the participant's consent, or if the participant is a child, engage family, significant others, an independent key support person or advocate to support the participant and advocate on their behalf.

A key support person may include a family member, significant other, or advocate who are independent of the perpetrator and/or service. The role of the key support person is to provide support and advocacy and ensure participant's rights are respected in relation to any subsequent investigation or action taken. A key support person should be someone who preferably knows the participant well and has their trust. Specialist victim support services may include crisis care, counselling, advocacy, legal information and advice.

For participants who are from culturally and linguistically diverse communities or from Aboriginal and Torres Strait Islander communities, staff should consider referring them to specialist agencies or staff for additional support. It may also be necessary to arrange an interpreter. Where the participant uses a language other than English or is deaf, an interpreter of the same sex as the participant should be arranged as soon as practicable to interpret for the participant, police and other persons involved in the process.

Some victims may be reluctant to speak to an interpreter because they fear that what they say may be passed on to their local community. In this case, it is possible to request a telephone interpreter from another state, or to not



disclose the victim's name to the interpreter. When using an interpreter directly, consideration should be given to arranging an interpreter who is not associated with the participant or their immediate cultural community. Aurora Early Intervention and Behavioural Services will support participants through the justice process, including police investigation, prosecution and crimes compensation processes as appropriate. This may include ensuring they have access to appropriate communication aides and tools to facilitate disclosures and the provision of evidence.

Where a Participant is the Alleged Perpetrator

Staff must consult with police about whether to inform the participant of the report to police. The police may want to interview the participant and take a statement. Participants with a cognitive disability must have an independent third person present during the interview, and this will be arranged by police. Where the participant is under the age of eighteen years, an independent person must be present during the police interview.

Staff must contact the service most directly responsible for the participant's care who will ensure that the participant has legal representation and is assisted during the investigation and hearing.

Under no circumstances should anyone but the police interview the participant about the allegation. It is acknowledged however that some discussion with the participant may be required to establish safety and a basic understanding of what has occurred.

Notification of Next of Kin or Guardian – All Participants

If the alleged perpetrator is the participant's next of kin or legal guardian, the staff member must ensure that the immediate needs of the participant and an appropriate planned response are undertaken.

The Director or delegate must notify the participant's next of kin or guardian where the participant is under 18 years old; the participant is over 18 years old and consents to their next of kin or guardian being contacted. If the participant is unable to make an informed decision regarding contact and the participant does not have an appointed guardian, Aurora Early Intervention and Behavioural Services's Director should contact the next of kin as appropriate; the participant has a legal guardian; or the participant is on a guardianship order.

The Director or delegate must explain to the next of kin or guardian: the nature of the allegation; the standard procedure for reporting allegations to the police; that the participant may choose whether or not to participate in the police investigation; and any action taken by staff since reporting the allegation.

If the participant is a child or young person who does not wish their next of kin or guardian to be notified, a decision in relation to notification will need to consider factors including the participant's age and capacity, where they are living and their best interests. If necessary, legal advice should be sought, and if a decision is taken not to notify the next of kin or guardian, this must be clearly documented and placed on the participant's file.

A quality of support review must be undertaken by the Director, Operations Manager and Case Manager for participants who are victims or alleged perpetrators of an assault. Agreed actions for the participant's immediate and ongoing needs must be recorded on the participant's Support Plan. This must include steps being taken to assure the participant's safety and wellbeing in the future; treatment or counselling the participant and their family may access to address their safety and wellbeing.

Staff and Participant Debrief and Support



After a serious and traumatic incident, it is likely that high levels of stress will be experienced by those connected with the incident. In relation to a sexual assault, the local Health Sexual Assault Service can assist with debriefing and secondary consultation.

General arrangements to support staff may include allocating a safe place for retreat, giving staff the option of being immediately and temporarily relieved of their duties, providing communication with families and offering to organise transport home.

General arrangements to support participants may include allocating a safe place for retreat and communicating with and supporting them and their families.

Participants have a right to complain about Aurora Early Intervention and Behavioural Services's services and they and their key support person/advocate or family should be alerted to Aurora Early Intervention and Behavioural Services Complaints, Compliments and Feedback Policy and Procedure and external complaints bodies.

Where a Staff Member is the Alleged Perpetrator

After reporting to the police, the Director must be immediately notified of the report.

Depending on the nature of the allegation, the Management Team's response regarding the alleged perpetrator should comply with Aurora Early Intervention and Behavioural Services's Human Resources Policy and Procedure. Responses include redirecting the staff member to alternate duties that do not involve direct participant care or standing the staff member down.

Where a Staff Member is the Alleged Victim

Allegations or assaults where a Aurora Early Intervention and Behavioural Services staff member is the alleged victim should be dealt with in accordance with Aurora Early Intervention and Behavioural Services's Workplace Incident Management Policy and Procedure.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

NDIS PARTICIPANTS CHARTER

Aurora Early Intervention and Behavioural Services is committed to upholding the rights of all participants. Aurora Early Intervention and Behavioural Services commits to upholding the rights of its participants, as set out in the Charter of Human Rights and Responsibilities Act 2006.

Participant Rights



You have the right:

- To be treated with courtesy, dignity and respect.
- To be respected for your individual human worth and dignity.
- To realise your individual capacity for physical, social, emotional, cultural, religious and intellectual development.
- To live a life free from abuse, neglect or exploitation.
- To recognition of your individual autonomy and independence, including your right to dignity of risk and the freedom to exercise choice and have control over your life.
- Privacy and confidentiality, and access to all personal information kept about you by our company.
- To be assessed for service access in an equitable, non-discriminatory way, according to your needs.
- To participate actively in decisions affecting your life, including all decisions made about your care.
- To receive services that are appropriate, safe, of a high quality, are culturally relevant and adapt to your ongoing needs and goals.
- To make a complaint to our company and to external agencies and legal rights, entitlements and obligations under the Disability Act.
- To have services and supports provided by appropriately qualified staff.
- To change service providers and receive support in doing so by our company.
- To have a person of your choice support and advocate on your behalf in your interactions with our company.
- To refuse a service or support without prejudicing your future access to services with our company.
- To pursue any complaint about your service provision without fear of retribution and receive support to pursue complaints.

Participant Responsibilities

We expect that you will:

- Treat staff and other participants with courtesy and respect.
- Respect the human and legal rights and dignity of staff and other participants.
- Be responsible for your choices and the results of any decisions you make.
- Proactively participate in the development, implementation and review of person-centred support /care plans.
- Communicate any changes in your circumstances and needs to staff.
- Promptly pay any fees and charges associated with the provision of your service.
- Inform the company as early as possible when support is not required.

CONTINUITY OF SUPPORT POLICY AND PROCEDURE

Purpose

Continuity management is an integral part of our operating plan, risk management and decision-making throughout the organisation. Continuity of care to our participants falls within this remit. Continuity of care planning contributes to improved quality and safety of care, increased the satisfaction of the participant, Staff and our organisation, and will maximise the use of resources to provide the appropriate level of care and access.



The participant's NDIS Plan incorporates reasonable and necessary supports and any informal supports that already available to the individual (informal arrangements that are part of family life or natural connections with friends and community services) as well as other formal supports, such as health and education. Aurora Early Intervention and Behavioural Services will ensure that the participant has consistent supports or services to allow them to undertake daily activities and supports to maintain their life choices.

Scope

This policy applies to the Staff managing and working with participants.

POLICY

Director will arrange schedules to ensure that participants know who is attending to their needs and supports. Director will pair participants with workers who hold appropriate skills and knowledge. Participant's requests are matched wherever possible. Examples of meeting the participant's wishes may include accessing a Staff who speak the participant's first language or share the same cultural background or meet the specific criteria that have been requested.

Staff will be placed with participants whose location is close to their home to reduce travel and increase retention. Continuous support and predictability will be planned through the allocation of a consistent Staff to a participant. All supports and strategies are recorded in the participant's plan and will be used by all Staff when supporting the participant's preferences and needs (see Support Management Policy and Procedure).

PROCEDURE

To ensure participants have timely and appropriate support without interruption Aurora Early Intervention and Behavioural Services's Staff will:

- Access, read and comply with the participant's plan.
- Review the strategies listed in the support plan before the provision of support.
- Provide quality services as per plan.
- Document all the participant's preferences and needs to allow for a consistent approach.
- List all appointments and tasks related to the participant's needs.
- Be allocated according to the participant's requirements.
- Inform the Director of any absences in advance to allow time to allocate a replacement who meets the criteria of the participant and preferable is known to the participant.
- Contact participants if there are any changes or potential changes in their care, and
- Undertake emergency procedures as required.

No appointments are ever double booked. When travelling to participants, it is essential that adequate travel time is factored in to ensure correct arrival time.

Disruptions and changes



Aurora Early Intervention and Behavioural Services notifies participants when an unavoidable interruption occurs. Staff makes every attempt to inform participants via telephone and email prior to any unavoidable disruptions to services or participant appointments. When not possible, the participants are briefed on arrival at the next meeting or scheduled service.

Director contacts participant to:

Seek participant's agreement and to ensure that they are entirely aware of the changes
Explain alternative arrangements to the participant.

In case of an emergency, when a worker cannot attend work due to circumstances out of their control (such as illness, family emergency) then Aurora Early Intervention and Behavioural Services will attempt to place a worker who is known to the participant, but if this is not possible, we will send the best match to the participant. Aurora Early Intervention and Behavioural Services will contact the participant and inform them of the situation and give details of the replacement worker to the participant.

Absence or Vacancy

When a Staff is absent, or a vacancy becomes available then Aurora Early Intervention and Behavioural Services's Director will:

Contact a Staff a suitable replacement such as a Staff with the relevant qualifications or language requirement.
Where possible, provide a Staff who has worked with the participant previously and is aware of the participant's preferences and needs.
Where possible, advise the participants of replacement person and gather feedback on the replacement Staff.
Replacement Staff will be sensitive to participant's requirements and ensure that care is consistent with the participant's expressed preferences.

Staffs that are unable to work are required to contact the Director. If there is an intended absence (such as vacation or appointment), then the Staff must inform the Director at the earliest opportunity, to allow time to prepare the participant.

Service Agreement

Aurora Early Intervention and Behavioural Services ensures arrangements are in place to make sure that support is provided to the participant without interruption throughout the period of their service agreement. These arrangements are relevant and proportionate to the scope and complexity of supports delivered.

CRITICAL SUPPORTS

Contingency plans are drawn-up and adhered to ensure the continuity of care to all participants throughout their time with us. In the case of a disaster, planning will incorporate strategies that enable continual supports before, during and after the disaster. Critical planning will be undertaken for participants who have complex needs.

ZERO TOLERANCE POLICY

Purpose

To meet the requirements of the disability abuse prevention strategy.



To understand, promote and enhance safeguards, and prevent abuse.
To prevent abuse from occurring.

Scope

This policy is relevant to all staff, volunteers or stakeholders.

Definition

Zero Tolerance: Aims to provide an evidence-based, nationally applicable and contemporary approach to preventing and responding to abuse of people with disabilities. The aim is to assist service providers in developing positive organisational cultures and practices and robust safeguarding mechanisms relevant to the National Disability Insurance Scheme (NDIS).

POLICY

Aurora Early Intervention and Behavioural Services is committed to all elements of the NDIS Code of Conduct. Aurora Early Intervention and Behavioural Services will train staff in all elements of the Code of Conduct and ensure a Zero Tolerance approach is incorporated into practices.

Aurora Early Intervention and Behavioural Services will follow the Code of Conduct and follow these guidelines as listed and ensure that Aurora Early Intervention and Behavioural Services:

- Does not tolerate any form of abuse of people with disabilities by workers or other people with disabilities and promotes zero tolerance for abuse.
- Provides staff with training and information to correctly apply the obligations of the Code of Conduct.
- Assists staff to undertake their role, such as keeping support plans up-to-date and provide training opportunities (such as formal training, mentoring or on-the-job supervision).
- Acts on all reported cases of abuse or suspected abuse.
- Never takes adverse action against any staff member or volunteer if they report abuse or neglect.
- Base all necessary disciplinary actions on the principle of procedural fairness, if a Staff violates the obligations of the Code of Conduct.
- Respects, recognises and values the diversity of people and cultures, and creates an inclusive environment where it is safe for people with disabilities to express their cultural identity.
- Actively maintains a working environment in which the risks of abuse are minimised
- Creates and maintains a positive complaints culture in which people are not afraid to 'speak up', and
- Fosters a culture of Zero Tolerance to abuse of people with disabilities.

Aurora Early Intervention and Behavioural Services informs their staff that imposes the obligations as listed below:

Frontline workers must:

- Provide services without engaging in abuse, exploitation, harassment or neglect.
- Report any form of abuse or suspected abuse.
- Not engage in sexual abuse or misconduct, and must report any such conduct by other workers, people with disabilities, family members, carers or community members.



Show respect for cultural differences when providing services.
Act ethically, with integrity, honesty and transparency.

PROCEDURE

Aurora Early Intervention and Behavioural Services will train Staff to be able to understand and act on a Zero Tolerance approach and ensure that staff appreciates people with disabilities are people first, who have needs, aspirations, preferences and feelings.

All staff is required to listen to all participants. So, they can determine their preferences, aspirations, needs and support where it is safe to do so.

Aurora Early Intervention and Behavioural Services acknowledges that reporting abuse is critical to prevent abusive situations from escalating and future incidents from occurring.

All staff working with people with disabilities must report any form of abuse (Zero Tolerance).

Aurora Early Intervention and Behavioural Services will ensure that Staff is informed that people with disabilities face significantly higher risks of sexual assault and exploitation than the general population. This is particularly true for women with a disability. In addition, there can be barriers to disclosure that make it difficult for a person with a disability to report sexual abuse and misconduct.

DIVISION 3 - PROVISION OF SUPPORTS

ACCESS TO SUPPORTS POLICY AND PROCEDURES

Purpose

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

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

Scope

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

POLICY

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

Aurora Early Intervention and Behavioural Services will provide the participant with entry criteria and inform them of the associated costs.



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

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

Aurora Early Intervention and Behavioural Services will be supported to understand what circumstances supports can be withdrawn. Supports will not be withdrawn or denied solely on the basis of the dignity of risk choice that has been made by the participant.

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

PROCEDURE

Access to Supports

- The Director will inform the participant of the eligibility criteria to access our support services and the associated costs for each service. Eligibility criteria for our NDIS services include that the participant currently holds an NDIS Plan that lists access to our registration groups.
- The Director will determine if the participant requires our Easy Read documents that inform them of their rights, their voice in the development of their Service Agreement, how to complain and how we will maintain their Privacy. An interpreter will be provided if required by the participant.
- Assessment will be undertaken to ensure that our organisation is able to supply the participant's services in the manner that the participant requires.

Reasonable Adjustment

An NDIS Plan is devised by the NDIA to address participant's reasonable and necessary supports. During the Aurora Early Intervention and Behavioural Services's assessment process to develop the participant's support plan, the Director or their delegate will consult with the participant, family and advocate to make reasonable adjustments to the participant's support delivery environment. Any modifications must be discussed and negotiated with all parties and recorded in the service agreement. The reasonable adjustments are made to determine that the service provided is fit-for-purpose and that the changes support the participant's health, privacy, dignity, quality of life and independence.

Withdrawal of Services

Aurora Early Intervention and Behavioural Services will not withdraw or deny supports based solely on the dignity of risk made by the participant. Our organisation may withdraw supports if any of the following occur:

The participant fails to do what is required of them under the terms of their Service Agreement.

The participant fails to comply with the policies and procedures of Aurora Early Intervention and Behavioural Services

The participant fails to communicate and provide information about changes to support needs.

Workplace Health and Safety considerations are ignored.



Communication has broken down between the Aurora Early Intervention and Behavioural Services and the participant, family or advocate.

Payment for support and/or expenses has not been received as per the Service Agreement.

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

Aurora Early Intervention and Behavioural Services will always work in the best interest of the participant to achieve a safe transition to a new provider of services (see Transition and Exit Policy and Procedures)

Upon termination of the Service Agreement by either party Aurora Early Intervention and Behavioural Services will take steps to ensure:

The cancellation of service has been reported to the National Disability Insurance Agency.

All services that have been provided under the terms of the Service Agreement have been claimed.

The participant has alternative support solutions in place for their safety and wellbeing

Assessment Principles

Assessment tools utilised are validated or considered “best practice”.

The assessor understands and applies the principles of flexibility, validity and relevance to the assessment process.

The assessment process promotes independence, including the following principles:

Determining the participant's abilities and difficulties.

Setting expectations to enable a balance against the participant's abilities and their need for support.

Service agreements acknowledge support needs, abilities to foster independence and the Participant’s goals.

Undertaking Assessments

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

Invite the Participant’s Representative/ Advocate to be present if required or desired.

Identify any special needs. For example, an interpreter and information in the service user’s language are sourced for service users who are culturally and linguistically diverse.

Ensure that the Easy Read documents are available.

Contact Director to arrange an interpreter.

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

How information is collected and used.

Privacy and confidentiality considerations.

Opt-out options to data collection.

The complaints and feedback process.



Their Advocacy options.

The organisation's Information-sharing requirements.

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

Responsibility for Assessments

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

Recording Assessment Information

The assessment is documented in a Participant's file and in the Participant's Management System.

The interview and write-up times must be recorded against the participant in the management system.

SERVICE ACCESS POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure Aurora Early Intervention and Behavioural Services offers each participant access to services based on consultation with the participant or participant's representative. Aurora Early Intervention and Behavioural Services will assess each participant comprehensively, and participant needs will be documented and agreed before commencing care and service delivery.

POLICY

Aurora Early Intervention and Behavioural Services will collaborate with as part of a broader service delivery network, which enhances its own service delivery and provides its participants with appropriate referrals and services that meet their needs.

Aurora Early Intervention and Behavioural Services's service delivery environment will be safe and engaging, accessible and responsive to its participants' needs.

Aurora Early Intervention and Behavioural Services's eligibility, priority of access and waitlist management is implemented in a fair and transparent manner and it also in line with Aurora Early Intervention and Behavioural Services and NDIS Participant Charter.

Aurora Early Intervention and Behavioural Services will inform the community, potential participants and other services about its services and access requirements through active engagement strategies that encourage and facilitate participant and stakeholder participation.

PROCEDURES

Aurora Early Intervention and Behavioural Services will build relationships with local agencies, health services and advocacy services and participate in relevant local networks including conferences to increase service and referral options for its participants and other stakeholders.



Aurora Early Intervention and Behavioural Services will work with local Aboriginal and Torres Strait Islander and CALD service providers to assist culturally sensitive service delivery to participants.

Aurora Early Intervention and Behavioural Services will distribute marketing information about its services in appropriate formats to local community and other relevant agencies.

Aurora Early Intervention and Behavioural Services will maintain an informational brochure in appropriate formats on its services and distributes to community when appropriate.

Aurora Early Intervention and Behavioural Services will manage referrals from prospective participants.

Aurora Early Intervention and Behavioural Services aims to provide quality services that are affordable and accessible to families of diverse economic status.

Aurora Early Intervention and Behavioural Services has eligibility and priority criteria and entry rules in place for potential users to access the service based on capacity, available resources and funding.

To be eligible to receive Aurora Early Intervention and Behavioural Services's disability services, participant must have one or more identified intellectual, cognitive, neurological, sensory or physical impairments or is a child with developmental delays.

Aurora Early Intervention and Behavioural Services examines participants relative need compared to others who receive or want to receive Aurora Early Intervention and Behavioural Services's services.

Aurora Early Intervention and Behavioural Services takes into account priority access for people with special needs.

Aurora Early Intervention and Behavioural Services adopts and applies non-discriminatory eligibility criteria and entry rules with respect to age, gender, race, culture, religion, and disability, consistent with funding obligations and applicable legislation.

The Operations Manager will book an Intake Interview with the participant within 5 working days of their initial contact with them or sooner if the person's needs are considered urgent.

Aurora Early Intervention and Behavioural Services's entry and exit procedures are fair, equitable and consistently applied by staff.

Aurora Early Intervention and Behavioural Services maintains an intake process to answer enquiries and take referrals.

- The Operations Manager will conduct all Intake Interviews. They will provide the person with information about entry and exit procedures; eligibility and priority of access requirements; conditions that may apply to service provision; and fees.

The Operations Manager will listen to participant needs and help participants to make informed choices explaining carefully what can be delivered to and for them, assist in their area of need and explain how their need can be met.

Participants are consulted and have choice and control over their daily lives as per Decision Making and Choice Policy and Procedure.

A schedule of fees and charges is then given to the participant.

Communication is an open two-way process and participants can make an appointment to discuss items of concern with the service Manager.

All literature and information are explained in clear and concise English so that professional terms are understood, and interpreters will be utilised where necessary.

If services cannot be provided, the participant will be provided with a clear reason based on eligibility criteria.

Participants refused services has the right to appeal the decision. Appeals should be directed in writing to Aurora Early Intervention and Behavioural Services Director and a final decision will be made by the Management Team.



Regulatory compliance will be on the agenda for all staff meetings.

Aurora Early Intervention and Behavioural Services provides participants with Aurora Early Intervention and Behavioural Services Participants Handbook which provides information on Service Access, Decision Making and Choice, Participants Monies Management and Complaints, Disputes and Feedback.

Staff are not permitted to sign or witness any legal documents for participants or participants' friends.

Neither Aurora Early Intervention and Behavioural Services management nor its staff are involved in any way with participant legal affairs.

Participants and/or their representatives are consulted before discharge from the service.

Consultation with participants and/or their representatives occurs before changes to service personnel or the service.

Agreed service changes are in writing and consultation occurs (where possible) before the changes take effect.

Staff are kept informed and consulted through regular memos and meetings.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

SUPPORT PLANNING AND SERVICE AGREEMENT COLLABORATION POLICY AND PROCEDURES

Purpose

Aurora Early Intervention and Behavioural Services's aim is to work with participants, families, advocates, communities and other providers to achieve the best outcome for the participant. This communication will allow all parties to share ideas and knowledge to ensure that the supports are relevant, appropriate and in line with the service agreement.

Scope

Aurora Early Intervention and Behavioural Services is committed to ensuring that the staff understand the beneficial aspects of a collaborative approach to the participant.

POLICY

This collaborative approach requires staff to work with relevant parties when:

- Locating key worker with a family and other provider.
- Working with other providers in the supply of supports or services.
- Assisting the participant in transitioning and exiting the service.
- Building the participant's capacity.



Planning with supports for the participant.
Developing Service Agreements.

Staff must cooperate with other agencies in the delivery of service. This collaboration may include initial contact, sharing ideas and input from participants, families and advocates following through on ideas of provider, and actively listening to discussions. We will collaborate with all relevant parties to provide participants with the opportunity to access a service network that meets the full range of their needs. Director will contact and establish communication with the relevant service provider so our organisation can maintain collaborative relationships and protocols and participate in networks with relevant agencies.

Information, knowledge and skills are communicated and shared between the participant, family, advocate, the provider, and other collaborating providers. Aurora Early Intervention and Behavioural Services will work with the participant and their family and advocate ensuring that the participant maintains the functionality.

PROCEDURE

Key Worker

Participants and families may require assistance to locate the right person for the participant, so our team will undertake the following process:

1. Discuss the participant's requirements with participant, family and advocate.
2. Gain formal written consent to share and gather information with other providers.
3. Contact other service providers working with the participant to collaborate and determine the criterion.
4. Identify at least one (1) key support worker and contact participant, family and advocate, and the other providers.
5. Inform the participant, family and advocate of the identified person to allow them to select.
6. Record the process undertaken and the results in the participant's service agreement.

Collaborating with Other Providers

Director or their delegate will make initial contact with other providers, after gaining consent from the participant, family and advocate. Various methods will be used to maintain contacts such as email, phone and networking. All records of contact are kept in the participant's service agreement.

Transition and Exit

The participant's needs, interests or aspirations may change during the delivery of their supports. These changes may lead to a need to transition to or exit from their current service. If this occurs, then we will, with the consent of a participant, contact the relevant service provider to:

- Collaborate with providers and participant to develop a plan of action.
- Send or request documents relevant to the participant.
- Communicate current supports, practices and needs to enable the participant to transfer or exit smoothly
- Identify risks and develop a Risk Management Plan.
- Develop a process for each participant - communicate the details to the participant, work with the participant during the process and review after the transition.



Document the process in the Participant's Support Plan.

Risks associated with each transition to or from Aurora Early Intervention and Behavioural Services are identified, documented and responded to. (See Transition and Exit Policy and Risk Management Policy)

Capacity building

The participant's capacity building process is designed to improve and retain their skills and knowledge, so they can maintain and improve their functionality.

To build and support the participant's functional capacity Aurora Early Intervention and Behavioural Services will collaborate with:

- The participant, their family and advocate to affirm, challenge, and support.
- Other providers to further develop participant's skills and to improve practice and relationships.

Participant Outcomes

Collaboration with participant, family and advocate is the basis ensuring functional outcomes are based on the participant's needs, priorities, and their skills. The collaboration is to be recorded in the service agreement.

Support Planning

During the assessment and support planning process, collaboration is undertaken with participant, family and/or advocate:

- Complete a risk assessment.
- Document a risk assessment.
- Plan appropriate strategies to treat known risks.
- Implement appropriate strategies to treat known risks.
- Review annually or earlier according to their changing needs or circumstances.

Service Agreements

Aurora Early Intervention and Behavioural Services will collaborate with the participant to develop a service agreement which establishes:

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

With the consent or direction from the participant Aurora Early Intervention and Behavioural Services collaborates in the development of the support plan, with other providers to:

- Develop links
- Maintain links
- Share information
- Meet participant's needs



SUPPORT PLANNING POLICY AND PROCEDURES

Purpose

The purpose of this policy is to outline the legislative requirements and practice procedures for undertaking support services for NDIS participants.

To comply with the requirements of NDIS Practice Standards and Quality Indicators. Compliance with the policy is a condition of appointment for all persons engaged in providing services on behalf of Aurora Early Intervention and Behavioural Services.

Scope

To inform our team how to plan to collaborate in the development of the support plan that incorporates the participant's wants, needs and aspirations, including the type of Staff, time and length of the service linked to the registration group on their NDIS Plan.

POLICY

All participants and their support networks are aided to collaborate and participate in the development of a goal-oriented support plan. The support plan will reflect an individual's goals and aspirations and will look at the strengths and functionality of the participant. It is based on the presumption of capacity and will safeguard the risks and needs of the participant.

The support plan to incorporate both participant's supports (described as nature of a coordination, strategic or referral service or activity) and reasonable and necessary supports funded under NDIS (activities that support goals maximise independence, allow to live independently and undertake mainstream activities).

The Support Plan will provide transparent written information to the participant, detailing the services and type of support that they will receive from Aurora Early Intervention and Behavioural Services. Where there is a change in the participant's needs, preferences and goals, an amended Support Plan will communicate this change in supports required to the participant.

Staff must be screened, trained and qualified in the roles that they undertake.

Support Planning Principles:

- The support planning process is consultative where the participant, family, friends, carer or advocate work together to identify strengths, needs and live goals with a focus on choice and decision-making.
The participant's preferences, values and lifestyle choices should be supported (wherever possible).
Support Plans should promote the valued role of people with disabilities that is of their own choosing.
Promotion of functional and social independence and quality of life.
Support plans will contain goals.
Service choices agreed to should reflect the participant's personal goals.
Support Plans should be creative, flexible and not developed by set patterns or methods of service delivery.
Activities and supports in the plan must be inclusive of the participant's chosen communities and maintain connections with their community to allow for active participation.



If a participant identifies as Aboriginal or Torres Strait Islander, then their community will be contacted to allow for engagement and support services.

The Support Plan is reviewed regularly (at least annually) and amended to respond to participant needs and preferences.

The Support Plan should be strength-based, seek to maximise independence, and build on the participant's existing networks.

The Support Plan should be provided to the participant in their first language, where appropriate and/or requested.

The participants or their advocates may request a review of the support plan at any time.

Staff conducting support plan development will have the necessary skills and competence to undertake this function.

Participants with a disability will also be facilitated to understand their NDIS plan, including:

- Understanding and self-directing their NDIS plan.
- Understanding the supports in their NDIS plan.
- Funded support budgets.
- Purchasing general funded supports.
- Purchasing stated funded supports.
- Managing and paying for their supports.
- Choosing their providers.
- Making agreements with their preferred providers.

PROCEDURE

Support Plan Development

Planning

Explain the Support plan development process for the participant.

Arrange a meeting time with the participant and (if applicable) their advocate or family.

Develop the Support plan with as much input, choice and decision-making from the participant as the participant wishes. Document the reasons (should a participant choose to have minimal input into their Support plan).

Prior to meeting with the participant review: Participant's Intake Form, Participant's assessment information; any referral documents, and other relevant notes or data available that will assist in understanding the participant as an individual.

Providing Information to the Participant

Emphasise the importance of the participant identifying their own personal goals and aspirations.

Use the appropriate Support plan as a prompt to assist the participant in identifying areas where

Aurora Early Intervention and Behavioural Services services may help them realise their goals.

Outline the prompts on the plan, including discussion of the participant's physical, emotional, spiritual, cultural, community, social and financial needs.

Provide the participant with a clear understanding of their choices and service options available so that they can make informed decisions about their choices and priorities.



Explain to the participant any information-sharing requirements with other parties.

Provide the participant with examples or suggestions of how Aurora Early Intervention and Behavioural Services services may be able to help them achieve their goals.

Facilitating the Development of Participant Centred Goals

Work with the participant and their advocate(s) to identify their personal goals.

Ask the participant to identify the types of help or assistance that would be most important to them.

Help the participant to recognise their strengths and capabilities

Transform the participant's goals into SMART Specific, Measurable, Attainable, Realistic and Timely)

- *Example Simple Goal:* To be able to get the mail.
- *Example SMART Goal:* To be able to walk to the mailbox each day by me to get the mail.

Set a timeframe with each goal so that progress can be determined.

- Example: To be able to walk to the mailbox each day without assistance to collect the mail. To achieve this by date.

Use the participants expressed priorities, agreed actions and goals to develop their Support Plan.

Also, consider:

The financial resource capacities and any limitations of Aurora Early Intervention and Behavioural Services services or specific programs to be utilised.

The capacities, expertise and appropriateness of current Aurora Early Intervention and Behavioural Services staff to provide the services.

The availability of specialised subcontracted staff or services (if applicable).

Other services or individuals who will provide services (as designated by the participant).

Any volunteer supports available.

Determine with the participant how each goal will be measured so that progress can be recorded.

Identify with the participant, any potential barriers to achieving their goals, and work out strategies to alleviate these barriers.

Ask the participant to prioritise their goals if many goals have been identified. For each goal - list the actions, responsibilities, frequencies and the duration of services to be coordinated or supplied on behalf of the participant.

Document all the information in the Support Plan.

Identify all stakeholders (Participants, family, advocates, community engagement links, other services or agencies) that will undertake to help the participant achieve each goal, and document this in the Support plan.

Support Plan Delivery and Review

Negotiate the specific days for services or support and document these in the Support plan.

(Where possible) agree upon time ranges for the services to build a level of flexibility into the service roster. (e.g., start time of between 1 and 1:30 pm and 1hr of Domestic assistance).

(If not yet finalised) negotiate service fees and record these in the participant Service Agreement and on the Support Plan.



Ask the participant to sign the Support Plan to acknowledge their agreement with it.
 Agree on the criteria to evaluate the effectiveness of Aurora Early Intervention and Behavioural Services service responses and document this in the Support Plan.
 Ensure all involved stakeholders have copies of the agreed Support Plan.
 Explain to the participant that the Director will monitor the progress of the Support Plan, but the participant may also request a review of the Plan at any time.



RESPONSIVE SUPPORT MANAGEMENT POLICY AND PROCEDURE

Purpose

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



Scope

To ensure staff are always trained and act professionally when developing plans that empower the participant to achieve their needs, goals and aspirations.

To keep participants informed on their plan whilst undertaking a holistic approach that incorporates strengths-based and person-centred strategies.

POLICY

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

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

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

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

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

Aurora Early Intervention and Behavioural Services will utilise this policy to ensure the organisation maintains a contemporary approach to support management services.

PROCEDURE

Support Management Principles

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

Director or their delegate will:

Match available resources, Staff to the participant's needs.

Work across the service boundaries to ensure that the participants with complex care needs can have access to a full range of allied health, health and social support services they need.

Provide a single point of contact for the participants that require a complex range of services and/or require intensive levels of support.

Aurora Early Intervention and Behavioural Services's service is screened for eligibility and suitability in accordance with applicable program guidelines and the Access to Supports Policies & Procedure.

Verify that consent for assessment and services were received and are recorded in the participant's file.



Review the participant's referral information and confirm eligibility and suitability for a Aurora Early Intervention and Behavioural Services service.

Contact the participant and arrange a suitable time for a comprehensive assessment.

With the participant's consent, arrange interpreters, advocates, guardians, or other service providers to attend the assessment, as appropriate.

Determine (if possible) whether the clinical assessment of the participant's health condition is required and arrange for the appropriate staff (i.e., RN or allied health professional) to attend the assessment.

Ensure representatives identified by the participant such as family, advocate and carers, are contacted and if necessary, assisted to participate in the assessment.

On the day of the assessment, the assessment should be carried in accordance with the organisation's Policy & Procedure and based on the participant's needs and situation.

Within five (5) days after a comprehensive assessment contact the referrer and any existing providers for further information, if necessary.

If indicated, arrange additional specialised assessments.

Investigate potential options for sourcing support, including the availability of Aurora Early Intervention and Behavioural Services staff/resources and the use of brokerage resources.

(If necessary) arrange a case conference with relevant services and individuals to discuss the participant's situation.

Ensure outcomes from Support Management are documented within the Support Plan and advise the Participant that their services will be continually reviewed by the Coordinator for effectiveness.

Where appropriate, and with Participant consent, provide the Support Plan to Participant's General Practitioner or Representative.

Develop a Support Plan that includes a Plan of Action that meets the participant's needs, requirements and aspirations.

The support plan will include:

- Participant information - personal details, health details, cultural and spiritual requirements, sexual identification, Aboriginal and Torres Strait Islander
- Goals
- Advocate
- Interpreter requirement
- Consent forms
- Active engagement planning
- Plan to develop, sustain and strengthen independent life skills.
- Medical information including conditions, doctors, medications, use and management.
- Risks to participant and staff - management of the risk, if required.
- Any financial budget requirements (if application).
- The participant's involvement in any planning and decision-making process.

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



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

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

Exiting the Service

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

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

SERVICE AGREEMENT WITH PARTICIPANTS POLICY AND PROCEDURE

Purpose

Aurora Early Intervention and Behavioural Services undertakes the development of a Service Agreement during the Access to Supports and Assessment Process and with the collaboration of relevant parties.

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

Scope



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

POLICY

Aurora Early Intervention and Behavioural Services collaborates with each participant to develop a service agreement which establishes:

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

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

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

PROCEDURE

Aurora Early Intervention and Behavioural Services undertakes the following process to develop a Service Agreement with each participant:

Collaborate with the family, advocate or representative to ensure that the Service Agreement meets the requirements and is linked to needs, interests and aspirations.

Use appropriate communication method to explore, explain and determine what is being provided within the agreement.

Records are kept explaining the process undertaken, include consent or direction to collaborate with other providers to share information to enable the team to meet the participant's requirements.

Copy of Service Agreement is given to the participant.

Should a participant not wish to keep a copy of the agreement, then the circumstance under which the participant did not receive a copy of the agreement, must be documented and kept on the participant's file. It is good practice to have the participant make a note on the agreement that a copy was not required.

Supported Disability Accommodation Service Agreement must include outline the party or parties responsible and their roles (where applicable) for the following matters:

- Addressing how a Participant's concerns about the dwelling will be communicated.
- Management of potential conflicts involving participant(s).
- Agree on how changes to participant circumstances and/or support needs will be disclosed.
- In shared living, method of filling vacancies, including each participant's right to have their needs, preferences and situation considered.
- Management of behaviours of concern which may put tenancies at risk, if this is relevant to the participant



SERVICE DELIVERY AND PARTICIPATION POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure that Aurora Early Intervention and Behavioural Services's services delivery is built on person-centred principles to guide service delivery.

POLICY

Aurora Early Intervention and Behavioural Services promotes a person-centred approach to its service delivery whereby individuals direct their services and are supported to maintain connections with their family, and friends and community.

Aurora Early Intervention and Behavioural Services's service delivery promotes participants' active participation and inclusion in their community and support participants to develop and maintain independence.

Aurora Early Intervention and Behavioural Services's assessment and review focus on helping participants to take control and make choices to enhance their independence and community participation.

PROCEDURES

Aurora Early Intervention and Behavioural Services puts the participant at the centre of decision-making in all aspects of their life and support participants to actively participate in their community and pursue their interests and goals.

Aurora Early Intervention and Behavioural Services assessment and review will help participants to take control and make choices to enhance their independence and community participation.

Where necessary, with consent from participant, Aurora Early Intervention and Behavioural Services will provide referral to other service providers that will enhance participant's community participation and inclusion and will provide support and assistance to help participants access these services.

Where possible, and with the consent from participant, Aurora Early Intervention and Behavioural Services will be referred to training, employment, education, health, wellness, recreation, leisure, cultural and community services, activities and events, as well as public transport and affordable housing options.

Aurora Early Intervention and Behavioural Services will help participants develop and maintain independence, problem solving, social and self-care skills appropriate to their age, developmental stage and cultural circumstances.

Aurora Early Intervention and Behavioural Services respects participants personal, gender, sexual, cultural, religious, spiritual identity along with their special needs in accordance with relevant legislations.

Aurora Early Intervention and Behavioural Services will support participants from Aboriginal and Torres Strait Islander backgrounds and help them to maintain and strengthen connection with their community.

Aurora Early Intervention and Behavioural Services will provide training on cultural awareness training for staff.

Aurora Early Intervention and Behavioural Services will refer Aboriginal and Torres Strait Islander participants (where necessary, and with consent from participant) to community service providers offering services for Aboriginal and Torres Strait Islander people.

Aurora Early Intervention and Behavioural Services assist individuals to identify needs and life goals, particularly in relation to recognising the importance of people's ties to their culture and language.

Aurora Early Intervention and Behavioural Services will prioritise service to participants who have special needs in order to maintain and strengthen their connections.



Aurora Early Intervention and Behavioural Services will provide training for staff who are likely to deal with participants with special needs.

Aurora Early Intervention and Behavioural Services will refer participants with special needs (where necessary and with their consent) to community service providers offering services for special needs participants.

Information will be provided in clear and concise language.

If interpreting service is required, interpreters will be made available to participants, additional fees may be charged. Unless they are an accredited interpreter for their language skills, Aurora Early Intervention and Behavioural Services staff members who speak a language other than English may only assist with communicating low risk information to participants.

Information regarding access to interpreters will be provided in Aurora Early Intervention and Behavioural Services's Participant Information Package and displayed at the front desk at Aurora Early Intervention and Behavioural Services's office.

Translated information services provides information that the participant can refer to and use for understanding.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

NON-RESPONSE TO SCHEDULED VISIT POLICY AND PROCEDURE

The purpose of this policy and procedure is to outline Aurora Early Intervention and Behavioural Services's response to participants who do not respond during a scheduled home visit.

POLICY

Aurora Early Intervention and Behavioural Services is responsive to the individual needs of participants.

Aurora Early Intervention and Behavioural Services will uphold participant's rights at all times.

Aurora Early Intervention and Behavioural Services will ensure participants have a plan in place to no response to scheduled visits.

Aurora Early Intervention and Behavioural Services plan to no response to scheduled visits will be individualised for each participant based on their assessed needs.

PROCEDURES



Aurora Early Intervention and Behavioural Services will develop an agreed plan of action with all participants and or their representative for possible situations where staff arrive for a scheduled visit and find the participant does not respond.

Aurora Early Intervention and Behavioural Services will identify action to be followed by employees in the plan.

Aurora Early Intervention and Behavioural Services will ensure participant is clear about participant responsibilities to communicate with employees if participant will not be available for a scheduled visit.

Ensure participant is clear about who Aurora Early Intervention and Behavioural Services should contact if staff finds participant is not at home and cannot enter the premises.

Aurora Early Intervention and Behavioural Services will ensure participant has agreed and signed off on the possible course of action in a non-response situation.

If staff arrives for a scheduled visit and there is no answer Aurora Early Intervention and Behavioural Services will implement the agreed non-response plan.

Management must be notified as soon as possible.

Management will notify the persons(s) listed in plan of care and services for a non-response to a scheduled visit.

A revisit to the home may be necessary as soon as possible.

Management may notify emergency services.

If participant is found Management and staff member must document all steps followed.

Management will meet with participant and next of kin to discuss the event and their feedback.

Management will debrief employees if the event has been traumatic.

Aurora Early Intervention and Behavioural Services will consider suggestions, improvements that could be made for future situations.

Aurora Early Intervention and Behavioural Services Review the no response plan.

MONITORING AND REVIEW

- Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.
- Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

TELEHEALTH POLICY

Purpose

Telehealth, in the context of the Australian healthcare setting, can be defined as the use of videoconferencing technologies to conduct a consultation where audio and visual information is exchanged in real-time. Telehealth can be conducted between a Aurora Early Intervention and Behavioural Services clinician and a participant in a supported or unsupported format.



Scope

Aurora Early Intervention and Behavioural Services clinicians will review participants, then only undertake telehealth consultation with participants who have the capacity to participate in a videoconference, to ensure appropriate provision of support and access.

POLICY

This policy has been designed to allow Aurora Early Intervention and Behavioural Services to meet the needs, interests and goals of our participants during natural disasters, pandemics, or when specific circumstances warrant this approach. During events of this type, changes and adjustments to our service provision may occur, requiring the adaption of current practices to meet government or participant requirements.

The role of telehealth, in the overall management of a participant, will be determined by the clinician and other relevant providers. The implementation of telehealth will depend on the specialty of the clinician and the participant's requirements and location. Clinicians should be mindful of the limitations of telehealth and communicate these limitations to all video conference participants.

Participant selection

Clinicians should determine which participants are suitable for telehealth based on available resources, technology and care requirements. Aurora Early Intervention and Behavioural Services will determine whether a telehealth consultation is the most appropriate type of consultation for each participant. The decision to use telehealth incorporates the following factors:

Clinical: Continuity of support and the best model of support for the individual.

Practical: Availability of appropriate technology and participant-end support. The quality of the technology at a remote site will play a significant role in the information received during the clinical consultation.

Participant needs: Ability to travel, and consideration will be given to their family, work and cultural situation.

Clinicians should also consider the participant's capacity to participate (e.g., a video consultation may be inappropriate for participants with vision or hearing impairments).

Prior to a telehealth consultation

Aurora Early Intervention and Behavioural Services clinicians will inform the participant on how the consultation will proceed; this may include:

- providing the participant with plain language information about telehealth
- informing the participant of the other available support options (if available)
- informing the participant of any charges for telehealth consultations in comparison to other available options
- indicating the length of the telehealth consultation.

Clinicians will ensure that the participant has been given adequate information regarding the telehealth consultation, and they will liaise with the participant-end worker to ensure the participant is sufficiently informed.

Seeking participant consent



Aurora Early Intervention and Behavioural Services clinicians should be satisfied that participants have consented to participate in the telehealth consultation.

In cases where the participant is not competent and cannot provide consent, consent should be obtained from an advocate in the same way as for a face-to-face consultation, using a Telehealth Consent Form. The clinician will arrange for a Telehealth Consent Form to be provided to the advocate who has the requisite legal authority (e.g., enduring guardianship), so they can provide consent on the participant's behalf.

While it is not Aurora Early Intervention and Behavioural Services's standard practice to record a video conference, on occasion, the participant will record the telehealth consult; therefore, their consent applies to this recording. Where a recording is made by Aurora Early Intervention and Behavioural Services for assessment purposes, the participant will be informed prior to the recording taking place. The participant must provide verbal approval to record the consultation and agree to the planned use of the recording at the start of the telehealth consultation.

Consultation

Telehealth is no different from any other type of consultation and should be conducted similarly to a face-to-face consultation. A telehealth consultation of high quality is one in which the participant has a voice, screens are shared, listed supports actioned, and active listening is undertaken as per current best practice models.

In supported consultations, a support worker is present with the participant for some, or all, of the video consultation. The support worker should confirm both their identity and that of the participant to the clinician.

For unsupported consultations, the participant may be alone or may elect to have a family member present. For the first unsupported consultation, the clinician and participant introduce themselves, and the clinician provides some background information, including their credentials and experience.

Privacy and confidentiality

Telehealth consultations should be private and confidential. Clinicians should have processes in place to facilitate this as per standard face-to-face consultations. The participant's privacy and confidentiality should always be maintained.

Aurora Early Intervention and Behavioural Services reviews privacy and confidentiality risks associated with telehealth consultations and develops procedures to mitigate such risks, which include, but are not limited to:

- implementing an appropriate system to prevent interruptions during a consultation (at both clinician and participant end)
- requesting that participants join a telehealth consultation in a quiet room where they will not be interrupted
- alerting other staff that a telehealth consultation is being conducted and requesting not to be disturbed
- storing all recorded telehealth conversations securely, so the participant's privacy and confidentiality are maintained
- selecting telehealth video conferencing technology (hardware and software) that offers appropriate security features
- storing all reports provided for, or generated from, the telehealth consultation securely online with password access
- informing the participant if there is a valid and clinically appropriate reason for the recording of a consultation and requesting and receiving their verbal consent.



TECHNOLOGY

Basic requirement of telehealth

The basic requirement of telehealth is the transfer of audio and visual data in real-time between the clinician and the patient.

Only specific telehealth technology (hardware and software) appropriate for participants will be used to conduct telehealth consultations.

Encryption, ease of use and access is considered as part of the software selection (e.g., Zoom has encryption storage capacity and is accessible from home computers and tablets).

Adequate performance

The information and communications technology used for telehealth should be fit for the clinical purpose of the consultation. Specifically:

- the equipment is reliable and works well over the locally available internet network and bandwidth
- the equipment is compatible with the technology used by the patient-end health worker
- the equipment and the network are secure, so privacy and confidentiality are assured during the consultation
- the equipment is of a high enough quality to facilitate clear communication with all participants and to transfer accurate clinical information.

Risk management

Aurora Early Intervention and Behavioural Services will conduct a risk analysis to determine the likelihood and magnitude of foreseeable problems using telehealth consultations. The analysis will include:

- identifying the limitations of technology being used
- developing procedures for detecting, diagnosing and repairing equipment and repairing connectivity issues
- availability of equipment and connections
- software support services available.

Possible risk management strategies

Issue	Strategy
Computer breakdown	<ul style="list-style-type: none"> ● Contact technician to repair ● Purchase a new computer ● Have a spare computer available
Privacy and confidentiality	<ul style="list-style-type: none"> ● Consent in writing ● Verbal consent at the beginning of each consultation



	<ul style="list-style-type: none"> • Encrypted video kept in participant's file • Secure encrypted server
Internet failure	<ul style="list-style-type: none"> • Phone participant • Reschedule
Encrypted end-to-end software	<ul style="list-style-type: none"> • Locate encrypted software • Determine if accessible via participant systems • Inform participant of any breach
Zoom	<ul style="list-style-type: none"> • Encrypted storage • Review for end-to-end encryption (currently being developed) • Use of waiting room

SERVICE EXIT AND TRANSITION POLICY AND PROCEDURE

The purpose of this policy and procedure is to demonstrate Aurora Early Intervention and Behavioural Services's commitment to transparent and service exit procedures that respect the rights of participants and support the transition to service providers when required.

POLICY

Aurora Early Intervention and Behavioural Services understands the right of service users to exit from the service and transfer to other service providers.

Aurora Early Intervention and Behavioural Services understands that participants have the right to terminate their service provision with Aurora Early Intervention and Behavioural Services.

Aurora Early Intervention and Behavioural Services will ensure exit procedures are fair, transparent and respect the rights of the participants.

PROCEDURES

All participants have the right to terminate their service provision at any time.

Aurora Early Intervention and Behavioural Services will provide exiting participants with an Exit Interview and will outline reasons for service termination (if applicable) and also obtain feedback.

Aurora Early Intervention and Behavioural Services will track service exit and referral information on the participant management system.

If required, participants will be provided with information and support to access a representative of their choice to help them with access the service.



Aurora Early Intervention and Behavioural Services will inform participants of their rights and responsibilities.

If a participant is asked to leave the service, information regarding the reason for being asked to leave will be provided to the participant and their representative.

Aurora Early Intervention and Behavioural Services will only terminate participant service, when the participant cannot be cared for with the resources available to Aurora Early Intervention and Behavioural Services or the participant's condition changes to the extent that the participant no longer needs home care.

On cessation of service, the participant will be informed of their rights in writing to future service provision and information regarding advocacy.

Participants who have their services terminated by Aurora Early Intervention and Behavioural Services have the right to appeal.

Appeals should be directed in writing to the Management Team and a final decision will be made by the Director.

Participants who successfully appeal will be supported to continue accessing Company's services.

Participants who are not successful in their appeal will be provided advice in writing to this effect.

If a person is unhappy with outcome of their appeal, they will be directed to Aurora Early Intervention and Behavioural Services's Complaints and Feedback process.

Aurora Early Intervention and Behavioural Services will work with participants and their representative to identify alternative services and referrals could best meet their needs.

An Exit Plan will be agreed with the participant and with their informed consent.

The Plan will contain identified timeframes outlining actions and those responsible to implement the actions.

Participants who have chosen to exit the service have the right to re-access services within a 30 day period of exiting, without having to follow formal access processes, provided the necessary service resources are available.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery process.

DIVISION 4 - SUPPORT PROVISION ENVIRONMENT

PARTICIPANT MONIES POLICY AND PROCEDURE

The purpose of this procedure is to provide guidelines for Aurora Early Intervention and Behavioural Services in relation to the management of its participant's funds and to ensure relevant checks and balances are in place to ensure compliance.

POLICY



Aurora Early Intervention and Behavioural Services works with participants and their representatives to develop an Individualised Budget as per the participant's NDIS Service Agreement or Aged Care Home Care Agreement.

Aurora Early Intervention and Behavioural Services can charge participants an administration fee which will be captured in the participant's NDIS Service Agreement or Aged Care Home Care Agreement.

PROCEDURES

NDIS participants' individualised budgets will include:

- The participant's goals, assessed needs and preferences.

- Funds available in their plan

- Service preferences and selections outlined in the care plan

Individualised budgets must be amended whenever participants' care plans or costs change.

Aurora Early Intervention and Behavioural Services will provide participants with a monthly statement of funds available and their expenditure in respect of the care and services delivered.

Aurora Early Intervention and Behavioural Services will provide families and/or their representatives with reports about participants' funds on an as required.

Aurora Early Intervention and Behavioural Services will report to the relevant stakeholders including government bodies where any discrepancies in the money management system occur.

Fee for service participants

Participants are given a list of fees for service when they enquire about care and services.

Service is agreed, documented and signed.

When participant preferred payment option is direct debit, a direct debit form is completed.

When direct debit is used, the amount will be debited from the participant account fortnightly on a set day of the month by Management liaising with the participant's bank.

Details of the participant direct debit are sent to Management (a copy is given to the participant; the original is kept in the Management office).

When a participant chooses to pay in cash, this must be receipted immediately and recorded.

A monthly tax invoice and statement is sent to each participant, clearly showing fees for care and services provided.

When an adjustment is needed, a 'fee adjustment form' is used; a new original and copy are required, and the obsolete forms are written across as 'obsolete' with date and the initials of the employee making the adjustment.

When a participant leaves the service, Management is to be informed so they can make any adjustments or reimbursements in a timely manner.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this



clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

DISASTER MANAGEMENT

Purpose

The purpose of the *Disaster Management Policy and Procedure* is so our participants feel safe in the event of a disaster (natural or pandemic), knowing Aurora Early Intervention and Behavioural Services will provide them with continuity of service. Aurora Early Intervention and Behavioural Services focuses on maintaining service delivery to our participants in times of stress and uncertainty.

Though disasters and emergencies may be infrequent, we acknowledge our services are especially important before, during, and after such events, as many participants are beyond the reach of other services and Aurora Early Intervention and Behavioural Services provides them with an essential support lifeline.

Aurora Early Intervention and Behavioural Services recognises that preparedness for disasters and emergencies is a priority for our organisation and a requirement to ensure the safety of our participants.

Aurora Early Intervention and Behavioural Services will endeavour to provide an adequate level of service to our participants before, during and after all types of emergencies.

Scope

The scope of this policy includes our participants and staff. Our participants will be informed of our emergency procedures to assist them prepare for an emergency, build their resilience, and maintain their confidence in Aurora Early Intervention and Behavioural Services.

Our staff will be well informed and prepared to assist them to cope in an emergency situation within the community, and to strengthen Aurora Early Intervention and Behavioural Services's disaster resilience.

POLICY

Aurora Early Intervention and Behavioural Services places the safety and care of our participants at the forefront of all of our operational procedures. During a disaster, our team will adhere to this policy framework and also work within any additional guidelines and instructions provided to our organisation by state and federal government authorities.

During any type of disaster, our senior management will undertake the following actions:

1. Follow all relevant government guidelines and instructions.
2. Communicate Aurora Early Intervention and Behavioural Services's response to staff, participants and any other relevant parties.



3. Prepare participants (before any possible actions are taken) by informing how the current situation may affect their services.
4. Brief our entire staff on any possible or real action steps required by them.
5. Attempt to keep key workers allocated to the same participants.
6. Work towards maintaining continuity of support for each of our participants.

PROCEDURE

Preparing for disasters and emergencies

An **emergency** is a situation of grave risk to health, life or environment. A **disaster** is any phenomenon, natural or man-made, that has the potential to cause extensive destruction of life and property. The mere mention of either of these two words is enough to make the community, particularly our participants, extremely nervous.

Some disasters and emergencies Aurora Early Intervention and Behavioural Services may face include:

- flood
- fire
- heatwave
- snowstorm
- storms or cyclones
- pandemic.

Aurora Early Intervention and Behavioural Services will:

- stay informed regarding all state/territory and federal government directives and act upon these directives appropriately
- advise other organisations, who work with Aurora Early Intervention and Behavioural Services, of our disaster procedures and processes
- identify personnel who are critical in the delivery of essential frontline services
- identify Aurora Early Intervention and Behavioural Services participants, and their stakeholders, whose services may be impacted by the situation
- implement this policy in conjunction with our Risk Management Policy and Procedure, our Information Management Policy and Procedure and our Human Resource Policy and Procedure.

Supporting the supporters

Vicarious trauma is a real and grave health concern for staff and volunteers of community service organisations such as ours, mainly when working with disaster-affected individuals and communities.

Our Aurora Early Intervention and Behavioural Services will determine the best means to support our staff in a disaster situation and will implement all appropriate measures as detailed in our Human Resource Management Policy and Procedure.

Consumer preparedness



Aurora Early Intervention and Behavioural Services understands that it is more likely that our participants will be adversely impacted by an emergency or disaster than others in the community.

We acknowledge that we may not be able to provide the same level of service to our participants during, or immediately after, an emergency or disaster situation. For these reasons, it is imperative that all of our participants are supported by Aurora Early Intervention and Behavioural Services to prepare for changes due to a disaster or an emergency.

Aurora Early Intervention and Behavioural Services will:

- inform participants of the current situation and how the provision of their services and workers may be impacted
- continue to provide participants with the same key workers, if they are available
- replace key workers with experienced workers who have the knowledge and skills to provide appropriate care to the participant
- inform the participant of any service changes and outline reason/s for these changes
- seek support within the local care community, if our staff are unavailable, and ensure that any new workers are appropriately experienced, trained and hold all relevant checks required.

Staff preparedness

Our team is our greatest asset, it is our focus that they and their loved ones remain safe during an emergency or disaster situation.

Aurora Early Intervention and Behavioural Services will help prepare our staff for an emergency or disaster by implementing the following:

- inform staff of the situation and what is required by them via email, online messaging, Zoom meetings or similar
- train workers in all required measures, e.g., infection control, social distancing and evacuation
- seek feedback from participants regarding their services to adjust information distribution, if necessary
- inform staff of our participant's requirements outlined in their support plan

EMERGENCY MANAGEMENT POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure the safety of staff, participants and other stakeholders during emergencies such as a fire or other emergencies.

POLICY

The health and safety of staff and participants is of paramount importance to Aurora Early Intervention and Behavioural Services.

Aurora Early Intervention and Behavioural Services is committed to the health and safety of its staff, employees, volunteers, contractors, participants, families, carers and visitors.

Aurora Early Intervention and Behavioural Services is committed to the implementation of clear and effective emergency management procedures.



Aurora Early Intervention and Behavioural Services will comply with all laws and mandatory standards relating to fire protection, health and general safety

Aurora Early Intervention and Behavioural Services will ensure that participants in its care are appropriately protected from fire risk.

Aurora Early Intervention and Behavioural Services will respect the homes of participant's who live in the community, whilst balancing the provision of support, their duty of care to participants, and the need to keep participants, staff and volunteers safe whilst they are receiving and delivering services.

PROCEDURES

Aurora Early Intervention and Behavioural Services will provide comprehensive emergency procedure training for all employees including mandatory fire safety training.

Aurora Early Intervention and Behavioural Services will provide employee's emergency training yearly.

Participants Planning

Aurora Early Intervention and Behavioural Services will develop an individual emergency plan for all participants taking into consideration their physical and mental condition, their location and mobility, e.g., epilepsy management plan.

Aurora Early Intervention and Behavioural Services will work with participants to document the plan and ensure they understand how employees will work with them in an emergency.

Aurora Early Intervention and Behavioural Services will keep emergency contact list for participants and employees up to date.

Aurora Early Intervention and Behavioural Services will ensure all participants have gas, electricity and emergency numbers clearly displayed in their home.

Aurora Early Intervention and Behavioural Services will keep participant's medical history, allergies, mobility status and walking aids, vital medication details and communication devices or difficulties on the master list for emergencies.

Aurora Early Intervention and Behavioural Services will liaise with local disaster management committees.

Aurora Early Intervention and Behavioural Services will list local area evacuation centers.

Aurora Early Intervention and Behavioural Services will identify lines of communication with participants and employees.

Fire Emergency / Community Disaster

On days of extreme fire danger, Management is to keep employees and participants informed of local dangers and the need for evacuation as required.

Employees must know and understand where and how to access their local evacuation areas and the evacuation areas for participants, which are noted on each participant's emergency plan.

Participants who live remotely or in high fire risk areas to have family and neighbours as part of their fire and evacuation plan and relevant numbers listed on their emergency plans.

Employees must activate fire plans in a timely manner on days of extreme fire danger.

Management to keep informed on emergency updates on days of extreme weather warnings.



Participants and employees to understand each individual's emergency fire plan.

Emergency contact details to be kept current and checked at each review.

Emergency procedures and guidelines to be mandatory yearly training.

Participants to understand that while Company will do all it can to assist it may not be possible for employees to assist each individual participant in an emergency and they should follow their individual plan in the case of high fire risk.

A list of emergency accommodation to be listed in the Management fire plan.

Planning for summer fire season should take place in winter months so all is in readiness prior to the summer (fire danger months).

Management to list local fire and emergency services contact numbers and local council emergency numbers on the Participants Emergency Plan

Ensure participants have an emergency kit including water, torch, batteries, protective clothing that could be used in an emergency and a list of their medications and doctor/pharmacy.

Keep away from any fallen wires.

Do not attempt to drive until the area is declared safe.

If in an evacuation centre - Employees and participants should not return home until it is safe to do so.

Management to call a debrief meeting post fire to ensure employees and participant management was handled well and if not, outline improvements that could be implemented for the future.

Participant emergency readiness

Aurora Early Intervention and Behavioural Services will actively work to improve the safety of vulnerable people in emergencies through encouraging and supporting participants to undertake personal emergency planning.

Where there is recognised bushfire risk, specific bushfire planning will be undertaken in addition to basic personal emergency planning.

Aurora Early Intervention and Behavioural Services will support participants to exercise their choice and control in emergency response processes through listening to their needs and preferences for care, as well as seeking participants and other relevant stakeholder's participation and feedback when identifying risks and developing solutions.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

SAFETY AND SECURITY POLICY AND PROCEDURE



The purpose of this policy and procedure is to ensure that Aurora Early Intervention and Behavioural Services provides a safe and secure work environment for all participants, staff and other stakeholders.

This policy and procedure apply to all staff and meets relevant legislation, regulations and standards. It should be read in conjunction with Aurora Early Intervention and Behavioural Services Work Health and Safety Policy and Procedure.

POLICY

Aurora Early Intervention and Behavioural Services ensures the safety and security of staff and visitors by implementing a variety of security measures.

PROCEDURES

Aurora Early Intervention and Behavioural Services's premises have a security alarm system.

All visitors to the service may gain entry to Aurora Early Intervention and Behavioural Services premises via the unlocked front door to office, a doorbell chimes to alert staff of visitor entry.

The office is located in a building that allows pedestrian access for staff with a key, at the front door. The front door will remain unlocked during office hours and staff are expected to lock the office door after 5.00pm. Staff can gain entrance to the car park garage via a security remote device (automatic gate opener) supplied to authorised staff.

The last staff member to leave Aurora Early Intervention and Behavioural Services premises each day is to turn off all the office lights, set the alarm at the front door and to key lock and bolt the front door.

The Director will be informed of and approve work taking place after hours or on weekends, and the Operations Manager will be informed.

All staff and visitors must follow instructions given by Aurora Early Intervention and Behavioural Services's nominated fire warden or the Operations Manager during security and fire drills or during an emergency situation.

Staff members must ensure that any participants and visitors are escorted to the evacuation point, provided it is safe to do so.

Staff will be provided with a key lockable drawer or cabinet in which to keep their valuables.

In the event of damage or theft of personal property, staff, participants and visitors should inform the Director who will take further action such as contacting the Police.

Any theft or damage to Aurora Early Intervention and Behavioural Services premises or property will be reported to the Director who will take further action, such as contacting the Police and relevant insurance company.

Incidents relating to safety and security should be reported in accordance with Aurora Early Intervention and Behavioural Services's Incident Management policies and procedures.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.



Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

PHYSICAL ACCESSIBILITY POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure that Aurora Early Intervention and Behavioural Services provides a physically accessible service environment that is responsive to its participants' support and communication needs.

This policy and procedure apply to all staff and meets relevant legislation, regulations and standards. It should be read in conjunction with Aurora Early Intervention and Behavioural Services Work Health and Safety Policy and Procedure.

POLICY

Aurora Early Intervention and Behavioural Services ensures that its services are physically accessible and safe. It takes a continuous improvement approach to ensuring ongoing accessibility for all staff, participants and other stakeholders.

PROCEDURES

Information for participants will be provided in a variety of formats such as different languages, Easy English, face-to-face or phone explanation by staff, and the use of interpreters and advocates. Specific formats provided will be responsive to demand data (see Aurora Early Intervention and Behavioural Services Service Access Policy and Procedure) and individual participant needs.

Aurora Early Intervention and Behavioural Services will provide suitable participant resources to accommodate the local population. This will take into account cultural backgrounds, disabilities, age and developmental stage where appropriate. Any premises signage will also be consistent with local population requirements.

Where physical access issues are identified, the Director will consider how the premises might be modified to accommodate a person's needs. Where reasonable, the Director will ensure permanent modifications are made.

Where participants or stakeholders are unhappy with any aspect of the service's accessibility, they will be directed to Aurora Early Intervention and Behavioural Services Complaints, Compliments and Feedback Policy and Procedure.

Aurora Early Intervention and Behavioural Services premises and service provision will take into account wheelchair accessibility such as ramped access to the premises; proximity to public transport; and phone service reliability during advertised opening hours.

Entries and exits will be clearly lit, slip-resistant, signposted and clearly marked. Appropriate entries and exits will be available for mobile equipment, such as wheelchairs (where possible).

The office has steps with no ramp or lift to aid wheelchair or disability access. Whilst participants do visit the office, at times, it is preferable to make alternate arrangements including meeting with participants in their home or within the community.

Aisles and walkways will be at least 600mm wide, free of furniture and other obstacles, and where necessary clearly marked with yellow lines. Staircases will be guarded with upper and lower rails, with a handrail on at least one side.

Power-operated doors and gates will have safety features to prevent people being struck or trapped. They will also be suitably signposted, to warn of potential hazards.



Staff will maintain good housekeeping practices and a tidy workplace at all times to reduce the risk of injury from slips and trips.

Work areas will have enough space to allow someone to move about freely without strain or injury and evacuate quickly in case of emergency.

Where noise, heat or manual tasks are involved, a larger work area will be provided where possible.

Floors will be slip resistant and free of any hazards, such as cables and loose tiles, which can cause slips or trips. Carpet or mats will be used in office areas and where staff are undertaking static standing work.

The Operations Manager will ensure there is sufficient light to enable staff to perform tasks without straining their eyes or adopting awkward postures. Additional lighting will be used at places of particular risk.

Internal workplaces will be properly ventilated with windows and doors, fans or air-conditioning.

The service environment temperature will be maintained between 20°C and 26°C. Staff, participants and other stakeholders should report conditions that are too hot or too cold to the Operations Manager.

Equipment must not produce noise that exceeds the maximum noise level recommended by the Standards Association of Australia or as specified in local laws. If noise causes discomfort, staff, participants and other stakeholders should report the problem to the Operations Manager and options to reduce noise/provide PPE may be considered.

Aurora Early Intervention and Behavioural Services will provide clean, safe and accessible toilets, drinking water, washing and eating facilities, and secure storage for personal items.

Where staff, participants or other stakeholders are working or undertaking activities outdoors, they will have access to shelter for eating meals and taking breaks, and to protect themselves in adverse weather conditions. They will also be given personal protective equipment (PPE) for protection against the sun.

Working alone or remotely increases the risk of any job, particularly exposure to violence and poor access to emergency services. Staff who are required to work alone will be provided with appropriate communication systems and other safety equipment.

Incidents relating to physical accessibility should be reported in accordance with Aurora Early Intervention and Behavioural Services's Incident Management policies and procedures.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes

FOOD STORAGE & PREPARATION POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure that Aurora Early Intervention and Behavioural Services staff prepare and store food to ensure it does not become unsafe or unsuitable for consumption.



This policy and procedure apply to all staff and meets relevant legislation, regulations and standards. It should be read in conjunction with Aurora Early Intervention and Behavioural Services Work Health and Safety Policy and Procedure.

POLICY

High standards of hygiene and product protection will be maintained in relation to food handling throughout all program and services in accordance with all relevant regulations, acts and standards.

PROCEDURES

Information for participants will be provided in a variety of formats such as different languages, Easy English, face-to-face or phone explanation by staff, and the use of interpreters and advocates. Specific formats provided will be responsive to demand data (see Aurora Early Intervention and Behavioural Services Service Access Policy and Procedure) and individual participant needs.

Aurora Early Intervention and Behavioural Services will provide suitable participant resources to accommodate the local population. This will take into account cultural backgrounds, disabilities, age and developmental stage where appropriate. Any premises signage will also be consistent with local population requirements.

Staff should report any observed practice by any other person that they believe to be in conflict with general hygiene standards to the Operations Manager immediately, in order to rectify the problem.

Staff are expected to report to work each day in clean clothing. Hair should be clean, tidy and secured in place.

Appropriate hair covering must be worn if hair is longer than shoulder length.

Clean gloves must be worn at all times while preparing food and should be changed regularly. Gloves should not be used when handling money.

Tongs or other appropriate utensils must be used in handling food where gloves are not appropriate. Smoking, eating and drinking is not allowed in areas where food is stored, prepared or served. Hands must be kept clean and must be washed regularly with soap and hot water, especially:

- when entering a food handling area.
- before touching any cooked or prepared food and after handling raw food.
- after using the toilet.
- after having a cigarette.
- after handling garbage or cleaning equipment and chemicals.
- after using a handkerchief or tissue or stifling a sneeze or cough.
- after handling money.
- before resuming work after any break or change in work area; or
- after touching hair, face or other parts of the body.

Staff involved in food preparation should immediately report the following to the Operations Manager any skin irritations (eczema, dermatitis etc.) especially on the hands; any stomach complaints or bowel conditions; feeling generally unwell; any changes in health which may affect their ability to perform duties; and all cuts, scratches and wounds which may contaminate food.



All staff involved in food preparation and storage must familiarise themselves with this policy and procedure and follow all control measures to prevent food contamination / illness. Where further guidance is required, refer to the Australia New Zealand Food Standards Code and Safe Food Australia - A Guide to the Food Safety Standards.

Staff must ensure that the temperature of potentially hazardous food is either at 5°C or colder or at 60°C or hotter when it is received, served, transported or stored.

Examples of potentially hazardous foods are raw and cooked meat or foods containing meat, such as casseroles, curries and lasagne; dairy products; seafood; processed fruits and vegetables, salads; cooked rice and pasta; foods containing eggs, beans, nuts or other protein rich foods, such as quiche and soy products.

Staff do not have to keep potentially hazardous food at any specified temperature when preparing it because that would be impractical, but they must keep the processing or preparation time as short as possible so that bacteria do not get a chance to multiply to dangerous levels or form toxins.

Previously cooked and cooled potentially hazardous food must be reheated rapidly to 60°C or hotter. Ideally, food should be reheated to 60°C within a maximum of two hours to minimise the amount of time that food is at temperatures that favour the growth of bacteria or formation of toxins.

Potentially hazardous foods should be cooled to 5°C or colder as quickly as possible. There may be food poisoning bacteria in the food even though it has been cooked. Faster cooling times limit the time when these bacteria are able to grow or form toxins.

Food must be cooled from 60°C to 21°C in a maximum of two hours and from 21°C to 5°C within a further maximum period of four hours.

Incidents relating to infection control or infectious diseases should be reported in accordance with Aurora Early Intervention and Behavioural Services's Incident Management policies and procedures.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

VEHICLE POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure the safety of staff, participants and other stakeholders when service delivery requires the use of vehicles.

This policy and procedure apply to all staff and meets relevant legislation, regulations and standards. It should be read in conjunction with Aurora Early Intervention and Behavioural Services Work Health and Safety Policy and Procedure.

POLICY



The health and safety of all Aurora Early Intervention and Behavioural Services staff, volunteers, contractors, participants and visitors are of utmost importance, including when service delivery requires the use of vehicles.

PROCEDURES

Management Team will review the appropriateness of vehicles used by Aurora Early Intervention and Behavioural Services staff for the types of work activities they are undertaking.

Management Team ensure comprehensive insurance and a roadside assistance scheme is in place for all Aurora Early Intervention and Behavioural Services -owned vehicles (where applicable).

Management Team will implement a maintenance program for vehicles used in its service delivery (owned, leased and privately owned) to ensure safety, roadworthiness, reporting/clearing of defects and passenger comfort; and Management Team will review and analyse all vehicle incidents.

Operations Manager will:

- ensure relevant staff have valid driver's licenses and verify these annually in accordance with Aurora Early Intervention and Behavioural Services Human Resources Policy and Procedure.
- ensure staff using their own vehicles have current registration and compulsory third party (CTP) insurance for their vehicles in place.
- ensure staff transporting participants have current criminal history checks in place.
- ensure staff have properly maintained vehicles and all vehicles are checked prior to use.
- escalate concerns about vehicles and staff driving capabilities to the Management Team.
- ensure all vehicles are supplied with equipment such as first aid kits, fire extinguishers (where required), reflective vests, reflective triangles, emergency contact numbers, torches and other required emergency supplies; and
- review and analyse all vehicle incidents with the Management Team.
- Staff must apply normal hazard and risk management techniques in their day-to-day work and whenever driving any vehicle.
- Certain driving environments will present a greater hazard than others. Staff must take the following actions to manage the risks:
 - not drive unlicensed.
 - not drive under the influence of drugs or alcohol.
 - conduct pre-use safety checks of vehicles (see below).
 - where possible, ensure participants being transported are not sitting behind the driver and are secured appropriately.
 - follow all applicable road rules at all times.
 - take regular breaks from continuous driving as required, and at least every two hours.
 - not drive 2WD vehicles in off-road environments.
 - report any vehicle accidents immediately to the Police and Operations Manager, or another member of the Management Team.



- inform the Operations Manager when entering areas where there is an increased potential for vehicle immobilisation; and
- report immobilisation events including breakdown and bogging as an incident in accordance with Aurora Early Intervention and Behavioural Services's Incident Management policies and procedures, to enable better information to be gathered regarding the suitability of vehicles and the training provided to staff.

When undertaking vehicle pre-use safety checks, staff will, at a minimum ensure the manufacturer's specified service schedule is being adhered to; inspect all external lights (grime can reduce their effectiveness by up to 40%); inspect wiper blades to ensure they clear the windscreen effectively; clean the windscreen and rear window; check all fluid levels - engine oil, transmission fluid, brake fluid, power steering fluid, windscreen washer fluid and the radiator coolant; check radiator hose condition and that hose clamps are tight; check tyre pressure and condition; and ensure mirrors are present and oriented correctly for use.

By law, all occupants of a vehicle must wear seatbelts at all times. If a seat belt is starting to show signs of wear and tear, (frayed, not retracting back) the vehicle needs to be seen by an authorised repairer. For Aurora Early Intervention and Behavioural Services -owned vehicles (where applicable), staff should refer the matter to the Operations Manager. Staff must not use a hand-held mobile telephone when driving. Staff must pull over and stop the vehicle's engine before answering or making phone calls or reading or responding to texts.

Staff must drive at a speed that suits the road conditions, vehicle, weather conditions and their driving experience and not exceed the applicable speed limit for the road used.

Staff should undertake a risk assessment to determine if a participant can be transported alone in a vehicle.

Generally, participants with behaviours of concern should not be seated behind the driver and must wear a seat belt.

Staff must use good manual handling techniques when transferring mobility restricted participants or handling wheelchairs or equipment.

Vehicle incidents should be reported in accordance with Aurora Early Intervention and Behavioural Services's Incident Management policies and procedures.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

PARTICIPANT MONEY AND PROPERTY POLICY AND PROCEDURE

Purpose and Scope



The purpose of this procedure is to ensure that staff assisting a participant to manage their financial affairs, or who have access to a participant's personal belongings, do so in an honest, transparent and accountable manner, and in the best interests of the participant.

This policy and procedure apply to all staff and meets relevant legislation, regulations and standards as set out in Schedule 1, Legislative References for NDIS Services.

NDIS documents relevant to this policy and procedure include:

- Financial Management Policy and Procedure
- Participant Charter
- Feedback, Compliments and Complaints Policy and Procedure
- Human Resources Policy and Procedure
- Staff Code of Conduct Policy and Procedure
- Protecting Participants from Harm Policy and Procedure
- Service Access Policy and Procedure
- Compliance Policy and Procedure
- Risk Management Policy and Procedure
- Participant Incident Management Policy and Procedure
- Participant Rights and Responsibilities Policy and Procedure
- Service Delivery and Participation Policy and Procedure
- Protecting Participants from Harm Policy and Procedure
- Records and Information Management Policy and Procedure

Definitions

Financial abuse - any act which involves misusing the money or property of a person with disability without their full knowledge and consent. This includes theft of money, pension cheques or property as well as misuse of a power of attorney.

POLICY

Aurora Early Intervention and Behavioural Services recognizes that there is a balance between providing assistance to participants to manage their own financial affairs as much as possible and protecting the rights of people who may be vulnerable to exploitation. Direct responsibility for managing participants' financial transactions should only be assumed by staff where the participant is unable to do so themselves.



Aurora Early Intervention and Behavioural Services has processes in place to ensure any staff access to a participant's money or other property is managed, protected and accounted for. Any assistance provided should promote autonomy, choice and independence as well as protect the participant and Aurora Early Intervention and Behavioural Services staff.

PROCEDURES

Participant Funds

Staff must maintain confidentiality regarding participants' funds and accounts. Any inquiries about a participant's finances by third parties must be directed to the Director.

Where a staff member believes a participant cannot manage their own financial affairs with some assistance from a support worker, they must refer the matter to the Director. A substitute decision maker may need to be appointed for the participant (see Aurora Early Intervention and Behavioural Services Decision Making and Choice Policy and Procedure).

Where assistance in managing financial affairs is required, a Consent Form must be obtained from the participant and retained on their file. Participants' money may only be used for the purposes intended by the participant. The arrangements for supporting participants to manage their finances must also be clearly set out in their NDIS Service Agreement and Support Plan, which are to be reviewed on at least an annual basis.

Staff must support participants to keep their funds safe and not use a participant's PIN or other access codes when assisting them to manage their finances. A participant's funds may only be used for their benefit of that participant – staff must not make personal purchases with the participant's money or borrow money from the participant.

While staff may share, at no cost to themselves, in meals and other special occasions that are part of a participant's activities, they must pay for their own meals when solely accompanying participants. The use of a Companion Card is encouraged to cover the cost of entry into venues or entertainment for a staff member when they are accompanying a participant as part of their Support Plan. Where a Companion Card is not available or accepted, staff must not allow a participant or their family to pay for their entrance to any venues or entertainment. Such instances should be referred to the Director, who will determine who should pay for the entry cost.

Staff must not provide participants with financial advice or information, other than that reasonably be required under the participant's NDIS or Support Plans.

More generally, in managing participants' Support Plans, the Director will:



assist participants with budgeting and the purchase of goods and services from Aurora Early Intervention and Behavioural Services and other services, ensuring that as far as possible, participants get value for money and that they are not taken advantage of.

monitor the appropriateness of fees levied by the organization against participants.

check transactions that occur within management of the participants' Plan against funds received and payments made.

monitor the appropriateness of signatories of participants' finances.

ensure invoices and statements are provided to participants on at least a monthly basis; and

collate and store all current and previous checked and audited accounts and budget information.

Participant Account

The participants who are over 18, shall have an account in a bank under their own name. All incomes and payments should be through this account, if applicable.

The participants account that are management by a staff and workers member shall have at least two approved signatures for any withdrawal and receipts for each transaction should be available for further checks.

It is always recommended to implement direct debit for transactions, if possible.

Unwanted or Incidental Payment or Withdrawal

Participant's amount of money kept in premises should be the minimum.

Signatories shall be able to identify whether the transaction is genuine or not and is for benefit of participants.

Signatories are encouraged not to sign any blank withdrawal forms under any circumstances.

Roles and Responsibilities of Workers and Staff

If workers are directly involved in participant's fund management, are responsible for:

Assisting participants with their money handling as well their purchases in a way that doesn't involve any advantages for themselves and is all for participant's benefit

Money withdrawal: in emergency cases, money withdrawal should be requested, and all receipts shall be available for further information and check

Ensuring that money withdrawal is in the stated limit if they are a signatory

Ensuring that funds are kept safely in a safe area to be accessible at all time

Any discrepancy in the participant's account shall be reported to the relevant manager

Creating a report on participants funds and present it to the relevant managers, regularly.

If workers are in any role that is related to monitoring participants funds, are responsible for:

Checking participant's fund on a regular basis

Providing reports to the participant's families, if required

Ensuring that participant's income is deposited correctly into their account

Prepare managerial reports to the Director related to all audits

Keeping records of all current and previously checked receipts



Checking whether the received funds and withdrawal funds are even
Checking the payments whether those are appropriate or not

Participant Property

Aurora Early Intervention and Behavioural Services does not accept liability for loss or damage to property, valuables or essential participant equipment, but staff must take all reasonable care in the management of participant belongings.

Where supports are delivered in participants' homes, reasonable wear and tear to equipment such as vacuum cleaners, toasters, kettles, etc., should be expected and it is the responsibility of the participant to meet such costs.

When supporting participants in the community, staff must ensure the amount of property the participant has with them is kept to a minimum and is kept securely by the participant (where possible) or supporting staff member when not in use.

Reporting

Suspected or alleged financial abuse must be reported in line with Aurora Early Intervention and Behavioural Services Participant Incident Management Policy and Procedure. Where loss or damage to a participants' property, including money, may have involved a Aurora Early Intervention and Behavioural Services staff member or occurred during the course of service delivery, it must also be reported in accordance with the Participant Incident Management Policy and Procedure.

Participants and their supporters also have access to Aurora Early Intervention and Behavioural Services Feedback, Compliments and Complaints processes, should they wish to provide feedback or make a complaint regarding the handling of their finances or property.

Aurora Early Intervention and Behavioural Services's Director and staff will not undertake the management of a participant's personal funds.

MONITORING AND REVIEW

This policy and procedure will be reviewed at least annually by the Management Team. Reviews will incorporate staff, participant and other stakeholder feedback.

Aurora Early Intervention and Behavioural Services Continuous Improvement Register will be used to record identified improvements and monitor the progress of their implementation. Where relevant, this information will be fed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

INFECTION CONTROL POLICY AND PROCEDURE

The purpose of this policy and procedure is to minimise the transmission of infections. Aurora Early Intervention and Behavioural Services has commitments to ensure infections are controlled and high levels of hygiene are maintained.

Definition



Infectious diseases – also known as communicable diseases; caused by organisms such as bacteria, viruses, fungi and parasites. These micro-organisms are able to invade and reproduce in the human body, and then cause harmful effects. In healthcare settings, the main modes for transmission of infectious agents are contact (including blood borne), droplet and airborne.

POLICY

Aurora Early Intervention and Behavioural Services understand it has duty of care to protect the health and wellbeing of service users and to encourage other staff to protect themselves.

Aurora Early Intervention and Behavioural Services is committed to preventing and/or minimizing risk to employees, participants and visitors from infectious diseases.

PROCEDURES

Staff may encounter participants with infectious diseases in the course of their work.

All staff and volunteers will receive infection control training.

Aurora Early Intervention and Behavioural Services staff and volunteers will follow infection control guidelines and procedures.

Notifiable diseases are diseases that must be reported to the Health Department by health practitioners. Any staff member that has a notifiable disease must not attend work until such time as they are cleared by their doctor. A list of notifiable diseases can be found at: <http://www.health.gov.au/casedefinitions>

All necessary equipment will be available to staff and volunteers.

Staff have a responsibility to educate service users about correct infection control procedures and should act as models of appropriate behaviour.

Hand hygiene and washing are considered the most important measures in infection control substances.

The following precautions should be taken:

- Gloves must be worn when handling blood and body substances.
- If a service provider has hand or other body lesions that cannot be covered, a medical practitioner should assess them before the staff member continues with work.
- If hands or other skin surfaces become contaminated with blood or body substances, they must be washed immediately or as soon as practicable.
- An alcohol hand rub may be used in emergency situations or when hand-washing facilities are limited or not easily accessible.
- Toothbrushes, razors and other personal items should never be shared.
- Towels and linen should not be shared and should not be used to clean or wipe down areas.
- Work areas need to be kept clean and safe.
- Everyone involved in preparing and servicing food should maintain high standards of personal hygiene, avoid injury to hands and ensure any open wounds are securely covered with a waterproof bandage.
- Clean and used linen should be transported and stored separately.
- Service providers should be aware of the potential hazards of sharps and other objects hidden in linen.



- Any clothing or linen soiled with blood (including menstrual blood), or body fluid should be handled with gloves and put into bags at the point where the soiling occurs.
- Used linen should not be rinsed or sorted in participant/service user areas.
- Staff responsible for sorting laundry should wear gloves.
- Staff should take care when handling blood and body fluids, as well as items or surfaces soiled with blood or body fluids, to protect exposed mucous membranes (mouth, eyes, etc) and any areas of broken skin.
- Any part of the body splashed with blood or body fluid should be washed immediately.
- Disposable gloves should be worn whenever contact with blood or other body fluid is likely to occur.
- Body fluid spills (e.g., faeces, urine) can be cleaned with detergent.
- Blood spills can be cleaned with either detergent or chlorine solution and cold water depending on the risks involved.
- If a spill occurs on carpeted/soft areas, take care not to damage the area with chlorine. Detergent may be more appropriate.
- Arrange for carpet to be shampooed with an industrial carpet cleaner as soon as possible.
- Aurora Early Intervention and Behavioural Services will provide fully equipped first-aid kit for staff who are trained in first aid.
- If a needle-stick injury occurs, the wound should be washed as soon as possible with water and soap and encouraged to bleed.
- The wound should then be dried and covered by a waterproof bandage.
- The injury should be reported to the manager and fully documented.
- It is recommended that the individual seek a medical opinion about the risk of infection and should be referred to an appropriate service.
- Incidents relating to infection control or infectious diseases should be reported as per the incident management policy and procedure.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

CHEMICAL USAGE AND STORAGE POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure the safety of staff, participants and other stakeholders when handling and storing chemicals. This policy and procedure apply to all staff and meets relevant legislation, regulations and standards. It should be read in conjunction with Aurora Early Intervention and Behavioural Services Work Health and Safety Policy and Procedure.



POLICY

The health and safety of staff and participants is of paramount importance to Aurora Early Intervention and Behavioural Services.

Aurora Early Intervention and Behavioural Services is committed to the health and safety of its staff, employees, volunteers, contractors, participants, families, carers and visitors.

Aurora Early Intervention and Behavioural Services is committed to ensuring that when chemicals are introduced onto Aurora Early Intervention and Behavioural Services premises that they are recorded, handled and disposed of appropriately.

PROCEDURES

The Operations Manager will ensure that all dangerous goods and hazardous substances are identified and clearly labeled or signed within the workplace.

The Operations Manager will ensure details of all dangerous goods and hazardous substances stored or handled in the workplace are entered into a Chemical Register.

The Chemical Register is to be reviewed when new or additional quantities of chemicals are introduced into the workplace, or when risk controls have changed, or are no longer effective.

The Operations Manager will ensure Safe Work Procedures (SWP) specific to the handling of dangerous goods and hazardous substances stored in the workplace are developed and implemented.

The Operations Manager will ensure a hard copy collection of current Safety Data Sheets (SDSs) from manufacturers and suppliers is maintained. The SDSs obtained for each chemical must be the authorised version prepared by the manufacturer.

The Chemical Register and associated SDSs are to be kept by the Operations Manager in a suitable location which is known and accessible to all staff in the workplace, as well as any other person who is likely to be exposed to the dangerous goods or hazardous substances.

The Operations Manager will ensure that all dangerous goods and hazardous substance storage containers are clearly labelled. The label on the container in which the dangerous good or hazardous substance is supplied must remain intact, legible and unaltered. The date of receipt of a hazardous substance should be marked on the original container to allow for monitoring of the age of the chemical and promote the use of older materials first.

Containers with unknown substances in them should be labelled 'CAUTION DO NOT USE: UNKNOWN SUBSTANCE' and then disposed of appropriately.

The Management Team will ensure that appropriate emergency management provisions are available for use in the event of a chemical emergency. The emergency management provisions may include spill kits or containment equipment; safe work procedures for spills or release of chemicals; fire blankets/extinguishers; first aid kits; eye wash stations/eye wash kits/emergency showers; emergency shutdown procedures for equipment; appropriate numbers of trained emergency wardens and first aiders; and appropriately displayed emergency contact details.

The Operations Manager will regularly refer to current SDSs to determine the health surveillance requirements for any staff exposed to hazardous substances in the workplace.



The Operations Manager and Compliance Coordinator will ensure that storage of chemicals is appropriate and only compatible substances are stored together (refer to SafeWork Australia Model Code of Practice: Managing Risks of Hazardous Chemicals in the Workplace

https://www.safeworkaustralia.gov.au/system/files/documents/1702/managing_risks_of_hazardous_chemicals2.pdf).

The Operations Manager will ensure that if the workplace is storing dangerous goods exceeding minor storage quantities, placards are provided as a visual warning.

The Operations Manager will ensure that all purpose-built cupboards, cabinets and refrigerators for storing chemicals are labelled to indicate the type and class of chemicals being stored in them. Additional warning signs may also be required, such as "DO NOT USE TO STORE FOOD".

The Operations Manager will ensure that chemical waste is properly packaged, labelled and stored in suitable designated areas whilst awaiting collection. Labelling must include at a minimum the product identifier, workplace details and a hazard pictogram consistent with the correct classification of the chemical (if relevant).

The Operations Manager will ensure dangerous goods, hazardous substances and chemical waste are disposed of as per the SafeWork Australia Model Code of Practice: Managing Risks of Hazardous Chemicals in the Workplace.

The Operations Manager will ensure that arrangements are in place for consultation with staff in relation to chemical management. Consultation should occur in relation to the introduction of new chemicals to the workplace; the identification and assessment of risks associated with chemicals at the workplace; decisions about control measures to be implemented; and induction and training requirements.

Hazard identification and incident reporting relating to chemicals should be carried out in accordance with Aurora Early Intervention and Behavioural Services's Incident Management policies and procedures.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

MEDICATION POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure company promotes duty of care principles that require staff to maintain a high level of competency when administering medication to participants.

POLICY

Management and administration of participant medications is important to Aurora Early Intervention and Behavioural Services.

PROCEDURES



All participants requiring medication, regardless of the level of medication assistance required, must have a Medication Chart that contains a list of current medications (or any other pharmacy prescribed items) developed by a Medical Practitioner or Pharmacist, kept in their home and on their file. This list must be updated with any change in medications (or any other pharmacy prescribed items).

Staff must ensure they are never involved in the management of medication that is beyond their skills and training. Staff must maintain up-to-date records of participants' medicines. NDIS Service Agreements and Support Plans must include clear instructions, agreed with the participant, about what steps staff will take to help the participant with their medication.

Participants self-administering and managing their own medications

- Participants will manage and administer their own medication where appropriate. Where required, the Director will request written advice from a participant's medical practitioner or guardian, notifying that a participant has appropriate training and skill to assume responsibility for the management of their own medication. Participants will be provided with every opportunity to safely manage and administer their own medication. The self-administration and management of medications by the participant is properly supervised, documented and recorded by Aurora Early Intervention and Behavioural Services's staff.

Participants unable to self-administer their own medications

Staff members are to provide the participant with whatever physical or other assistance is necessary and appropriate to enable the participant to take their own medication, unless the participant objects.

Staff who provide medication administration services will be provided with appropriate training.

Practical Requirements for the Administration of Medications

All medication must be administered in strict accordance with the directions of the prescribing medical practitioner or the manufacturer's directions as appropriate and recorded on the appropriate medication chart.

All participant medications are to be taken or administered from the Webster pack packages.

Medication is not under any circumstances to be given out or administered to a participant by another participant.

Medication Records

A medication chart is to be maintained for each participant prescribed medication. The chart is to be completed by the participant's Medical practitioner and updated whenever a medication is changed.

Where a Director (or delegate) has uncertainty about a participant's medication, this should be immediately clarified with the Medical practitioner or the dispensing pharmacist.

Disposing of Medications

All medications (including those self-administered and managed by participants) are to be returned to the pharmacist when ceased.



No 'prescription only' medication may be kept as Aurora Early Intervention and Behavioural Services's stock. Any participant's medication is to be returned to the participant at the end of the medication regime.

No medications are to be used by or for another participant or kept or allowed to accumulate with other participant's medication for use sometime later as 'stock' medication.

Reporting

Incidents relating to medication such as misuse, missing dose, overdose, missing medication and etc. should be reported in accordance with Aurora Early Intervention and Behavioural Services's incident management policies and procedures. A medication incident report must be filled and the director, family/guardian, pharmacy and the GP to be notified.

When administering medication, all support staff must comply with the following guidelines in the event of an incident involving medication. An incident report must be completed and submitted as soon as practicable to the office staff in any of the below instances:

If there is an error or adverse reaction to medication administered, staff are to contact emergency services if appropriate. Staff are to call the on-call staff member to advise of the event and follow advice of emergency services until they arrive if applicable.

If a participant refuses to take prescribed medication, staff to report to on call staff member and complete incident report.

If a participant's medication has not been administered by staff, this is classified as missed medication staff to contact on call staff member and complete incident report.

If a participant's medication has been administered incorrectly in anyway e.g. partially administered or incorrectly dated or expired medication administered an incident report must be completed.

Participant Allergies

Participant allergies are to be recorded in the participant file with their medication

information. Staff are to familiarise themselves with this and what to do should an allergic reaction occurs.

Medication Prompting

The self-administration and management of medications by the participant is properly supervised, documented and recorded by Company staff.

Staff must identify on the Support Plan that the participant requires prompting to self-medicate at specific times.

Staff must prompt the participant to self-medicate at the specified times; and record each prompt in the participant's Medication Prompt Record Log.

Medication Administration

Any staff involved in prescription of medication will be appropriately qualified and meet legislative and regulatory requirements. Staff involved in the storage, transportation, administration or prompting of medication will be trained and assessed as competent prior to undertaking any medication function. All medication must be administered in strict accordance with the directions of the prescribing medical practitioner or the manufacturer's directions.



All medications are to be taken or administered from the original containers or packages in which they were originally dispensed. Where the participant is not able to administer their own medication, this must be administered by staff trained in medication administration and be dispensed only from the participant's Webster pack.

When administering medication to a participant, staff must always comply with the six Rights of medication management:

Right person: Check photographic identification on the medication packs or the participant's file to ensure the medication is for the right person.

Right medication: Check the name of the medication on the blister pack or medication packaging against the name on the medication chart for the person.

Right dosage: For blister packs check that the right number of tablets or pills is contained in the blister. For other medication ensure the dose is clearly documented on the pharmacist's label attached to the medication.

Right time: Ensure medication is being taken at the prescribed time. Some medications will have further instructions that must be followed such as, to be taken with food, 30 minutes before food or after other medications.

Right route: Ensure medication is taken, applied or inserted using the prescribed route; and

Right record keeping: All instances of medication administration must be recorded in the participants' *Medication Administration Record Log*.

Right to refuse

Prohibited Practices

Staff must not administer any medication that is not prescribed in accordance with this policy, including 'over the counter' medication.

Staff must not administer medication to a participant who is clearly objecting in an informed manner, unless there is an approved protocol in place.

Staff must not administer medications to participants in a manner that is clearly for organisational convenience and not reflecting the preference or needs of the participant.

Staff must not leave medications of any type in an area where they are unsupervised and accessible to participants or unauthorised persons.

Aurora Early Intervention and Behavioural Services staff are providing medication support will utilise Medication Prompt Record Log; Medication Assistance Record Log; or Medication Administration Record Log.

Storing Medication

Medication for participants will generally be stored in an accessible container in a cupboard or on top of the fridge.

Medications that require refrigeration must be stored in the fridge.

For participants who are at risk of mistaking medications, medication must be stored in a locked container, which can only be accessed by staff.

Staff must adhere to the manufacturer's instructions for storing medication.

Stored medication must be easily identified and differentiated and only accessed by appropriately trained staff.



When medication needs to be transported, it should be placed in an appropriate storage container where required. All medications (including those self-administered and managed by participants) are to be returned to the pharmacist when ceased.

No 'prescription only' medication may be kept as Aurora Early Intervention and Behavioural Services's stock. Any participant's medication is to be returned to the participant at the end of the medication regime.

No medications are to be used by or for another participant or kept or allowed to accumulate with other participants' medication for use sometime later as 'stock' medication.

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

Aurora Early Intervention and Behavioural Services Continuous Improvement Plan will be used to record and monitor progress of any improvements identified and where relevant feed into Aurora Early Intervention and Behavioural Services service planning and delivery processes.

WASTE MANAGEMENT POLICY AND PROCEDURE

The purpose of this policy and procedure is to ensure participants, Aurora Early Intervention and Behavioural Services staff and any other person are protected from harm as a result of exposure to waste, infectious or hazardous substances generated during the delivery of supports.

This policy and procedure apply to all staff and meets relevant legislation, regulations and standards. It should be read in conjunction with Aurora Early Intervention and Behavioural Services Work Health and Safety Policy and Procedure.

Definition

1. **Bulk** – free flowing liquids normally contained within a disposable vessel or tubing, not capable of being safely drained to the sewer.
2. **Chemical waste** – waste generated by the use of chemicals in medical, veterinary and laboratory procedures. Chemical waste should be classified in accordance with the step-by-step waste classification process in the ADG Code.
3. **Clinical and related waste** - waste resulting from medical, nursing, dental, pharmaceutical, skin penetration or other related clinical activity, being waste that has the potential to cause injury, infection or offence. It includes clinical waste; cytotoxic waste; pharmaceutical, drug or medicine waste; and sharps waste.
4. **Clinical waste (including pathological waste)** – waste that has the potential to cause sharps injury, infection or offence. Includes sharps; human tissue (excluding hair, teeth and nails); bulk body fluids and blood; visibly blood-stained body fluids and disposable material and equipment; laboratory specimens and cultures; and animal tissues, carcasses or other waste arising from laboratory investigation or for medical or veterinary research.



5. Cytotoxic waste – material contaminated with residues or preparations containing materials toxic to cells, principally through action on cell reproduction. This includes any residual cytotoxic drug, and any discarded material associated with the preparation or administration of cytotoxic drugs.
6. Generator of waste – a person conducting work in a Aurora Early Intervention and Behavioural Services workplace, including participants' homes, where waste (for the purpose of this Policy and Procedure) is created.
7. Hazardous waste - waste arising from medical, nursing, dental, veterinary, pharmaceutical or similar practices, and wastes generated in clinical or other facilities resulting from the investigation or treatment of participants or research projects. Typical hazardous waste includes sharps, anatomical waste, clinical waste, chemically contaminated waste, infectious waste, human tissue, cytotoxic waste, pharmaceutical waste, animal waste, laboratory waste, chemical waste and radioactive waste (or items contaminated with this material such as paper towels, gloves, etc).
8. Sharps - any object capable of inflicting a penetrating injury, which may or may not be contaminated with blood and/or body substances. This includes needles and any other sharp objects or instruments designed to perform penetrating procedures.

POLICY

Aurora Early Intervention and Behavioural Services may generate waste that is unsafe to dispose of with general waste, as part of its delivery of NDIS supports. Waste disposal is important for infection control. Different types of waste have different waste management procedures that need to be followed.

Staff involved in the management of waste and hazardous substances are trained to ensure safe and appropriate handling. This includes training on any protective equipment and clothing required when handling waste or hazardous substances.

PROCEDURES

Aurora Early Intervention and Behavioural Services has a Waste Management Committee (WMC) that is responsible for implementing its Waste Management Plan. The WMC operates under specific Terms of Reference; includes representation from key areas of the business; other entities covered by the Waste Management Plan (WMP), Work Health and Safety; and include expertise in waste management.

Aurora Early Intervention and Behavioural Services's Waste Management Plan must be developed in consultation with other co-located services such as pathology services.

Aurora Early Intervention and Behavioural Services Waste Management Plan must cover governance, including oversight by the WMC and clarity of responsibilities where there is more than one business included in the plan.

Aurora Early Intervention and Behavioural Services's Waste Management Plan must include procedures for segregating, collecting, transporting, storing and disposing of waste from various areas of the service; contract management, including contractor details, contact arrangements, auditing, safe operating and spill management procedures and relevant insurances and Environmental Protection Agency (EPA) licences.

The Waste Management Committee must regularly review contractors' reports regarding waste management and collection.

Aurora Early Intervention and Behavioural Services must consider how to minimise waste, without compromising work standards, environmental outcomes or participant and staff safety.



Aurora Early Intervention and Behavioural Services will ensure waste is effectively segregated through education and training to all staff who generate waste; reviewing Safety Data Sheets for waste classified as hazardous (e.g., hazardous chemicals and dangerous goods) to ensure that waste components are handled safely, including storage and disposal; ensuring there is identifiable colour coding and labelling for waste and providing suitable containers and bags in appropriate locations.

Clinical Waste

Clinical waste classifications are determined by the level of infection not the type of waste item. Section 2.6.3 of the Australian Dangerous Goods (ADG) Code stipulates that:

Medical or clinical wastes containing Category A infectious substances must be assigned to UN2814 or UN2900 as appropriate. Medical or clinical wastes containing infectious substances in Category B must be assigned to UN3291. Medical or clinical wastes which are reasonably believed to have a low probability of containing infectious substances must be assigned to UN3291. For the assignment, international, regional or national waste catalogues may be taken into account.

Clinical or contaminated waste must be bagged, labelled and disposed of in an appropriate clinical waste bin (yellow base with yellow lid) prior to the collection date. Waste may need to be frozen prior to disposal to minimise decay. UN3291 clinical waste can be packed in portable and mobile bins as long as each bin complies with each of the following requirements:

Rigid construction with a lid that is able to be secured during transport.

Designed to be easily handled or moved.

Strong enough to withstand manual or mechanical handling and shocks and loadings normally encountered during transport, including trans-shipment between vehicles and warehouses.

Able to retain liquid under normal conditions of transport.

Easily identifiable by its colour.

Correct labelling and symbols indicating that it contains UN3291 clinical waste.

Portable and mobile bins containing UN3291 clinical waste must be marked, labelled and placed as required by chapters 5.2 and 5.3 of the ADG Code.

Pharmaceutical Waste

Pharmaceutical waste must be bagged, labelled and disposed of in an appropriate clinical waste bin (red base with red lid) prior to the collection date. Pharmaceutical waste bins must be lockable.

Pharmaceutical waste containers must be marked with the label PHARMACEUTICAL WASTE. No symbols or signage are required.

Sharp Waste

Sharps injuries are a common cause of getting infected by a blood-borne virus. The following basic requirements should apply if sharps are used or found:

whoever uses the sharp, disposes of it.

don't pass sharps by hand, use tongs.

use disposable sharps.



- don't put a used needle back in its cover, put it in a sharp's container.
- don't separate a needle from a syringe.
- don't break, burn or manipulate a sharp.
- don't clean re-usable sharps by hand, use a long-handled brush and tongs or, better still, a machine.
- don't put hands or fingers into garbage bags, laundry bags, crevices etc. – use tongs; and
- don't manually compress garbage bags – use the tie-straps to lift and carry the bag.

Sharps must be disposed of in an appropriate sharp's disposable container (yellow base with yellow lid). Sharps containers that are resistant to impact, penetration and leakage, are stable, have integrity of the handles/other carrying features and closure device, and have a capacity indicator (fill line) marked on the outside wall of the container must be used.

Staff MUST NOT use drinks cans, bottles or cardboard boxes to dispose of sharps – they may find their way into domestic waste and present a hazard to council workers and the public.

Staff should never try to retrieve anything from a sharp container or press down on the contents to make more room. Containers must be labelled and regularly emptied.

Sharps disposable containers must bear the Division 6.2 label.

Waste Transport and Disposal

Aurora Early Intervention and Behavioural Services disposes of contaminated or hazardous waste using licensed contractors for the treatment, reuse, disposal, and/or destruction of hazardous waste.

Where the contractor is required to transport Infectious Substances, Aurora Early Intervention and Behavioural Services may be required to supply them with transport documents that describe the dangerous goods being transported, and appropriate emergency information for those goods. This requirement commonly applies to clinical waste identified by the numbers UN 2814 and UN 3291.

Aurora Early Intervention and Behavioural Services must ensure that:

- its Waste Management Plan sets out procedures for waste spills.
- staff involved in spill management are trained in emergency procedures and handling requirements, including use of spill kits.
- spill kits are readily accessible and clearly labelled and mapped.
- its stocks PPE and emergency spill kits appropriate to the waste handled.

spill kits are disposed of with the relevant waste; and

spill kits are restocked with the necessary components immediately after use, returned to their locations and regularly inspected for malfunctioning or missing components.

Personal Protective Equipment

Staff must use appropriate PPE, when necessary, that is suitable for the nature and degree of the identified hazard. For tasks involving hazardous chemicals, the PPE recommended in the Safety Data Sheet (SDS) must be used.



Staff must be trained in the proper selection, fitting, storage and maintenance of PPE. All waste collection contractors and staff must comply with all WHS and other legislative requirements, including wearing appropriate PPE.

Reporting

Incidents relating to waste management and disposal should be reported in accordance with Aurora Early Intervention and Behavioural Services's Incident Management policies and procedures.

Emergency Plan

In case if any issues or accidents occur relating to clinical waste or hazardous substances, the following plan is to be implemented:

During an emergency such as a body substances or hazardous substances, spills or where someone within the scope of the provider has been exposed to a biological substance that may pose a threat to the health of a person (biohazard), staff will follow all or, the relevant applicable below steps:

- Evaluate the significance of the emergency scenario. The staff has to evaluate the scenario and if he/she believes cannot have a proper evaluation, must contact the supervisor or his/her line manager immediately.
- Contact local emergency if needed.
- Notify relevant staff (emergency nominated staff) immediately
- Follow the nominated emergency staff order.
- Activate evacuation procedure if needed.

Following an emergency, the director or their delegate will:

- Record the incident
- Notify any relevant regulatory body if applicable
- Review the actions and evaluate their effectiveness
- Follow the incident management procedure

MONITORING AND REVIEW

Aurora Early Intervention and Behavioural Services Management Team will review this policy and procedure at least annually. This process will include a review and evaluation of current practices and service delivery types, contemporary policy and practice in this clinical area, the Incident Register and will incorporate staff, participant and another stakeholder feedback. Feedback from service users, suggestions from staff and best practice developments will be used to update this policy.

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