

Human Recourses Policy & Procedure PP5

HR Suitability & Recruitment Policy statement

Grow Support Services Inc. (GROW) are an equal opportunities employer, which means that we are committed to providing equality of opportunity in employment to all persons.

When recruiting new staff or when affording our current staff with opportunities for promotion, it means that we will:

- follow the good practice recommendations of the Codes of Practice and other guidance issued by the Equality Commission;
- not discriminate unlawfully against any person.
- select the best person for the job in terms of qualifications, relevant experience and abilities.

The Operations Manager has the main responsibility for implementing this policy and procedure.

Scope

This policy applies to GROW Management Committee members and all staff including permanent and casual staff, contract workers and temporary agency workers. Anyone working with or for GROW is expected to be familiar with this policy and use the approved procedures.

This policy is owned by the GROW Management Committee.

HR Suitability & Recruitment Policy

This section of the document contains the scope of the relevant policy, principles, definitions, linked policies and relevant legislation and service standards.

As a registered NDIS provider we are required to maintain a documented list of all staff who engage in risk assessed roles.

The list and Suitability Register needs to include:

- the name, date of birth and address of the staff member
- the risk assessed role in which the staff member engages
- whether or not the staff member is eligible for an exemption, the start and end date of the exemption and the name of the staff members manager during this period
- the staff member's application number or check number and outcome expiry date
- records relating to an interim bar, suspension, exclusion or any action taken by GROW in relation to those decisions

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- allegations of misconduct against a staff member with a check and the action taken by GROW in response to that allegation.

The Operations Manager is responsible for:

- maintaining these documents and ensures that they kept up to date
- keep these records for seven years from the date the record was created.
- Keeping records in an organised, accessible and legible manner.

It is important that GROW keeps records in a way that would allow the NDIS Commission or a quality auditor to know which workers were engaged in a risk assessed role on any given day in the past seven years. GROW uses a Suitability Register to achieve this outcome.

For registered NDIS providers delivering NDIS supports and services in Queensland, from 1 July 2019 any worker engaged in a risk assessed role must meet the following requirements:

- the person holds a current disability check (Yellow Card) in accordance with Part 5 of the Disability Services Act 2006 (Qld)
- the person holds a current Working With Children Check (Blue Card) in accordance with the Working with Children (Risk Management and Screening) Act 2000 (Qld) in relation to screening for regulated employment or regulated businesses;
- the person engages in the risk assessed role in the person's capacity as a registered health practitioner (within the meaning of the Health Practitioner Regulation National Law 2009 (Qld)) and the person has a certificate of registration in accordance with that Act.

If workers in risk-assessed roles hold a check before the end of the transition period that already meets these requirements, the check is recognised until the check expires.

Registered NDIS providers must ensure that particular workers have an appropriate check as a mandatory requirement of NDIS provider registration. This guarantees that staff working in roles delivering specified NDIS supports or specified NDIS services, or with more than incidental contact with people with disability, do not pose an unacceptable risk to their safety and wellbeing.

Worker screening is only one of a range of strategies registered NDIS providers need to put in place to identify and minimise risk of harm to people with disability. GROW must also actively promote a culture that does not tolerate abuse, neglect or exploitation, and focuses on continuous upskilling, supervision and training for staff on an ongoing basis..

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HR Suitability & Recruitment Procedures

This section of the document contains the scope of the relevant procedure, the allocated roles and responsibilities, detailed actions to be undertaken, timelines and specifies the relevant forms and other documents to be used.

- These procedures must be applied fairly and consistently to all job applicants.
- All recruitment must be planned in advance and opened up to competition.
- All applicants must then be assessed against relevant selection criteria to determine who the best person for the job is.
- All persons involved in selecting staff must read and apply this policy and procedure.

Open a recruitment file

At the start of a recruitment process for a particular job, a Recruitment File for that role must be created.

Each file should have a unique reference number.

This file will be used to store copies of the documents associated with the recruitment process. This will include copies of:

- the job description and role specifications
- the job advertisement
- the application forms that are received
- shortlisting and interview assessment sheets and notes
- letters to applicants

Job descriptions

A job description must be drawn up for every role within GROW. This is a document that sets out the essential duties of the job, including the job title, delegation and authority lines.

Role specifications

The Operations Manager will ensure that a role specification must be drawn up for every work role. This is a document that sets out the selection criteria which will be used to assess job applicants to determine which one is the best person for the vacancy.

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The role specification must be based on the job description and setting down the selection criteria. This includes the qualifications, knowledge, skills and experience will be needed by the successful applicant to enable them to do the job.

The selection criteria must be closely tailored to fit the needs of the job. Some criteria are essential for doing the job and some which are merely desirable.

Advertising the job vacancy

All GROW job vacancies must be advertised to welcome applications from as many eligible candidates as possible.

GROW will use a variety of different methods to publish advertisements. This may include our website, one or more newspapers, local interagency groups or on online recruitment websites.

There may be exceptional circumstances where GROW has no alternative but to depart from a general policy of advertising all vacancies to the general public. This can take place should the service have an urgent need for staff in order to meet an individual participants support needs. This process will be approved by the Management Committee.

The following statement must be added to all advertisements:

“We are an equal opportunities employer”.

Application process and forms

All persons who wish to work for us must complete our standard application form for the job in question in response to an advertised job vacancy.

All persons who request an application form will be sent an application pack that includes the following information:

- the application form
- the job description and role specification for the job
- the closing date and GROW’s contact details for applicant enquiries,

We will normally aim to keep open our application period for each recruitment process for 2 weeks.

The Selection Process

After the application stage closes, our selection process consists of the following stages-

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- a. Shortlisting
- b. Interviews
- c. Pre-employment suitability checks

Shortlisting

Shortlisting is an initial assessment of the applicants based solely on the information contained in their application forms. The purpose is to decide which applicants meet the essential and desirable job criteria so that they may be given more in-depth consideration at the next stage of the process.

The criteria to be applied are those that are set out in the personnel specification for the job in question.

The essential criteria must always be applied. The Selection Panel will decide whether any of the desirable criteria will also be applied.

The shortlisting decisions must be fair and consistent.

Academic qualifications

In cases of doubt and before making a final shortlisting decision, the Selection Panel will make enquiries to check the academic and other qualifications, especially those that were gained overseas.

Marking sheet

The Selection Panel must record their assessment of each applicant on the shortlisting record sheet that has been prepared for the exercise.

The completed sheet should be signed by all members of the panel and added to and kept in the main Recruitment File.

Rejection letters

Applicants who are rejected at the shortlisting stage will be informed about this in writing as soon as possible afterwards.

Interviews

Interviews are the main method by which we will assess the remaining applicants who have passed the shortlisting stage.

The Selection Panel's primary aim is to select the best person for the job.

Prior to the interview

The applicants will be invited to attend an interview.

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The Selection Panel will meet before the date of the interviews to decide how they will carry-out the interview and to draw up the questions they intend to ask. The panel may decide:

- whether they should prepare it in advance of the day or on the day
- whether questions used in previous recruitment exercises for the same post are satisfactory and will be used again, or
- whether to amend the questions or ask new ones

The questions should only be job-related and designed to assess the applicants against the essential and/or desirable criteria set out in the role specification for the job in question.

The questions should not seek to obtain the following kinds of personal information about the applicants:

- religious or similar philosophical belief or political opinion
- ethnicity, nationality or national origins
- age or date-of-birth
- sexual orientation
- health or disability
- marital status or family status or whether the applicant has children or plans to have children

The panel will decide how they will score and weight the answers and questions and prepare a standardised interview assessment sheet against which the applicants will be marked.

During the interview

All applicants should be asked the same pre-set questions.

All applicants should be treated fairly during the interview and the marks awarded to them should be fair and consistent.

Each panel member will complete a separate interview assessment sheet for each and every applicant.

After the interview - selection decision

After every applicant has been interviewed, the panel will discuss their views and assessments and jointly draw up a list of the applicants in merit order.

The vacant role will be offered to the most suitable applicant, or applicants, in accordance with that merit order.

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The panel may also decide that other applicants on the list will be offered positions on a reserve list to fill any vacancies that may arise for the same position within the following 12 months. Again, this will be done in accordance with the suitability order.

After the interview – administrative matters

All of the Interview Assessment sheets will be transferred to the main Recruitment File for storage.

The successful applicants will be sent conditional offers of employment, subject to any satisfactory pre-employment suitability checks that are required.

The “reserve list” applicants, if any, will be informed in writing of that decision.

If a “reserve list” applicant is later offered a position, that too will be a conditional offer, subject to any satisfactory pre-employment suitability checks that are required.

The unsuccessful applicants will be informed in writing of that decision.

Pre-employment Checks

GROW is not able under immigration law to employ any person who is not legally entitled to work in Australia. To ensure that we comply with that law and at the same time avoid unlawful racial discrimination against migrant workers, we will check that all persons, including local persons, who we intend to employ are entitled to work here and entitled to undertake the advertised role.

These checks will not be used for shortlisting or interviewing purposes. The checks will only be made in respect of persons to whom we have made a conditional offer of employment.

References

We will not seek a reference from an applicant’s current employer unless the applicant has given his or her consent to that.

We will accept references from other persons who know the applicant in a non-occupational capacity.

However, all references should be job-related. Therefore on request we will provide referees with copies of the job description and role specifications for the relevant role and ask them specifically for their views on an applicant’s abilities to do the job in question.

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Confirmation of Offer

After the pre-employment checks have been completed and are deemed to be satisfactory, the successful applicant will be notified in writing that the offer of employment is confirmed.

The confirmation letter will specify the following details:

- job title
- duration of post (permanent or temporary)
- duration of probationary period (if any)
- proposed or agreed start date
- outline of main terms and conditions
- details of how to accept the offer

Record keeping

The documents in the main Recruitment File should be kept for at least 12 months following the date of the interviews.

GROW has developed and implemented a number of Policies & Procedures and supporting documentation that ensures that each participant's support needs are met by staff who are competent in relation to their role. This ensures that our staff hold relevant qualifications, and who have role experience to provide person-centred supports.

GROW has a process whereby skills and knowledge required of each position within our service are identified and documented together with the responsibilities, scope and limitations of each position.

The Operations Manager has the responsibility to ensure that records of staff pre-employment checks, qualifications and experience are documented and maintained.

All our staff undertake an orientation process which includes completion of the mandatory NDIS worker orientation program.

Our continuous improvement strategies include identifying, planning, facilitating, and recording the effectiveness of all staff and management committee training.

These self-development opportunities for staff are in place to ensure that staff meet the needs of each participant who enters our service.

The Operations Manager is responsible for the supervision and support of all GROW staff.

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GROW has developed resources that are made available to staff relevant to the support needs of our participants.

The GROW Operations Manager is responsible for how the performance of staff is managed, developed and documented. This includes providing informal and formal supervision and feedback and where appropriate offer suitable training and self-development opportunities.

Key Contact

For further information and support about implementing this Policy & Procedure please contact the Operations Manager.

Relevant documents

- Code of Conduct HR5
- Continuous Improvement Plan K7
- Suitability Register R5
- Reference Check Form HR2
- Employee Application FormHR13

Relevant legislation and standards

- Standard 2. Provider Governance & Operational Management

Code of Conduct Policy statement

Grow support Inc. (GROW) promotes and protects individual rights including freedom of expression, self-determination and decision-making.

This policy supports GROW to apply the National Standards for Disability Services, in particular Standard 1: Rights. This policy guides staff to support participants safety & wellbeing, exercise their rights and have choice and control over their services.

Scope

This policy applies to all staff including the Management Committee, permanent and casual staff, contract workers, temporary and agency workers. This policy is owned by the Grow Support Inc. Management Committee.

The NDIS Code of Conduct Form HR5 supports GROW to apply the National Standards for Disability Services, Standard 1. Rights & Responsibilities and Standard 6: Service Management.

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GROW is committed to best practice in all aspects of service delivery. This Code of Conduct supports the people who work with us and empowers our participants in relation to their rights.

Code of Conduct Procedures

This section of the document contains the scope of the relevant procedure, the allocated roles and responsibilities, detailed actions to be undertaken, timelines and specifies the relevant forms and other documents to be used.

This Code of Conduct Policy & Procedure and relevant Form HR5 outlines GROW's expectations for the standards of behaviour and conduct expected from all staff and Management Committee Members. They are expected to be familiar with the code and use it always. It applies in all circumstances and at all times including when working or otherwise representing GROW.

The Code of Conduct Form HR5 and related Policy & Procedure is part of GROW's Contract of Employment or Contract for Services.

This includes:

Respect

- All staff and Management Committee are expected to conduct themselves in a professional and courteous manner. They must be honest and fair in dealings with participants and their families, advocates, carers, co-workers, management and the general public.
- Staff must treat everyone with respect and not discriminate against people based on disability, cultural background, religion, age, gender, sexual orientation, marital status, family status, union membership or non-membership.
- Staff should not behave in any way that might offend or embarrass another person.
- Staff should respect GROW property. This includes use of funds, equipment, technology, records and confidential information.
- They must respect the information of others and keep information confidential while working at GROW and post-employment as per our Confidentiality Policy & Procedure
- No staff member is to upload, download, use, retrieve or access any materials which are deemed inappropriate and/or offensive. This includes but is not limited to content that is sexual or illegal, copyrighted or defamatory.

Professionalism

- Staff need to ensure their appearance is neat and tidy in line with service user expectations.

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- If a staff member is late or cannot report for work, they must telephone and let the appropriate supervisor or Operations Manager know as soon as possible.
- If staff are required to leave the work premises for personal reasons they should advise their Operations Manager by telephone as soon as possible.
- Staff must not use work time for private gain. Staff must ensure all personal activities including phone calls and meetings are arranged outside of working hours. The Operations Manager needs to be advised if staff receive a gift. Anything over the value of \$20 must be refused or donated to a registered charity. Staff must not seek gifts or benefits in relation to their work.
- While employed at GROW staff cannot work in a paid or unpaid capacity for any another person or organisation without prior approval from the Operations Manager.
- Staff must not make any statements to the media or on social media about GROW's business. Requests for statements should be referred to the Operations Manager.

Safety

- Staff must not use any form of physical or verbal abuse in the workplace. This includes the use inappropriate language in the workplace.
- Staff must not perform work in circumstances where there is a risk to their safety or which may compromise the health or safety of others. Staff are required to report any workplace risks to the Operations Manager as soon as possible.
- Staff must not smoke during working hours unless it is during prescribed breaks and within designated areas.

Leadership and management

- The Operations Manager should ensure team members are familiar with the Code of Conduct and that they have sufficient skills, knowledge and ability to meet the requirements of their role.
- Senior staff should lead by example and not condone, permit, or fail to report any suspected breaches of the Code of the Conduct.
- In the event of a suspected breach, staff must maintain confidentiality and limit information sharing during grievances and disputes.
- They should ensure support is available to all parties during an investigation process.

Legal requirements

- All staff must be truthful in all declarations they make and comply with all laws, policies, procedures, rules, regulations, contracts and all lawful and reasonable directions from GROW.
- Any violations of law, ethical principles, policies and this Code of Conduct must be promptly reported to the Operations Manager.

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Breaches

Staff who breach this Code of Conduct or break the law may be subject to disciplinary action including termination of employment or contract.

Staff Requirements

All GROW staff and Management Committee Members must read the Code of Conduct Policy and Procedure as well as read and sign the GROW Code of Conduct Form HR5 during their induction to the service. The Operations Manager will place this document on the staff members file.

Relevant Documentation

- Code of Conduct Form HR5

Relevant Legislation and Practice Standards

- Practice Standard 1. Rights & Responsibilities
- Practice Standard 2 Provider Governance & Operational Management

Key Contact

For further information and support about implementing this Policy & Procedure please contact the Operations Manager.

Staff Induction, Training & Supervision Policy statement

Grow Support Inc. (GROW) introduces new staff members to their role and responsibilities and to the organisations mission, culture, ethos, community, organisational structure.

This process includes providing each staff member with an understanding of the services legal and service standard requirements with employment at GROW.

The Operations Manager is responsible for ensuring that each staff members completes the induction process. This includes staff reading and signing off on all role relevant policy & procedures within the first week as a condition of employment.

Scope

This policy and procedure apply to all staff and it is a requirement that staff complete the induction process when commencing employment with GROW.

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The purpose of this policy is to articulate the importance of inducting staff and staff supervision to GROW and to outline the process and responsibilities for successful induction and supervision activities.

This policy applies to GROW Management Committee members and all staff including permanent and casual staff, contract workers, and temporary agency workers. Anyone working with or for GROW is expected to be familiar with this policy and use the approved procedures.

This policy is owned by the GROW Management Committee.

Staff Induction, Training & Supervision Policy

This section of the document contains the scope of the relevant policy, principles, definitions, linked policies and relevant legislation and service standards.

This policy is designed to promote a consistent approach to staff induction, training & supervision by setting out the responsibilities of staff and their supervisors, the issues to be covered, and the appropriate recording process.

GROW is committed to ensuring that every member of staff receive an effective induction, training and supervision process. The purpose of this policy is to promote a consistent approach to staff supervision. The Operations Manager is responsible for undertaking staff induction and supervision.

The Operations Manager will ensure that individual staff has the ability to achieve GROW's objectives and in so doing to enhance the quality of staff performance in providing support to participants who use our services.

Staff Induction, Training & Supervision Procedures

This section of the document contains the scope of the relevant procedures, the allocated roles and responsibilities, detailed actions to be undertaken, timelines and specifies the relevant forms and other documents to be used.

At the time of appointment, a new staff member is introduced to the Operations Manager and undertakes the GROW induction process.

The Operations Manager will provide new staff members with a local workplace induction during the first week of employment.

This normally includes:

- Job requirements
- GROW Policy & Procedures
- NDIS Standards
- Health and safety

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- Workstation, email and communication systems
- Local workplace issues
- Working conditions, processes and procedures
- Probation processes
- GROW participant overview

This process has been developed to provide new staff members with relevant and up-to-date information about GROW as a whole and its services and participant caseload.

This induction process will focus on a range of statutory and legal requirements that new staff members must understand and follow. The process is designed to equip new staff members with the basic underlying principles and understanding of the legislation and standards which govern GROW. These are a compulsory requirement of employment.

Responsibility for the various components of the GROW induction process rests with the Operations Manager. These are outlined below:

- establishing GROW processes for staff IT requirements in time for the new staff members start date
- ensure that keys, computer access and email accounts are organised before the staff member commences
- providing a Welcome Kit containing relevant role related information
- introducing the new staff member to work colleagues
- clarifying any probationary criteria and the probation review process
- ensuring that the new staff member has a clear understanding of their role and responsibilities
- providing the new staff member with documents or web addresses for accessing relevant information
- organise shadow worker shifts where required

The Operations Manager may delegate all or part of the induction process to another staff member however, overall accountability remains with the Operations Manager

As a condition of their employment the new staff member is responsible for participating in and completing all the components of the GROW induction process in consultation with the Operations Manager.

This includes

- 1-on-1 meeting with the Operations Manager
- Completion of the staff induction checklist.

The Administration Officer is responsible for:

- issuing Offers of Appointment letters; and email that introduces the GROW induction process

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- assisting the Operations Manager as necessary in the implementation of the GROW induction process
- policy and procedure framework
- maintaining records of attendance, participation and completion in all GROW induction components
- monitoring and reporting on the implementation of the induction process.

The Operations Manager is responsible for issuing computer and email accounts for new staff as required.

When called upon to do so, other GROW staff will be invited to participate in the induction process in various roles including as interview panel members or shadow workers.

Supervision

Supervision is defined as any communication between two or more staff, one of whom is a direct supervisor /manager, where the primary purpose is to enhance staff performance and effectiveness in carrying out the requirements of their role and the meeting the objectives of the organisation.

The Operations Manager will undertake:

- Planned/ formal supervision - pre-arranged sessions with an agreed agenda.
- Informal/ unplanned supervision – a response to a task or event when it is inappropriate to wait for the next planned supervision.

The quality of the GROW's work can be defined as the extent to which it meets the needs of those who require its support services. Staff skills, motivation and relationships with participants are key elements in determining the quality of our service.

These key elements can be enhanced by supervision. The Operations Manager has the responsibility for developing all staff effectively.

- every member of staff must take responsibility for their own performance and learning, ensuring it is integrated into their everyday practice
- Every member of staff has the right to regular, planned supervision

To be effective, supervision should be:

- viewed as an opportunity for shared reflection on work
- seen as part of a culture that promotes reflective practice evidence based practice, self-directed learning and learning from experience
- an integral part of the workplace routine
- approached in a positive, constructive, honest, open and forward-looking manner

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Supervision provides an opportunity to:

- monitor progress of work objectives
- reflect on the effectiveness of recent training and development activities contributing to workplace competence and identify any outstanding needs
- provide feedback on performance
- provide support, direction, advice and guidance on individual support activities
- engage in staff management issues.
- Develop staff skills and understanding
- ensure policies and standards are met consistently in practice and relate to organisational occupational health & safety requirements.

The Operations Manager is responsible for ensuring that:

- all members of staff receive regular quality supervision
- work standards expected are clearly stated and agreed and relate to the relevant GROW policies and occupational health & safety requirements
- appropriate arrangements are made for supervision of all staff
- training and development opportunities for staff are identified, facilitated and evaluated

Every member of staff is responsible for:

- reflecting and learning from their work experience and training and development opportunities
- providing evidence of the work done, including the quality of work in relation to standards expected
- preparing for and taking part in supervision under the arrangements agreed taking any action agreed in supervision, to improve performance and enhance their effectiveness.

All the topics below could be covered at least every six months, but the priority given to each one will vary, depending on the nature of the role and the staff members workload:

- Review of work done, evaluation of performance and achievements in relation annual workplans and organisational priorities
- Need for any personal support to staff where work can be difficult and stressful
- Review of records, which may include checking a sample of current records, to ensure they are up-to-date, complete, accurate and clear, and that they comply with relevant policy and procedures, service standards including incident reporting and confidentiality
- Awareness and understanding of relevant policies, procedures and standards
- Adequacy of relevant policies, standards, systems and procedures
- Monitoring of action plans arising from audits

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- Review of individual professional development
- Review and evaluation of learning and development activities undertaken
- Feedback on supervisor's performance
- Suggestions for improving performance
- Any other topics either party wishes to discuss
- Agreement of clear, realistic, measurable objectives and activities for work and personal development during the period to the next planned supervision

Records on planned supervision sessions will be kept by the Operations Manager. These records should be signed and agreed by the Operations Manager and each individual staff member and should outline the issues discussed, decisions reached and action agreed.

Supervision records are the property of the GROW and should be available for the Management Committee examination when requested. Appropriate confidentiality of staff records will be maintained.

Staff supervision will be monitored and audited by the Management Committee during the organisation's annual review. Staff new to the organisation will be made aware of the organisation's supervision policy during their induction stage of their employment.

Consideration regarding the range of methods of supervision undertaken by the Operations Manager should be role focused and wherever possible staff supervision should be undertaken on a one-to-one basis. Alternative and additional methods to consider include supervision through team meetings, shadow workers and peer support. Depending on supervision needs the selected process may include structured or unstructured activities such as observation of work, examination of records, or role simulation activities. Supervision may include reflection on incidents, information sharing and problem solving.

The Operations Manager will work with each staff member to select which supervision methods would be most effective for their needs.

Agreed methods to be used to be used will:

- depend on the types and settings of the services provided
- the identified needs and resources of the individual staff members.
- physical arrangements for planned one-to-one supervision should ensure as much privacy as possible, and prevent interruptions from visitors or the telephone

The Operations Manger will be involved in supervising all staff and is also responsible for managing performance, organising training and staff probation and performance reviews. In some cases this may necessitate a three way meeting with a nominated member of the Management Committee.

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Key Contact

For further information and support about implementing this Policy & Procedure please contact the Operations Manager.

Relevant documents

- Code of Conduct HR5
- Probation Review Sheet HR3
- Staff Performance Review HR4
- Staff Self-Assessment Review HR10
- Staff Induction & Orientation Checklist HR11

Relevant legislation and standards

- Standard 2. Provider Governance & Operational Management

Staff Grievances Policy statement

Grow Support Inc. (GROW) fosters good relations between staff and management. Disputes and grievances should be addressed where possible within the organisation in a timely and confidential manner.

Scope

This policy applies to GROW Management Committee members and all staff including permanent and casual staff, contract workers and temporary agency workers. Anyone working with or for GROW is expected to be familiar with this policy and use the approved procedures.

This policy is owned by the GROW Management Committee.

Staff Grievances Policy

Our grievance policy and procedure explains GROW staff can voice their feedback and complaints in a constructive way. The Operations Manager and Management Committee should be made aware of issues within the workplace that impacts on staff or hinders their work, The processes within this document guide staff so that they can resolve issues as quickly as possible.

GROW encourages staff to communicate their feedback and grievances following the processes outlined within this document.

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Definitions

A **dispute** can arise from discrimination, harassment, or any other behaviour by one staff member against another, or by the organisation against a staff member.

A **grievance** is a formal complaint lodged by one staff member against another or against the organisation.

Sexual harassment is any form of unwanted, unwelcome or uninvited sexual behaviour that is offensive, humiliating or embarrassing.

Workplace harassment is 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.

Staff Grievances Procedures

- Problems can arise from the behaviour, action or decisions of management or other staff members.
- Disputes and grievances must be treated by all parties with the utmost confidentiality, and the complainant must not be victimised.
- All grievances must be taken seriously and investigated in an impartial manner.

Disputes

Staff:

- Try to resolve disputes with the other person involved before lodging a grievance.
- If attempts to resolve the dispute fail, discuss the matter with the Operations Manager.
- The Operations Manager will mediate and seek an acceptable compromise for both parties.
- If the dispute involves the Operations Manager, discuss the matter with the GROW Management Committee President.
- Issues of sexual harassment or discrimination should be brought to the notice of the Operations Manager.

Formally lodging a grievance

If a dispute cannot be resolved, lodge a grievance in writing using the Staff Complaints and Feedback Form HR 9 and submit to the Operations Manager.

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The report should detail:

- description of the decision/s or behaviour/s
- grounds by which the decision or behaviour has adversely affected you
- time and date of the decision/s or behaviour/s
- names of witnesses
- action necessary to resolve the grievance
- attempts made to resolve the dispute.

Investigating the grievance

- Once a formal grievance is lodged, the Operations Manager will undertake and complete the investigation within five (5) working days.
- If the Operations Manager has a conflict of interest in the matter, another person will conduct the investigation.

The following parties will be interviewed:

- the staff member who has lodged the grievance
- the staff member against whom the grievance has been lodged
- any witnesses

Resolving the grievance

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
- dismissed.

If the grievance cannot be substantiated because of a lack of evidence, the organisation may:

- remind all staff of their of their obligations under the Code of Conduct HR5
- ask all stall to undertake training in negotiation skills and dispute resolution

If the grievance cannot be addressed internally the Operations Manger will source and engage with a suitable external provider to successfully resolve the issues related to the grievance.

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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
- dismissed.

Key Contact

For further information and support about implementing this Policy & Procedure please contact the Operations Manager.

Relevant documents

- Code of Conduct HR5
- Staff Feedback & Complaints Form HR 9
- Continuous Improvement Plan K7
- Feedback & Complaints Register R8

Relevant legislation and standards

- Practice Standard 2. Provider Governance & Operational Management

Workplace Health & Safety Policy Statement

This policy:

- demonstrates the commitment of GROW's management and staff to health, safety risk management
- aims to remove or reduce the risks to the health, safety and welfare of all staff, contractors, participants and visitors, and anyone else who may be affected by our service operations
- monitors all incidents to ensure all work activities and support services are undertaken safely.

Scope

This policy applies to all GROW staff and management committee, all GROW support service activities including those situations where staff and management committee members are required to work off-site.

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Anyone working with or for GROW is expected to be familiar with this policy and use the approved procedures.

This policy is owned by the GROW Management Committee.

Workplace Health & Safety Policy

This section of the document contains the scope of the relevant policy, principles, definitions, linked policies and relevant legislation and service standards.

The Management Committee and Operations Manager are responsible for providing and maintaining:

- a safe working environment
- safe systems of work
- equipment and substances in safe condition
- strategies for the welfare of all staff and participants
- any information, instruction, training and supervision needed to make sure that all staff and participants are safe from injury and risks to their health

Staff are responsible for:

- ensuring their own personal health and safety, and that of others including participants in the workplace
- complying with any reasonable directions such as safe work procedures, wearing personal protective equipment supplied by management to maintain health and safety

Workplace Health & Safety Procedures

This section of the document contains the scope of the relevant procedure, the allocated roles and responsibilities, detailed actions to be undertaken, timelines and specifies the relevant forms and other documents to be used.

GROW is firmly committed to a policy enabling all work activities to be carried out safely, and with all possible measures taken to remove or at least reduce risks to the health, safety and welfare of staff, participants, visitors, and anyone else who may be affected by our support service activities.

GROW will provide and maintain as far as possible:

- a safe working environment
- safe systems of work
- equipment and substances in safe condition
- support for the welfare of staff

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- information, instruction, training and supervision that is reasonably necessary to ensure that each staff member and participant is safe from injury and risks to health
- a commitment to consult and co-operate with staff in all matters relating to health and safety in the workplace
- a commitment to continually improve our performance through effective safety management through the use of an OH&S Register

Each staff member has an obligation to:

- comply with safe work practices, with the intent of avoiding injury to themselves and others and damage to equipment
- take reasonable care of the health and safety of themselves and others
- wear personal protective equipment and clothing where necessary
- comply with any direction given by management for health and safety
- not misuse or interfere with anything provided for health and safety
- report all accidents and incidents on the job immediately, no matter how trivial (Incident Register)
- report all known or observed hazards to the Operations Manager (OH&S Register)

We encourage suggestions for supporting our health and safety objectives to create a safe working environment with a minimal incident rate.

To achieve the objectives of this policy, the management committee and Operations Manager are committed to regular consultation with staff to ensure that the policy operates effectively, and that health and safety issues are regularly reviewed.

The GROW Management Committee will regularly check compliance to this policy and other risks as part of our continuous improvement processes.

All staff meetings will contain workplace health and safety as an agenda item in which the Operation Manager can provide information on general changes to the workplace and staff can raise any concerns.

Workplace health and safety issues that are raised and discussed will be recorded and any actions taken to address the issues minuted at the subsequent meetings.

Any draft policies and procedures will be shared with staff as an opportunity for them to provide feedback and participate in the consultation process.

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Induction of new staff - All new staff will be informed of the Workplace Health and Safety policies through the normal induction process. Staff will be trained in any required safety procedures and be given access to a copy of the Workplace Health & Safety Policy & Procedure.

GROW actively works towards meeting the safety needs of its staff as effectively as it can. A systematic process of risk review is in place to provide information on which to base plans for improvement and reducing the risk factors for incidents.

An annual workplace health and safety risk audit is conducted by the Operations Manager. This involves:

- collection of information to identify potential hazards
- review of the Incident register
- review of the OH&S register
- analysis of potential risks
- prevention of future accidents through risk control
- audit of practices, equipment and facilities.
- A report of the audit and any recommendations will be tabled for Management Committee review and actions.

GROW has a process of identifying hazards and risks, including the use of a OH&S Register in addition to the annual audit. This process involves keeping a OH&S Register as a means of identifying and controlling hazards. This register contains information such as, date, description of hazard or near miss, reported by, reported to and action taken.

In case of an emergency, staff are to contact 000 for an ambulance.

To keep the workplace as free as possible from bacteria and viruses, staff are requested to use routine infection control practices including washing hands regularly and after going to the toilet, keeping the sink area clear of dirty dishes, covering coughs and sneezes, and regularly cleaning out refrigerators.

GROW is aware of the risks of workplace bullying. GROW defines workplace bullying as repeated, unreasonable behaviour directed toward a staff member or staff that creates a risk to health and safety.

The Operations Manager will provide relevant information to staff on a regular basis to assist in:

- recognising bullying in the workplace
- the possible effects of bullying
- steps to take in elimination of such behaviour

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GROW has a smoke free policy. Smoking is not permitted in or around the places where it conducts its support services or in the company of participants.

If the staff member is considered under the influence of alcohol and /or drugs during normal working hours and may be a danger to themselves and others, they will be asked to leave the workplace and to go home. The event will be documented by the Operations Manager.

If these situations are considered severe and the staff member is not implementing behaviour management recommendations, then their employment will be terminated.

The Operations Manager is aware of the need to protect staff from manual handling injuries and the risk of musculoskeletal injuries. The usual practices of lifting heavy objects by bending the knees and seeking assistance if the item is too heavy to lift alone are to be followed.

A ladder is to be used when accessing items from higher shelves. The use of the ladder is to be supervised by another staff member when possible. Office chairs are not to be used as step ladders.

Collecting information about the accident notification

If a worker has been injured at work he or she must:

- notify the Operations Manager as soon as possible
- enter details in the OH&S Register and Incident Register as soon as possible.
- see a doctor and have the doctor complete a WorkCover medical certificate

The GROW Operations Manager will advise the Management Committee when an injury occurs and the Management Committee will implement steps to reduce the risk of further injury in the workplace by identifying and, as far as practicable, reducing the risk of subsequent injury of that kind.

Confidentiality for the injured staff member will be maintained at all times as best possible considering the small size of the team.

GROW recognises that injuries may occur, and in the event that an injury does occur, GROW will try where possible to find alternative tasks for the staff member to do whilst they are recovering from their injury.

To achieve this, GROW has the following objectives:

- return to work should be a normal expectation of all staff following a work-related injury
- the intention is to return the injured staff member to work as soon as possible
- all staff are encouraged to report all work-related illnesses and injuries immediately

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- occupational rehabilitation will commence immediately and be carried out in the appropriate manner with the involvement of all parties
- each staff members' occupational rehabilitation program will be developed individually, and on a confidential basis, with the worker concerned

The Operations Manager will:

- assist the injured staff member to remain at work wherever practicable or to return to suitable work as soon as possible after injury
- develop a return to work plan for the staff member who has an injury that involves 20 or more days of total incapacity for work
- liaise with any parties involved in the treatment or occupational rehabilitation of the injured staff member
- ensure the confidentiality of personal information made available while co-ordinating return to work activities, organising occupational rehabilitation services or in any other activity related to the management of an injured staff members claim
- monitor the progress of the return to suitable work following injury and of any occupational rehabilitation services provided under a return to work plan

The Operations Manager will seek cooperation from all staff in realising these health and safety objectives and creating a safe work environment. The policy will be reviewed regularly to take into account legislative and other changes.

All staff will be advised of agreed changes and arrangements for their implementation.

Key Contact

For further information and support about implementing this Policy & Procedure please contact the Operations Manager.

Relevant documents

- Code of Conduct HR 12
- OH&S Register R6
- Incident Register R7

Relevant standards

- Standard 4. The Support Provision Environment
- Standard 2. Provider Governance & Operational Management

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Whistle Blower Policy Statement

This policy supports Grow Support Inc. (GROW) to apply the National Standards for Disability Services, in particular Standard 1 – Rights & Responsibilities. This policy guides organisations on how to support people to raise concerns about service delivery in the interests of service safety and quality.

This policy is used to support whistle-blowers, who in good faith and without malice, disclose information or raise concerns about alleged improper or illegal activity.

GROW and our staff are committed to providing services in a safe and honest way. We expect everyone to comply with all legal requirements. We will support and respect anyone who acts as a whistle-blower to draw attention to suspected inappropriate, corrupt or illegal conduct or behaviour.

Scope

This policy applies to all management Committee members, staff including permanent, casual and contract workers. This policy is owned by the GROW Management Committee.

Principles

- GROW encourages people to speak up, to make complaints and raise concerns about service integrity, safety and quality.
- GROW has good governance and responds appropriately to concerns about illegal or inappropriate conduct, whether that's provided as feedback, a complaint or a person acts as a whistle-blower.
- People who 'blow the whistle' are not victimised and will be treated fairly and with respect at all times
- GROW will not retaliate against whistle-blower including staff, for raising an alert about suspected misconduct.

Whistle Blower Procedures

Where a Management Committee member a staff member has acted as a whistle-blower, the person to whom the disclosure was made will secure any records or information related to the alleged issue.

Information can be provided in any format. Claims made in conversation should be documented by the person receiving the claim. The record of conversation should be signed by the whistle-blower to verify it is a true account. Any information shared about the allegations raised by a whistle-blower will be de-identified to protect the whistle-blower's identity and stored securely while the matter is examined.

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Should the organisation decide to an internal investigation is required, care must be taken to protect the integrity of any evidence and the usual internal investigation process should be followed.

The GROW Operations Manager will conduct an investigation. Investigations will be confidential, fair and objective. The Code of Conduct applies at all times.

GROW and our staff will comply with all legal requests for information in a timely manner. Requests by external parties for information will be responded to using the organisation's access to information and privacy policies.

The Operations Manager will oversee the investigation or work on the issue raised by the whistle-blower will keep the whistle-blower and all other parties informed about the process and the outcome of the investigation where permitted.

If the matter is investigated by an external organisation or referred to police or another investigating body, there may be limits on what information can be shared. In this case, involved parties will be advised of any limitations on the release of information.

Staff who are impacted will be offered support or referral to external support depending on their needs and the organisations capacity.

Definition - Whistle-blower

A person who raises concern regarding illegal and/or improper conduct that affects others. The person is not usually involved in the issue but is wanting to alert others to suspected misconduct. The alert may be raised outside of usual reporting lines or processes.

Related legislation and standards

- Standard 2. Provider Governance & Operational Management

Approvals

Date of approval: 8th April 2021

Date of review: April 2022

Signature of Operations Manager:

