

Support Provision Policy & Procedure – PP6

Advocacy Policy statement

Grow Support Services (GROW) endeavours to ensure that each individual participant receives support that recognises the importance of preserving family relationships, informal social networks and is sensitive to each participants cultural, religious and linguistic needs.

Our support services are about giving participants control over their life by ensuring they have choice and control. Some participants, even those who are not living with a mental health condition, may find it hard to speak up about what they want or need. Sometimes they may need help from a family member, friend or paid worker with the supports they require. Other times they may need a person to advocate for things on their behalf and make sure their rights are protected.

This advocate, family member, friend, a carer, worker or someone who has been engaged to act on your behalf, may be referred to as an advocate (they support a participants self-advocacy). An advocate can participate in phone calls and meetings with staff and participants. An advocate is someone who will speak, write or act on the participants behalf in order to promote, protect and defend your rights.

The advocate should not have a bias, they are only doing what is right for the participant

Scope

Our advocate policies and procedures cover how our participants are encouraged to where possible maintain family relationships and involve family members and any significant stakeholders in their lives and activities.

As part of the individual participants ongoing supports and activities there will be ongoing maintenance of their family and social relationships. These relationships will be reviewed and documented on an ongoing basis.

Advocacy Policy

Individual Advocacy

- Directly advocating on behalf of a participant or providing information and advice so that a participant can advocate for themselves
- Linking a participant with other relevant services
- Assistance with the support planning process
- Supporting a participant to take formal action on matters related to disability discrimination, request information, provide feedback, or making a complaint against GROW.

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- Support for participants from a non-English background.

Who can be an advocate?

Advocacy is the process of standing alongside an individual who is disadvantaged, and speaking out on their behalf in a way that represents the best interests of that person.

If a participant of GROW has asked an individual to be their advocate, this means they would like for them to act on their behalf. This may be a family member or friend of the participant, or a member of an advocacy service. Participants and prospective advocates should be aware that interpreters cannot be used as advocates, as they have a distinct role to play in interpreting communication.

No staff members of GROW are to accept a formal nomination as an advocate for GROW participants.

Responsibilities as a participant advocate

Being an advocate may involve attendance or involvement during assessments, support planning and reviews of the participants services. Should the participant want an advocate to communicate or negotiate with GROW on his/her behalf regarding access to their personal information; lodging a complaint; or any issue related to our services we ask the participant to complete a Notification of Support Person/Advocate Form (C17) when they wish to appoint or change their advocate.

Participants are free to change their advocates whenever they wish, however, whenever a change occurs another Notification of Support Person/Advocate Form (C17) needs to be completed.

Advocacy differs from mediation and negotiation. Mediation and negotiation processes aim to reach mutually acceptable outcome between the parties.

The role of the advocate is not impartial, as he or she has an obligation to operate entirely from the perspective of the participant in negotiating an outcome. Advocacy is concerned with genuine needs and aims to protect the interests and promote the welfare of the participant.

Advocacy may involve a degree of conflict with GROW and other service providers and therefore may involve emotional stress and other demands.

This process leads to:

- privacy and confidentiality
- respect and dignity
- quality services

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- information to inform decision making
- choice and control
- supporting participant feedback and resolution of complaints
- non-discrimination, and
- protection of legal and human rights, and freedom from abuse and neglect.

Advocacy Procedures

Checklist for Participants and Advocates

- the participant has given written authority for the advocate to act on his/her behalf - Notification of Support Person/Advocate Form C17
- the chosen individual informs GROW that they are acting as the participants advocate
- the advocate always acts in the best interests of the participant
- the participant is aware of any issues and developments in relation to services
- the participant is kept informed of any developments in relation to the issue/s
- where the advocate is representing the participants interests, and any decisions will be made in cooperation with the participant
- the advocate encourages the participant to provide feedback to GROW about services being provided
- advocates advise the GROW about any changes in participants circumstances and any concerns about changing participants needs
- advocates are prepared to relinquish the role of advocate should the participant request this change
- advocates avoid representing participants in circumstances where there may be conflict of interest
- advocates may not act as interpreter for the participant while acting in the advocacy role.

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Definitions

Advocacy-Speaking out' for someone's rights, or being 'on their side', especially when there are difficult issues to address

Relevant Documents

- Participant Consent Form C11
- Notification of Support Person/Advocate Form C17

Relevant Legislation and Standards

- Practice Standard 3. Provision of Supports

Decision Making & Choice Policy statement

Grow Support Inc. (GROW) supports participants to make the best informed choices and decisions with regards to supports and services which will best suit the participants agreed needs and goals.

This policy provides information to all people working with GROW and its commitment to promoting and protecting participant's rights including freedom of expression, self-determination and decision-making.

This policy is designed to meet NDIS Practice Standards, in particular Standard 1: Rights.

Purpose

The purpose of this policy is to guide the delivery of services and ensure that GROW guides staff to support participants to exercise their rights and have choice and control over the supports and services they receive .

Scope

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

GROW recognises participants right to participate as fully as possible in making decisions and making choices when it comes to their day to day activities and long term planning and will support and encourage each individual participant to be involved in this process all through their support provision.

Our staff will support the participants use of an advocate to assist in making choices and decisions where they feel it is needed.

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We understand that participants may have a wide range of physical or cultural needs and will respect those needs in the provision of supports by providing a proactive approach in encouraging participants in making decisions and choices.

Decision Making & Choice Policy

GROW will undertake induction, training and supervision for all staff to support their understanding and ability to provide decision making, choice and control options for our participants.

We provide clients with a diverse range of electronic and hard copy information in a format that is accessible to them so they can make informed decisions regarding their support services.

Decision Making & Choice Principles

GROW respects the rights of all participants in exercising choice and control about matters that affect them and is committed to collaborating and consulting with participants and other relevant stakeholders such as family members, carers and advocates where appropriate. This collaborative service process promotes and ensures active choice and control in relation to our services

GROW affirms that all people who access our services are assumed to have capacity to make decisions, exercise choice, and provide informed consent regardless of their support needs.

Our staff work to develop our participant's capacity to make independent decisions and providing timely information in appropriate formats to support informed decision-making including a participant's rights and responsibilities.

GROW promotes choice making about every stage of the participants service provision, from goal setting to decisions about activities and supports. We strive to assist participants in a way that is appropriate to their circumstances and cultural needs so as to maximise their opportunities to make choices and have control over decisions that affect their lives.

We recognise the role of a participant's family, carers and advocates in representing participant's interests and promoting choice and control in the planning and delivery of supports

Decision Making & Choice Procedures

During the initial intake assessment interview the Operations Manager will inform the participant and their advocate if relevant, of their rights and responsibilities and provide them with an easy read version if required. During the intake the feedback

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and complaints process, advocacy and other opportunities for the participant to make choices during all decision making process.

Each individual participant will be given written and verbal information that is suitable for their needs to assist them to make informed choices about the support services they require and how the supports will be provided.

The GROW Operations Manager will ensure that each participant is provided with services and support driven by the needs of the participant.

GROW encourages and supports feedback from participants about the services and supports being provided. This information is used as part of the services continuous improvement strategy.

The Operations Manager will ensure that all participants will participate where possible in developing a Support Service Agreement which is based around the individual's strengths, goals, needs and choices.

All participants agree to their Support Plans by signing and dating the agreed plan and keeping a copy for future reference.

Participants and if relevant, their advocates have the right to make the final decision about the types of services they will accept from GROW, how they will be delivered and how long they will be provided.

Relevant Documents

- Participant Support Plans
- Participant Rights & Responsibilities Statement C15
- Participant Consent Form C11
- Participant Notification of Support Person Advocate Form C17

Related legislation and standards

- Practice Standard 1. Rights & Responsibilities
- Practice Standard 3. Provision of Supports

Person Centred Policy statement

Grow Support Inc. (GROW) is committed to ensuring a person-centred approach to all participant support services delivered by our organisation.

This policy guides the use of our person-centred approach. A person-centred approach ensures participants are at the centre of decision making that relates to the

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services they receive, how they are supported in developing choices and making decisions that impacts them.

Scope

This policy applies to all staff and the Management Committee of GROW and applies to all participant related services we provide.

GROW is committed to embedding a person-centred approach to all services and support delivered. A person-centred approach is about ensuring our participants are engaged in all decisions which relate to their life.

The Operations Manager is responsible for implementing our person-centred process which involves staff working closely with participants through listening, thinking together, supporting, sharing ideas, and seeking feedback. This process is ongoing to make sure each of our participants are supported in achieving their personal goals, even as they evolve and change.

Person Centred Policy

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

GROW will ensure its approach to person-centred planning by:

- building on the participants experiences, strengths, skills and abilities, goals and objectives
- supporting personal empowerment through decision making and choice
- providing meaningful options for the participant to express preferences and make informed choices.
- assisting and support as needed in order to identify and achieve their hopes, goals and aspirations
- developing a framework for providing services, supports and interventions that meets the participant's needs in line with our duty of care
- ensuring our service reflects the participants' goals and aspirations for a lifestyle that promotes dignity, respect and independence.
- creating community connections such as social inclusion
- encourages the use of informal supports as well as those from specialist and mainstream services if required.
- seeing the participant in the context of their culture, ethnicity, language, religion, sexuality, gender identity that compose the participant's individuality is respected and valued in the planning process
- supporting mutually respectful partnerships between the participant, their family, friends and other service providers and recognises the legitimate contributions of all parties involved.

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Definitions

Duty of Care: Duty of Care is an ethical and legal concept relating to the law of negligence. It arises whenever a person is paid or has direct or indirect responsibility for the welfare of another person.

Person Centred 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.

The Operations Manager will ensure that the intent of this policy is made available to participants prior to their entry into service and the creation of their participant file.

This policy will be reviewed on an annual basis, with consultation and input from representatives from participants, staff and Management Committee members.

All GROW staff will be informed of and be familiar with this policy and staff will undertake training on the policy during their induction. All staff and Management Committee members are responsible for their own individual actions in complying with the policy.

GROW contributes to the success in achieving the outcomes set out within this policy by undertaking the following:

- each participant will be provided with the opportunity to communicate and achieve their personal goals and aspirations.
- GROW will establish clear procedures on how a person-centred approach will be embedded within our participant support services.
- we will engage with and empower staff to implement person-centred service delivery and supports.
- each participant will have a Service Agreement and Support Plan developed to guide the achievement of their needs, aspirations and wishes for their future, and this plan will build upon the strengths of the individual.

Staff will be supported by the Operations Manager to understand and align with the values and behaviours of our person-centred approach.

Key Contact

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



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Relevant documents

- Participant Rights & Responsibilities Statement C15
- Participant Support Plan
- Participant Service Agreement

Relevant standards

- Standard 1. Rights & Responsibilities

Participant Support Plans Policy statement

Grow Support Inc. (GROW) has policies and procedures in place to ensure effective and individually focused participant support plans are developed. These support plans will be based on the participants support needs, goals and their individual circumstances. The information gathered during this process will inform the content of each support plan.

Scope

Every participant of GROW must have a support plan developed in consultation with the participant and or their advocate. These support plans are created to meet the needs, strengths and goals of the individual participant, taking into account the least restrictive service provision possible.

The Operation Manager will conduct review of each participants support plan at least every six (6) months involving the participant and or their advocate. The participant and or their advocate may request a support plan review at any time.

Participant Support Plans Procedures

The Operations Manager will work with the participant to develop the initial support plan on entry to the service.

This initial support plan will clearly outline the following information:

- participant goals
- outline of the participants support needs derived from the initial intake and or referral form
- the types of services that GROW will provide
- relevant information on service providers who are engaged with the participant
- any further relevant information that may impact on participant support services including the negotiated Service Agreement

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The Operations Manager will complete the draft support plan with the participant and or their advocate. Once the assessment meeting is complete the Operations Manager will provide the completed support plan to the participant and or their advocate for their agreement. This document should then be signed by all parties with a copy provided to the participant and a copy kept on the participants file.

The Operations Manager will schedule a support plan review with the participant in approximately six (6) months time. If there is any significant changes to the individual participants circumstances a review may take place sooner to address these changes.

The review will involve looking at the participants existing support needs and changes that may involve the supports being provided by GROW. The Operations Manager will seek general feedback about the participants support delivery, undertake a review of the current support plan, any changes to the participants goals, funding and feedback from relevant staff.

The Operations Manager will review each support plan in conjunction with the existing Service Agreement. The participant and or their advocate will work with the Operations Manager to outline the participants updated goals, strengths, community links achievements, strengths and what strategies and modifications should be included within the revised support plan.

The revised support plan is reviewed, signed and dated by the Operations Manager, the participant and or their advocate. A copy of the plan is provided to the participant and the Operations Manager will place a copy in the participants file.

This support plan supersedes all previous support plans, but copies of all previous support plans must always be kept on the participants file.

Related Documents

- Support Plan
- Service Agreement
- Initial Intake Form C1
- Participant Referral Form C14

Relevant legislation and standards

- Practice Standard 3. Provision of Supports

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Behaviour Support Policy Statement

The purpose of this policy and procedure is to set out guidelines to enable Grow Support Services Inc. (GROW) staff and Management Committee to meet the required standards on implementing and reviewing participant Behaviour Support Plans and the use of restrictive practices.

In doing so the policy and procedure outlines how GROW:

- Maintains the safety and dignity of GROW participants
- Reduces, and where possible eliminate the frequency and severity of behaviours that present risks
- Ensures that restrictive practices are used as an intervention only as a last resort
- Ensures all participant related staff receive training in the use of positive behaviour support
- Ensure safeguards are in place in exceptional circumstances where it is necessary to use restrictive practices to protect the safety of participants, staff and the general public

Scope

This policy applies to all staff. Anyone working with or for GROW in a participant contact support role is expected to be familiar with this policy and use the approved procedures.

Behaviour Support Policy

Positive behaviour support is a supportive, positive approach to working with participants.

Positive behaviour support includes:

- Not trying to control participants, but should support the process to change their own behaviour
- Identifying the reason or concern for these behaviours such as current supports are not meeting a participants need
- Working with every participant to identify and document their individual strengths and skills that can be utilised
- Every participant should be treated with compassion and respect regardless of their behaviour
- Participants are entitled to the best version of their life that they can have and the support they have requested as part of their support plan.
- GROW staff and management will continue to improve on how we provide support for developing and implementing positive behaviour and this forms a key part of our annual review and Continuous Improvement Plan

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- GROW believes that positive responses will be more effective in supporting our participants behaviours rather than coercion and punishment

GROW supports positive behaviour practices which focus on successful outcomes for participants, including:

- The extent to which participants feel positive about their lives
- Choice and decision making
- Personal development
- Community participation
- Relationships
- Feeling that they are part of a stable interdependent and supportive community.

The following procedures are to be worked through when delivering support to GROW participants who present with challenging behaviours.

GROW Support Service Design

GROW will have procedures and tools in place to safeguard the rights of participants and monitor the use of, and elimination of restrictive practices.

Our support service design starts with approaches that are person-centred, proactive and that have enhancing the quality of life for participants as a central part of support planning. This includes adopting best practices that support and maximise the participants' decision-making, choice and self-direction. For more information on this please see out Person Centred Policy & Procedure.

GROW is responsible for ensuring that participants give informed consent in relation to all matters that affect them and understands the nature and consequences each time that they give their consent. This includes understanding the impact on them of any prescribed restrictive practice that might result from their giving consent.

Participants have the same rights as all people to equality before the law and to equal protection under the law, without discrimination. GROW will uphold human rights and the well-being, inclusion, safety and the quality of life of our participants.

GROW recognises that participants are best placed to communicate their choices and decisions. Participants and their advocates have natural authority in decision making, choice and control and will guide the design and provision of the support services carried out by GROW.

GROW is aware that the use of restrictive practices may reflect a failure in the supports being provided.

GROW understands that the use of restrictive practices is not an effective long-term strategy to manage risks and behaviours and can result in long term physical and psychological harm to participants. As part of our support provision process we will

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actively facilitate the participant's engagement with family, friends and advocates who know them well and can support them in decision making.

Behaviour Support Procedures

These procedures are driven by the assumption that the participant and or advocate are best placed to make decisions and choices. The Operations Manager will work with each participant to provide the supportive environment that enables them to have the capacity to communicate relevant information and understand the options that they have available to them. .

Where participants display complex behaviours and before any consideration is given to the potential use of a restrictive practice, this assumption must be confirmed by the Operations Manager and recorded on the participants file.

The following procedures will be carried out by the Operations Manager:

- The Policy and Procedure on Behaviour Support is available to participants, families, staff and the GROW Management Committee.
- Relevant support staff are provided with information, instruction, training and supervision in implementing Behaviour Support Plans and the use of restrictive practices
- Participants, their families and advocates are involved in the support service design process and consent to any prescribed restrictive practices
- The use of prescribed restrictive practices be reviewed by the Operations Manager and occur for the least time possible and are used as a final option.
- Prescribed restrictive practices are recorded on each use and reviewed in line with the documented Support Plan and Behaviour Support Plan.
- The unauthorised use of restrictive practices be reviewed within seven days and reported to the Disability Services Commission using the prescribed Serious Incident Reporting Form
- The use of therapeutic devices be prescribed by a qualified health professional, have the consent of the participant and are of the least restrictive alternative that is available. This should be reviewed in line with the documented Support Plan and Behaviour Support Plan.
- Ensure that the use of medication is prescribed by a qualified medical practitioner and reviewed in line with the documented Support Plan and Behaviour Support Plan.
- Confirm that all support staff are aware of and provide timely feedback on potential workplace hazards and strategies are put in place to minimise identifies risks
- Confirm that all support staff are aware of, and trained in reporting procedures

The following procedures are to be implemented to ensure that the organisation meets its policy objective of the proper use of restrictive practices.

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Regulated Restrictive Practices

As stated within the relevant NDIS Service Standards and related legislation participants are only subject to a regulated restrictive practice that meets Queensland's authorisation requirements and the relevant requirements and safeguards outlined in Commonwealth legislation and policy.

Where Queensland legislation requires authorisation relating to the use of a regulated restrictive practice the Operations Manager will secure the appropriate authorisation and submit the relevant evidence.

The Operations Manager will ensure that:

- Regulated restrictive practices are only used in accordance with an approved Behaviour Support Plan
- All the requirements as prescribed in *the* National Disability Insurance Scheme restrictive practices and behaviour support rules 2018
- Regulated restrictive practices are implemented, documented and reported in a way that is compliant with relevant legislation and/NDIS Standard requirements
- Work is undertaken with specialist behaviour support providers to evaluate the effectiveness of current approaches aimed at reducing and eliminating restrictive practices, including the implementation of strategies in the behaviour support plan
- Relevant staff develop and maintain the skills required in the use and reporting of restrictive practices
- Provide support for the participant and other stakeholders to ensure their understanding of the risks associated with the use of the identified restrictive practices.

Supporting the Assessment and Development of Behaviour Support Plans

The Operations Manager will:

- Ensure that each participant's quality of life is maintained and improved by the development of an informed Behaviour Support Plan that is responsive to their current needs
- Work closely with the individual specialist behaviour support providers to collect all the relevant information to inform and develop the best possible behavioural assessment

Work is undertaken with the specialist behaviour support provider to develop each participant's Behaviour Support Plan and the key information, processes, timelines and responsibilities for implementing and reviewing the plan are documented..

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The Operations Manager will seek out and undertake training to enhance their skills and knowledge of, positive behaviour supports and restrictive practices. This will ensure that the development of a participant's behaviour support plan is consistent with both NDIS Standards and legislative requirements. Any staff behaviour management related training or development activities are required within the Staff Training & Development Register.

Behaviour Support Plan Implementation

The Operations Manager has the overall responsibility to ensure that each participant's Behaviour Support Plan is implemented in a way that meets the participant's behaviour support needs.

The implementation of behaviour support plans Policies and Procedures are maintained and reviewed as part of GROW's annual review process and included within our Continuous Improvement Plan.

The Operations Manager and relevant support workers will engage with the specialist behaviour support provider to implement each participant's Behaviour Support Plan. This process will assist with the effective delivery of the agreed strategies to establish and maintain positive behaviour supports.

GROW Lifestyle Support Workers are informed of Behaviour Support Plan implementation processes and trained to develop and maintain the skills required to consistently implement these strategies. The Operation Manager will supervise the implementation of each participant's Behaviour Support Plan to ensure that it is delivered consistently in line with its planned outcomes.

The relevant specialist behaviour support providers will work with the Operations Manager in order to support and train the relevant Lifestyle Support Workers that will be implementing the participants Behaviour Support Plans. This support and training will include the use and monitoring of behaviour support strategies, providing positive behaviour support and the safe use of restrictive practices.

The Operations Manager will undertake a range of training and supervisions with relevant support staff to ensure they are implementing strategies documented within the participant's Behaviour Support Plan appropriately.

Monitoring and Reporting the Use of Regulated Restrictive Practices

The processes set out within this document sets out how restrictive practices are managed with individual participants are only subject to a restrictive practice that is reported to the Commission.

In order to meet the National Disability Insurance Scheme restrictive practices and behaviour support rules 2018 the Operations Manager will:

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- Complete monthly online reporting requirements in relation to the use of regulated restrictive practices.
- Monitor relevant information from all related sources to assist in identifying actions for improving the participants behaviour outcomes
- Secure the participants consent to provide feedback and information to relevant support workers and their specialist behaviour support provider about the implementation of their Behaviour Support Plan to facilitate the reduction and elimination of restrictive practices

Behaviour Support Plan Review

Should a GROW participant have a current behaviour support plan it should:

- Reflect their needs
- Works towards improving their quality of life
- Reducing behaviours of concern
- Where relevant reduce and eliminate the use of restrictive practices

The Operations Manager will work with the participant and support staff to implement the behaviour support plan.

This process will include:

- Monitoring progress through a combination of formal and informal processes such as securing feedback from the participant, team meetings, data collection, record keeping and staff supervision
- The information collected through this process is required by the specialist behaviour support provider and is prescribed in the National Disability Insurance Scheme restrictive practices and behaviour support rules, 2018.
- Team meetings and supervision will assist the Operations Manager to Identify circumstances where the participant's needs or behaviours change will inform the need for carrying out more frequent reviews

The Operations Manager will work with the relevant staff to put together all the relevant information and ensure that this information is used as part of reviews of the participant's behaviour support plan. This information along with participants input will inform the plans contents. The Operations Manager will focus on developing and implementing strategies that encourage positive changes that reduce or eliminate restrictive practices.

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Reportable Incidents involving the Use of a Restrictive Practice

Restrictive practices are not acceptable and cannot be approved for organisational or staff convenience, or to overcome a lack of staff, inadequate training, or a lack of staff support and/or supervision.

On these occasions the restrictive practices for which there has been no prior prescription or consent, including seclusion and physical restraint, may be used in an emergency to save a participants' life or to prevent them from experiencing serious physical or psychological harm. This would also include preventing the participant causing serious physical or psychological harm to another person.

GROW is responsible for ensuring that everyone involved in supporting the participant in these circumstances understands the nature and consequences of the participant's consent. This includes understanding the impact on them of any restrictive practice that might result from that consent.

If a participant was involved in an emergency or unauthorised use of a restrictive practice the Operations Manager should be informed immediately

The Operations Manager will:

- Undertake a review of the incident and report it using the required process.
- Ensure that the participant is referred to a medical practitioner if required
- Provides the participant with ongoing support following an incident.
- Work with relevant mainstream service provider's to address to the unauthorised use of a restrictive practice
- Notify the Commissioner of all reportable incidents involving the use of an unauthorised restrictive practice within 24 hours in accordance with the National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018
- Where an unauthorised restrictive practice has been used, the Operations Manager and relevant staff who were implementing the behaviour support plan will undertake a debriefing meeting to identify areas for improvement and to inform further action
- The key points and outcomes of any discussions and the debriefing meeting is documented

Based on the review of incidents, the support being provided to the participant are modified and where required, a specialist behaviour support provider is engaged to develop or review the participant's behaviour support plan or interim behaviour support plan.

This process will be managed by the Operations Manager in accordance with the National Disability Insurance Schemes restrictive practices and behaviour support rules, 2018. The Operations Manager will work with the participant to secure their

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consent, and their relevant support networks, other stakeholders as are included in the review of any incidents.

The Operations Manager will ensure that the required authorisation process are followed and recorded within the relevant documentation.

GROW ensures that the use of restrictive practices other than in emergency situations may only be used:

- With a prior review by the Operations Manager and confirms evidence that all less restrictive alternatives have been evaluated and cannot be effectively used to reduce the risks involved in the behaviours.
- When the participant presents a clear and present risk to themselves, staff or others
- These restrictions will be applied for the least time possible
- Restrictions will be applied with the informed consent of the participant and or support persons, advocate or family members involved that has been appointed with the relevant authority and that they have consented
- After there has been an assessment of the impact of the practice on the rights and wellbeing of others who share the participant's environment
- Under the direct supervision of an experienced, trained staff member
- When the process is clearly documented within an approved Behaviour Support Plan
- All Behaviour Support Plans that relate to restrictive practices will be reviewed in accordance with the GROW Behaviour Support Plan review process

Interim Behaviour Support Plans

Through the initial intake process or support planning review process the Operations Manager may identify that a participant may have an immediate need for a Behaviour Support Plan.

The interim behaviour support plan will be based on relevant information supplied by the participant, staff, other participant linked service providers, support persons / advocate, family members, The interim behaviour support plan will be developed and implemented so that all identified risks are minimised to the individual participant and others.

The Operations Manager will collaborate with the specialist behaviour support provider and the relevant stakeholders from the list below to develop & implement the participant's interim behaviour support plan

- Family members
- Support people / advocates
- Participant linked service providers or community organisations
- Police and or other emergency services

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- Mental health providers
- Treating medical practitioners and other allied health clinicians

The Operations Manager will undertake steps to ensure that Lifestyle Support Workers are supported in the implementation of the relevant participants interim behaviour support plan. This support includes training, provision of relevant information and direct supervision.

Medication

The appropriate use of drugs to reduce symptoms and behaviours associated with conditions such as anxiety, depression and other mood disorders or a psychosis, does not constitute a restrictive practice when:

The medication is prescribed for a participant who has a psychiatric condition diagnosed by a qualified psychiatrist and is reviewed at a minimum annually, or the medication is prescribed by a general practitioner who is treating the participant as part of a Medicare approved mental health plan and the medication is reviewed at a minimum annually.

Please see the Medication Policy & Procedure for more information.

Relevant Documents

- Behaviour Management Plan C2
- Code of Conduct HR5

Relevant Legislation and Standards

- Practice Standard 3. Provision of Supports

Key Contact

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

Risk Management Policy statement

Grow Support Inc. (GROW) has a legal and ethical obligation to ensure its staff, participants and visitors are not harmed during the use of GROW services.

This policy outlines how GROW prepares for and responds to risks as part of GROW's ongoing commitment to providing a safe, high-quality service.

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Scope

This policy applies to all staff and Management Committee members and supports GROW's risk management strategy and good governance of the organisational and individual risk. This policy works alongside individual Safeguarding policy and the Code of Conduct.

The Management Committee supports the Operations Manager to identify, mitigate and manage risk within the organisation and the services it provides.

The Operations Manager is responsible for maintaining a Risk Register and ensuring staff implement risk management strategies as directed.

Risk Management Principles

- GROW services should be safe for participants to use and staff to implement
- while some risks cannot be eliminated, action is taken to identify risks and remove, minimise or manage them.
- risks and the plans to mitigate them are documented and supervised during the implementation phase.
- participants accessing GROW services will be informed about any risks and provided with opportunities to make choices
- GROW is committed to continuous improvement and adapts its services to improve safety for staff and participants on an ongoing basis.

Risk Management 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.

The Operations Manager is responsible for ensuring a risk assessment is undertaken for all organisational processes and support services. This process is undertaken through the development and maintenance of a Risk Management Plan.

The Risk Management Plan and Risk Register ensures risks are identified and assessed based on their likelihood and the potential for harm. Resources are provided to eliminate, minimise or manage risks. The documented responses must be proportionate to level of risk.

The Operations Manager maintains a Risk Register that is reviewed following any complaint, accident or incident. The Risk Register is also routinely reviewed annually as part of our continuous improvement strategies.

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GROW complies with all mandatory reporting requirements related to safeguarding of people with disability, incidents and quality management and workplace safety.

Participants accessing our services, their families or advocates, staff and Management Committee members are made aware of risks when developing and implementing supports.

Feedback from participants accessing the service, complaints and the results of formal evaluations are used to update the Risk Register and Continuous Improvement Plan.

Related Documents

- Code of Conduct HR5
- Risk Management Plan K9
- Incident Register R7
- OH&S Register R9
- Risk Register

Relevant legislation and standards

- Standard 2. Provider Governance & Operational Management

Medication Policy statement

Grow Support Inc. (GROW) has policy and procedures in place to ensure that safe handling, storage, administration and disposal of medication. We understand that some participants will require prescribed medication to support their health and wellbeing.

Any medication will only be administered by staff who have received an appropriate level of medication administration training.

Staff will only administer to a participant when it has been prearranged and documented by the Operations Manager and in line with GROW policy and procedures.

A Webster Pack or tablet dispenser pack will be used to provide tablet medication.

Scope

This policy applies to all staff that undertakes medication related activities. This policy is owned by the Management Committee. This policy is used to guide staff on acceptable practices for providing direct health-related supports to participants.

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This policy outlines how staff supports the basic medication and direct health needs of participants using GROW services.

Medication Principles

- GROW will comply with the Practice Standards of the NDIS.
- Participants will access the most appropriate supports that meet their needs, goals and preferences.
- Participants accessing services have the right to expect that they are safe and GROW is responsive to their needs.
- Medical support needs must be prescribed by a qualified doctor and all processes must be documented and authorised by a doctor.
- Participants supports are provided in a way that promotes, upholds and respects legal and human rights.
- Direct health supports for participants must be provided by trained, skilled and competent staff.
- Training for specific direct health supports must be provided by a suitably qualified person.
- Supports are provided in ways that respect a participant's dignity and right to privacy.

Medication Policy

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

The worker will identify name and identity by photo from participant file and name on medication. Medication and amount given as per instructions on medication identifying how much and what time of the day medication to be given. Worker will document on daily sheets when medication has been taken. Preference is for all medication to be Webster packed.

Staff who will be involved in administering medications will undertake mandatory training and will be evaluated as being competent before. Once complete this information will be recorded in the staff Training Register and the staff members personnel file.

Our Medication Policy & Procedures are supported by a number of documents such as a Support Plan, Behaviour Management Plan and Refusal of Medication Form. This policy covers the secure storage of medication including combination locked storage to ensure only appropriate staff have access.

Medication incidents such as medication errors have clearly documented processes to ensure the health safety and wellbeing of participants via the completion of an

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Incident Report, entry included in the Incident Register that is lodged with the Operations Manager for review and action.

Medication 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.

When a participant first enters GROW services, information about any medical supports will be added to the participants support plan and related documentation.

This will document each participant's information including the type of support, process, frequency, dosage and any other relevant information.

The individual Service Agreement, Support Plan and Behaviour Management Plan will include instructions on regular and timely reviews by a qualified health practitioner and identify how risks, incidents and emergencies will be managed.

GROW will collaborate with each participant in the development of their service agreement and support plans so that the participant understands the agreement and related documents and how they will be supported with any medical conditions. This process will be undertaken by the Operations Manager using the participant's preferred mode of communication.

Any instructions on how to provide the medication support must also be kept with the medication and on the participants' file.

The Operations Manager is responsible for ensuring the staff providing the support are trained and competent to provide the relevant medication.

A written record of training is required and will be stored on the staff file and the Training Register. A staff member must not under any circumstances provide medication-related supports that they are not trained to provide.

GROW maintains a register of trained staff and the medication supports they are trained to provide.

All workers responsible for administering medications supports must understand the effects and side effects of any medications and the steps to take in the event of an incident involving medication.

If a trained staff person is unavailable, GROW will support the person to seek medical services such as a nurse or doctor.

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Where GROW provides basic daily personal care, GROW will comply with NDIS Practice standards.

If a participant accessing GROW services develops/ or acquires a new health condition that requires ongoing health support, the participant will be required to undertake a health needs assessment by a qualified medical professional before the GROW can provide health supports.

If a participant uses multiple service providers, the provider undertaking the support coordination role on behalf of the participant is responsible for ensuring all providers work collaboratively in supporting the participant.

For participants with complex needs, a written agreement may be needed to document how, where and when the participant will be supported and this must be signed by all service providers who support the participant.

Any mistake or error in providing direct health supports must be reported immediately using Incident Management Policy.

Key Contact

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

Relevant documents

- Code of Conduct HR5
- Training and Development Register R10
- Refusal of Medication Form
- Support Plan

Relevant legislation and standards

- Practice Standard 1. Rights & Responsibilities
- Practice Standard 4. The Support Provision Environment

Approvals

Date of approval: 9th April 2021

Date of review: April 2022

Signature of Operations Manager:

