Restrictive Practices and Behaviour Support

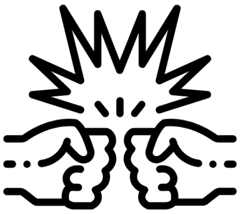
About this document

Restrictive practices are actions that can limit your movement.

Restrictive practices can sometimes be used to keep you safe, but some restrictive practices can take away your rights.

This document will help you understand:

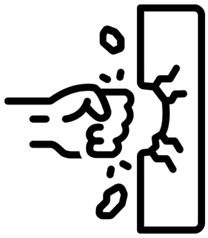
- restrictive practices
- behaviours of concern
- behaviour support
- our responsibilities when using restrictive practices
- prohibited practices
- your rights
- how you can make a complaint or provide feedback about restrictive practices.



Behaviours of concern

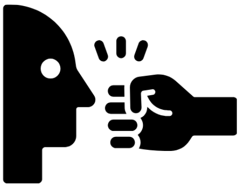
A behaviour of concern can be when someone does something that can harm you or other people around you.

They can be very stressful and upsetting.



Some examples of behaviours of concern are

- hitting yourself



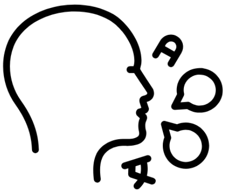
- hitting someone else

- shouting at someone

- breaking or throwing things.

People can show behaviours of concern at any time, for many reasons. The reasons may be to communicate that they are feeling:

- sad
- sick
- In pain
- unsafe
- angry
- worried
- bored
- hungry or thirsty
- overwhelmed
- too hot or too cold



Some people use behaviours of concern to communicate a message such as:

- they want to go somewhere
- they do NOT want to go somewhere
- they do NOT want to do something
- it is too noisy or quiet
- there are too many or too few people around
- they cannot reach something
- there are smells or noises that they do not like.

Behaviour Support

Behaviour support is about understanding your needs and managing any behaviours of concern.

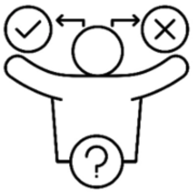
Behaviour support helps to make sure that you can:

- do things you enjoy
- can get the things you need
- spend time with other people
- make choices about your life
- feel safe
- learn new skills.

Behaviour support is a service provided by a **behaviour support practitioner.**

Behaviour Support Plans

We will write down everything we need to do to make you feel safe and supported.



You have the right to make decisions about the plans and assessments that we make to help with your behaviours of concern.

To make sure everyone is safe in the short term, we will create an interim behaviour support plan.

To understand you better, we will create a functional behaviour assessment.

We will create a **comprehensive behaviour support plan** so that we can:

- understand our needs and wishes
- understand why your behaviours happen
- help you feel safe
- help you learn new skills

We will write all our plans and assessments with you and other important people in your life, such as your family.

We will help other relevant people to understand and use the plan to support you in the best way possible.

Once all the plans you need are in place, we will check in with you to make sure you are happy with the plan and that the plan is working.

Restrictive Practices

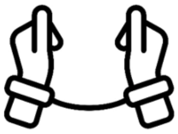
Restrictive practices are actions that can limit your movement.

Any use of restrictive practices must be approved by the NDIS Commission and follow the law.

Restrictive practices that follow the law are known as **regulated restrictive practices.**

There are 5 (five) main types of regulated restrictive practices, these are:

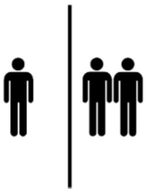
- **Physical restraint** – when someone stops you from moving the way you want to. For example, holding your hand down to stop you from hitting yourself.



- **Mechanical restraint –** when someone uses equipment to stop a behaviour of concern. For example, wearing mittens to stop you from scratching yourself.

- **Chemical restraint –** when someone gives you medication to change your behaviour. For example, giving you medicine that makes you feel calm.

- **Environmental restraint** – when someone stops you from participating in specific activities, going to specific places or having access to specific things. For example, locking the kitchen cabinets to stop you from having access to sharp objects.



- **Seclusion** - when someone makes you spend time in a room alone. For example, being put into a room alone and not allowed to leave.

Our Responsibilities when Using Restrictive Practices

We understand that using restrictive practices can be upsetting and risky.

We will follow all laws and rules that regulate the use of restrictive practices.

This means that we only use restrictive practices if we have already tried other things, and we need to keep everyone safe.

We will use restrictive practices for the shortest time possible.

Our goal is to use less restrictive practices and to stop them, if possible.

We will always try to find other ways that we can better meet your needs that does NOT involve using restrictive practices.

We will always explain to you the reasons we use a restrictive practice.

All restrictive practices will be written down in your comprehensive behaviour support plan.

We will make sure that all workers are trained in using restrictive practices in a way that follows the law and makes you feel safe.

Prohibited Practices

Prohibited practices are acts that are against the law and are never ok. For example, prohibited practices are when someone:

- says things to you that are mean

- uses restrictive practices without authorisation

- causes you pain to punish you

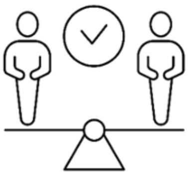
- gets angry at you for making a mistake

- gives you medicine that is not for you.

If someone uses prohibitive practices on you or someone else, let us know.

We have a zero-tolerance policy for prohibited practices.

Your Rights



A behaviour of concern does NOT take away your rights.

At all times, you have the right to:

- make your own decisions

- say NO to restrictive practices

- be safe

- participate in activities

- be treated fairly and with respect

- express your needs, preferences and feelings.

More information about your rights can also be found in the Participant rights (easy read).

Complaints and Feedback

We encourage you to give feedback or complain about us so we can work together to do things better.

If you have any suggestions, complaints, feedback or questions about restrictive practices you can contact us:

- in person – by speaking to any of our workers
- over the phone – by calling us on our contact phone number **1300 059 618**
- in writing – by:
    - sending us an email hello@evercaresupport.com.au
    - filling in the online complaint/feedback form on our website www.evercaresupport.com.au

You can also ask for an advocate to help you tell us about your concerns. This might be someone you trust or an external organisation.

You can contact the NDIS Quality and Safeguards Commission by:

- phone: 1800 035 544 or TTY 133 677 or translating and interpreting service 1300 305 612
- emailing their National Behaviour support team on behavioursupport@ndiscomission.gov.au
- writing to them on NDIS Quality and Safeguards Commission PO Box 210 Penrith NSW 2750
- visiting their online Contact Us page: https://www.ndiscommission.gov.au/contactus

Abuse, Neglect and Exploitation Policy

About this document

We will make sure that you always feel safe when you get help from us.

Abuse, neglect and exploitation can make you feel:

- sad
- angry
- scared
- confused.

All our workers know that abuse, neglect and exploitation is NEVER allowed.

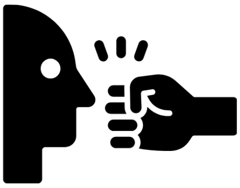
This document will:

- help you understand abuse, neglect and exploitation
- tell you how to seek help

Please note: This document discusses sensitive topics. If you feel upset or uncomfortable please let us know. We will help you to understand this information in a different way.

What is abuse?

Abuse is any action that is designed to hurt another person. There are different types of abuse.



Physical abuse is when someone hurts any part of another person's body.

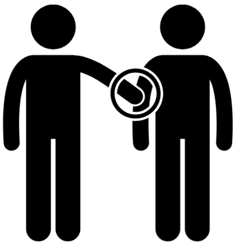
For example: punching, kicking, hitting or preventing the other person from moving freely.

Emotional abuse is when someone says mean things to hurt someone else.

For example: screaming or making rude comments because they know it will make the other person feel upset.

Financial abuse is when someone uses money to control another person.

For example: stopping another person from using their own money or bank accounts.



Sexual abuse is when someone talks about sexual topics or touches another person's body when the other person has not given permission for this to happen.

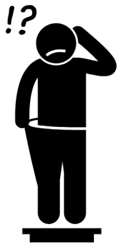
For example: touching the private parts of a person's body or making inappropriate comments about a person's appearance.

Cultural abuse is when someone uses another person's culture to cause harm or to control them.

For example: making racist comments or refusing to let the other person speak their native language.

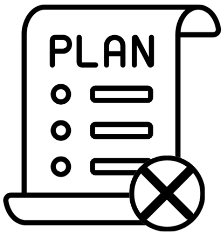
What is neglect?

Neglect is when a person is not given the care that they need. Some signs of neglect are:

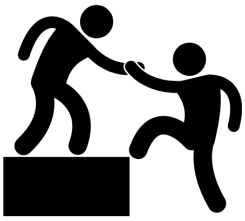


- quickly losing or gaining weight because of a bad diet

- dirty clothes and/or clothes that do not fit



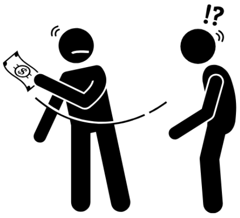
- not having your needs and preferences met when planning/providing you with services.



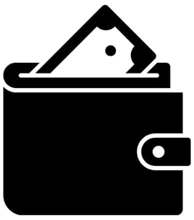
If you think we are not meeting your needs, let one of our workers know. We are here to help.

What is exploitation?

Exploitation is the act of treating a person unfairly in order to benefit from their work or resources. Some examples of exploitation are:



- a company not paying someone for their work (if the person did not agree to be a volunteer)



- a worker using a person's disability benefits to buy things that do not help that person

- an email from someone you do not know asking for personal information and bank details.

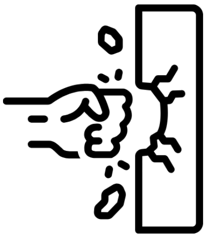
What is reasonable force?

Reasonable force is an action that is done to prevent harm.

We will only use reasonable force to keep you safe.

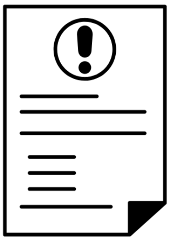
Our workers can use reasonable force to stop you from:

- harming yourself or others



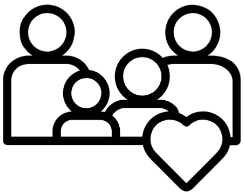
- damaging things on purpose

- being in harm's way (e.g. if you are in the path of a falling object).



How to get help

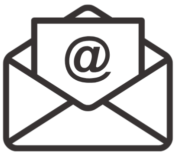
You should **make a complaint** or **report an incident** if you experience abuse, neglect or exploitation. We will help you to do this.



Family members, advocates or friends can also help you make a complaint or report an incident.

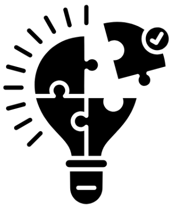
You can make a complaint/report and incident by:

- letting a worker know about the situation



- sending an email, or

- making a phone call.



We will work to solve the problem and involve other organisations (such as the NDIS Commission) when needed.

If you believe that we have not handled your incident/complaint in the right way, you can make a complaint about us directly to the NDIS.

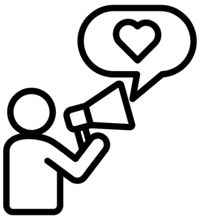
We will help you if you decide to do this.

Advocacy Policy

About this document

Advocacy is the act of helping a person get what they need.

There may be times when you will need the help of an advocate.



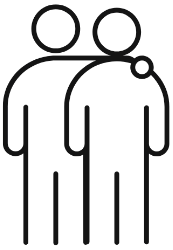
We will always help you to get an advocate if you need one.

This document will help you understand:

- what advocates are and what they do
- what advocates cannot do
- how we can help
- how to find an advocate.

What is an advocate?

An advocate is a person who can help you stand up for your rights.

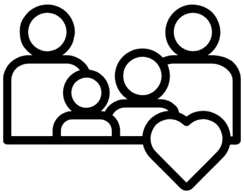


Advocates will work with you to find out what you need and what you want.

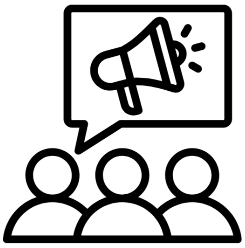
An advocate must be a person that you know and trust.

Who can be an advocate?

There are many different people that can be an advocate.



A family member can be your advocate.

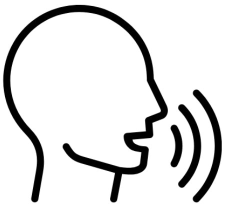


A **person from an outside advocacy group** can be your advocate.

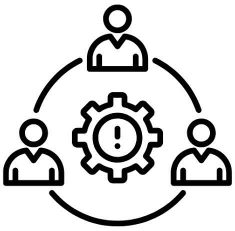
A **person from a legal organisation (like a lawyer)** can be your advocate.

What can advocates do?

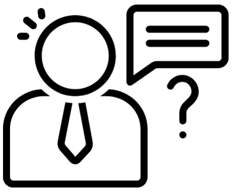
Advocates will always make sure that you are safe and have what you need.



Advocates can help you advocate for yourself.

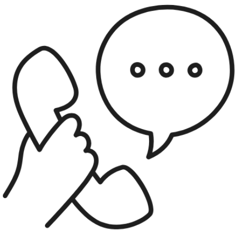


Advocates can help you find out what you need.



Advocates can say something for you.

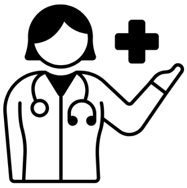
Advocates can help you write and sign papers.



Advocates can help you report incidents and make complaints.

What can advocates not do?

There are some things that advocates cannot do.



An advocate cannot help you with your health treatments.

An advocate cannot act as a go-between when resolving problems.

An advocate cannot make decisions for a different person (if they are not their advocate).

How will we help you?

We have let our workers know when an advocate might be needed.

You have the right to choose your own advocate. We will help you with this.

We will help you if you want to:

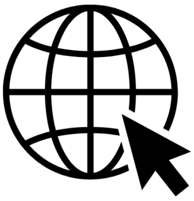
- be your own advocate
- get a new advocate
- stop advocacy services.

We will work with your chosen advocate.

How to find an advocate

We will help you to find and contact your chosen advocate.

You can ask one of our workers about where you can find an advocate.



You can use Google and the Disability Advocacy Finder tool to look for advocates near you.

You can also contact the department that is in charge of advocacy in your state.

A full list of services in each state can be found on the NDIS website.

Bowel management policy

About this document

Your **bowels** are long tubes in your body which process the food you eat.

You might notice that your stomach hurts.

You might have problems with going the toilet.

Problems like these are called **bowel problems**.

When we help you with bowel problems it is called **bowel management.**

This document will help you understand:

- different types of bowel problems
- things you can do to keep your bowels healthy
- things we can do to help you.

Bowel problems

Constipation is a bowel problem that makes it hard to pass stool (do a poo).

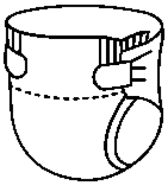
Having constipation often means that it takes a long time to go to the toilet.

Diarrhoea is when your poo is very runny.

Usually, it will also mean that you have to go to the toilet many times a day.

Feacal incontinence is when it is hard to control your bowels.

This means that you do a poo when you do not expect.
Sometimes it might happen before you can go to a toilet.



If you have feacal incontinence you might need to wear special clothing, such as nappies.

What can you do?

There are some things you can do to help with bowel problems.

You should make sure to drink plenty of water and eat a healthy diet.

Exercise can also help with some bowel problems, such as constipation.

We will let you know what else you can do to help with the bowel problems you have.

How we help with bowel problems

We will help you stay active and have a healthy diet.

We might create a food and exercise plan for you.

We will always give you plenty of time to go to the toilet.

We will support your ability to mobilise to the toilet. This means you may require mobility aids and equipment to assist you with your toileting. Such as a walking frame and toilet raise.
We will maintain your privacy and dignity.

We will always help you stay clean before and after going to the toilet.

We might have to look at your poo after you go to the toilet.

We might collect some of your poo to find out why you have bowel problems.

We might give you medicine to help with your bowel problems.

We might clean your bowels by putting liquid into your bottom (this is called an **enema**).

We might take you to a doctor.

Before doing any of these things we will:

- explain what will happen
- explain why it will happen
- ask for your permission.

If you ever feel unsure or uncomfortable with what we are doing please let us know.

Child Safe Policy

About this document

Every child and young person deserves to feel safe.

We are committed to providing an environment that aligns with the National Child Safe Principles.

This document outlines how we will help children and young people feel safe and welcome.

This document should be read together with other easy read documents.

Other easy read documents you will be given will give you more information about our service.

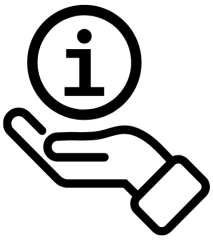
Other easy read documents that are available include:

- Abuse neglect and exploitation
- Advocacy
- COVID-19
- Entry and exit
- Decision making and consent
- Duty of care and dignity of risk
- Participant induction pack
- Privacy and confidentiality
- Feedback and complaints
- Incident management
- Infection control
- Participant rights

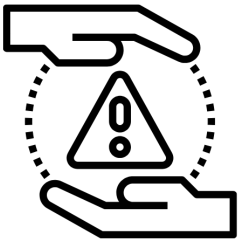
Our commitment to child safety

We will provide an environment that:

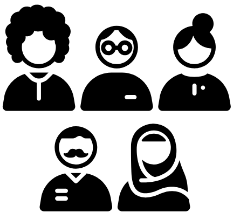
- actively promotes the wellbeing and safety of children
- seeks out the views of children and young people on issues that matter to them
- takes action to protect children and young people from harm.



You have the right to be heard, especially when you do not feel safe or well. We want you to tell us how you think we can improve your safety and wellbeing



We will actively identify and act on any risks to the safety and wellbeing of children and young people.



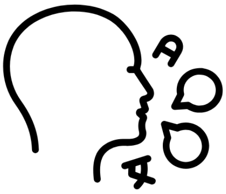
We are committed to all children and young people regardless of ability, sex, gender or background.

We will treat children, their families, and other workers with respect and courtesy and demonstrate appropriate personal and professional boundaries.

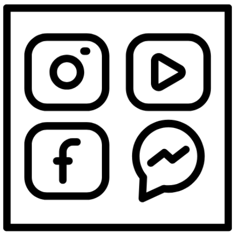
Everybody in our organisation will be trained to understand this policy and sign our Child safe code of conduct.

We will not disclose information about a child (including images) without consent, unless we have to make a report.

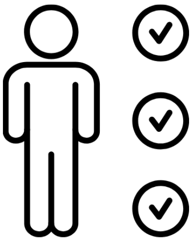
We will respond to concerns or complaints promptly and report any suspected harm to management and any state requirements.



We will not use inappropriate language around children, or provide access to inappropriate images or material.



Where children or young people access the internet and social media, we will promote safe use of online applications to learn, communicate and seek help.

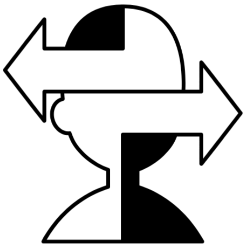


We will make sure that every worker in our organisation is cleared and suitable to work with children and young people.

Conflict of Interest Policy

About this document

Our workers have a responsibility to provide you with the best services possible.



A **conflict of interest** is when a person's personal interests clash with their responsibilities.

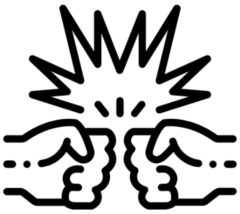
This can make a person use the organisation's money or power to benefit their family/friends.

This document will:

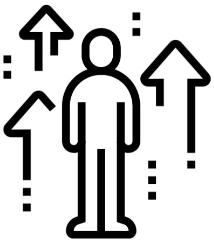
- explain different types of conflicts of interest
- give examples of conflicts of interest
- tell you how we stop conflicts of interest from happening
- tell you how we will make sure that conflicts of interest do not affect your choices
- tell you how to report a conflict of interest.

Types of conflicts of interest

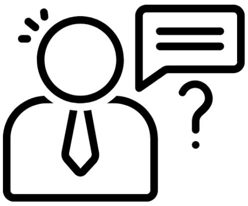
There are three main types of conflicts of interest.



An **actual conflict of interest** means the conflict of interest happened.



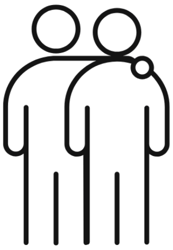
A **potential conflict of interest** means something might turn into a conflict of interest.



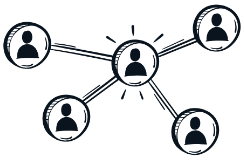
A **perceived conflict of interest** means that it seems like there might be a conflict of interest.

Examples of conflicts of interest

Some examples of conflicts of interest can include:



- a support worker referring you to a service run by their family member/friend

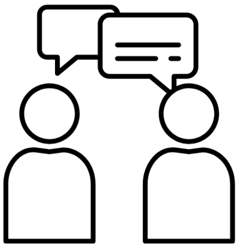


- a support worker being related to their manager

- a client giving a big gift to a support worker.

How will we stop conflicts of interest from happening?

Our goal is to avoid conflicts of interest as much as possible.



We always want to make sure that the help we provide and the advice we give you is free from any conflicts of interest.

We require that all workers at our organisation tell us about any actual, potential or perceived conflicts of interest.

We will work with our support workers to make sure that everything is fair at all times.

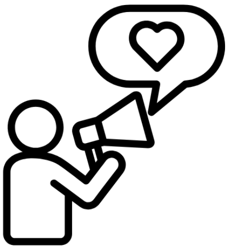
We will write down information about all conflicts of interest and make plans to fix them.

How will we make sure your choices are not affected by conflicts of interest?

We always aim to make sure that conflicts of interest do not affect the choices you make.

To do this, we will give you all the information needed to help you make the best and fairest choice.

You can always change your mind about any choices you have made.



If needed, we will help you find an advocate to assist you with making fair choices (please see Advocacy easy read).

We will NOT let support workers benefit from a conflict of interest.

What happens if you find out about a conflict of interest?

If you want to let us know about a conflict of interest we will support you.

You can let us know about a conflict of interest by:

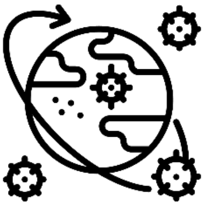
- writing to us
- sending us an email
- calling us on the phone
- speaking to someone.

1800 059 618

qld_team@nationaldisabilitycouncil.com.au

COVID-19 Policy

Easy Read



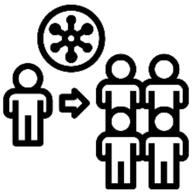
About this document

COVID-19 (also known as Coronavirus) has spread quickly around the world.

When an illness spreads around the world and affects many people, it is called a **pandemic**.

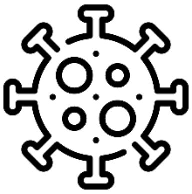
This document will help you understand COVID-19 and how we will help you during this COVID-19 pandemic.

This document should be read together with the Infection Control easy read document.

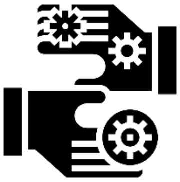


What is COVID-19?

A **virus** is an illness that is spread quickly from one person to another.

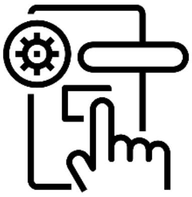


COVID-19 is a virus and it can spread:



- by touching people that have COVID-19

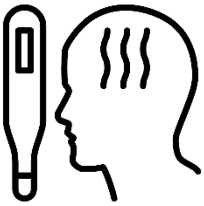
- when people with COVID-19 cough or sneeze



- by touching any objects that have the COVID-19 virus on them.

What are the signs of COVID-19?

The most common signs of COVID-19 are:

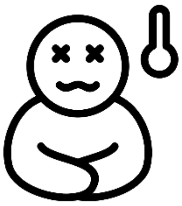


- a fever

- a dry cough

- tiredness

- feeling that it is hard to breathe.



A person with COVID-19 might have other, less common signs. Some less common signs of COVID-19 are:

- pain in any part of the body

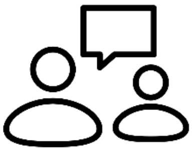
- sore throat

- loss of taste and/or smell

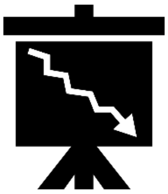
- rashes

Signs of COVID-19 might feel a lot like a cold or a flu.

The only way to know for sure if you have COVID-19 or not is to do a test.



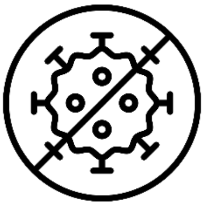
If you think you might have COVID-19 please let us know.



What can you do to stop the spread of COVID-19?

We will help you lower the risk of catching COVID-19.

We will have infection control measures in place at all times (please read our Infection Control easy read for more information).



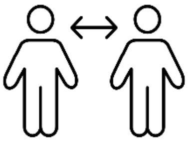
You can help stop the spread of COVID-19 by:

- cleaning your hands often with soap and water or hand sanitiser

- covering your mouth with a tissue when you cough or sneeze (for more information see the section on cough etiquette in the Infection Control easy read

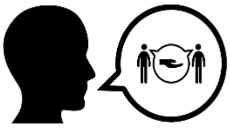
- not touching your face

- staying home if you feel sick



- staying 1.5m apart from people around you, this is called **social distancing.**

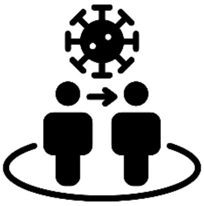
You and our workers might be required to wear a mask.



If you feel uncomfortable with wearing a mask please let us know. We are here to help.

COVID-19 tests

You might need to get a COVID-19 test if:



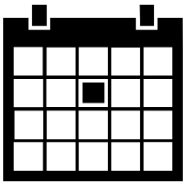
- you were in the same place as someone with COVID-19

- you have some signs of COVID-19

- you were close to someone that has or might have COVID-19.

The test will be done by a health professional (e.g. a doctor).

The health professional will put a small white rod into your nose or throat. Then, they will quickly pull it out again.



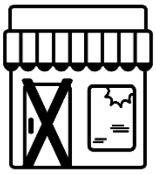
In one or two days, we will get the test results.

The test results will show if you have COVID-19 or not.

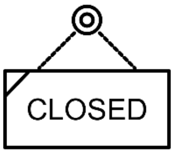
Lockdown

If there are many cases of COVID-19 nearby, we might need to go into **lockdown**.
Lockdown means that:

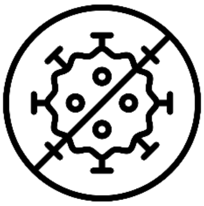
- you have to stay home as much as possible



- there might be some places where you cannot go



- many places, such as cafes, might be closed



Lockdowns happen to stop everyone from catching COVID-19.

Everyone has to follow the rules of a lockdown.

This means that there may be times when you cannot do some of the things that you usually like to do, such as visit friends.

We will always explain the rules of a lockdown to you. We will tell you:

- why the lockdown is happening
- how long the lockdown is likely to last
- where you are and are not allowed to go

Even if there is a lockdown you will still get all the help that you need.

As much as possible, we will also help you to do things that you enjoy at home.

Isolation

Isolation means not leaving your home except in an emergency or to get medical care.

You might have to go into isolation if you have COVID-19.

You might also have to go into isolation if you:

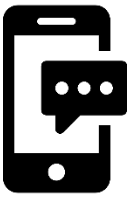
- were near someone with COVID-19
- returned from a state/country where there are many cases of COVID-19
- are experiencing signs of COVID-19.

If you have to go into isolation we will always explain what will be happening.

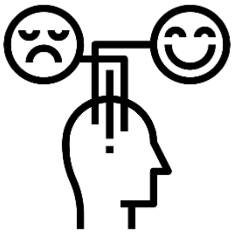
If you are in isolation we will help to make sure that:

- you still get all the help that you need

- you are isolated in a place that is clean and comfortable



- you keep in contact with your family and friends (by using the internet and/or telephone)



- you are able to let us know about how you are feeling

- you can still do things that you enjoy.

We understand that isolation can be stressful and make you feel sad.

Please let us know if you feel sad about anything. We are here to help.

Getting more information

If you need more questions about COVID-19 please let us know.

We will always give you the information you need.

You can also get more information from the NDIS.

You can also get more information from the NDIS.

- calling 1800 800 110
- sending an email to enquiries@ndis.gov.au
- sending a message using the online [webchat feature](#).

If you need any help with contacting the NDIS, please let us know.

Decision Making and Consent Policy

About this document

This document provides information about your rights to make decisions about your life.

Decision making is all about what **you** want.

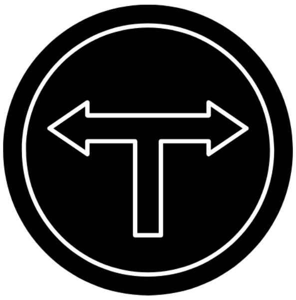
You have the right to be respected and treated like other people.

In this document you will learn about:

- your right to make decisions about your life
- the meaning of consent
- how we help you to make decisions
- what happens during emergencies.

Our job is to provide support in a way that makes you feel safe and comfortable.

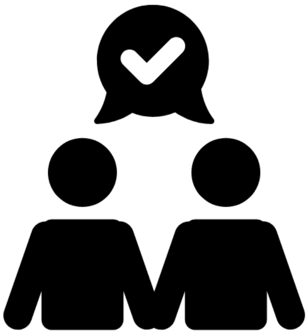
If something makes you feel unsafe or uncomfortable you can say now.



You have control over your life. We are here to support you to make decisions. You can make decisions about:

- daily activities
- food and drink
- money
- household tasks
- hygiene (such as showering or brushing teeth)
- what help you receive from us
- medical visits and treatments
- taking medicine
- sharing your personal information.

We will give you as much time as you need to make decisions.



Consent

When you agree that something should take place, you are giving **consent.**

Before giving consent you have to understand:

- what will be happening
- what you will have to do
- how the activity or treatment will make you feel better
- what might go wrong.

You can make the decision all by yourself if you feel comfortable.

You can ask questions if you are unsure or want more information at any time.

Withdrawing consent

Withdrawing consent means that you are changing your mind.

If you feel uncomfortable about something that is happening, you can withdraw consent at any time.

The law

We always follow the rules set by the government to make sure that you know your rights.

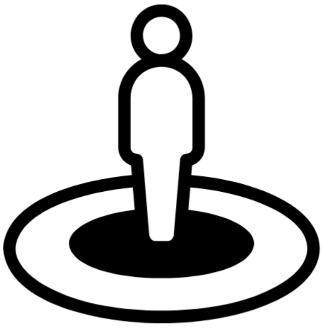
If you are 18 years or older, you can make your own decisions and give consent.

If you are under 18, you can make some decisions as well. However, your parent or guardian may need to help you.

How to give consent

You can choose how you give consent and tell us your decisions. You can give consent by:

- using body language (such as pointing or moving your head)
- signing a piece of paper with a pen
- saying ‘yes’ or ‘no’
- showing us a picture
- spelling out your answer.



Remember that the way you let us know about your decisions is up to **you**!

Substitute decision makers

Sometimes you might need help to make a decision. You can ask a person you trust and they can give you advice. You can talk to:

- your parents or guardian
- your support worker or carer
- your close friends and family.

A **substitute decision maker** may be assigned if:

- you do not have anyone to help you make decisions
- you are having trouble making your own decisions.

A substitute decision maker can help make informed decisions for you. Their job is to help you make good decisions that will improve your life.

Emergency management

We will always help to protect you from harm.

If you are in an emergency, we may NOT ask for consent if:

- you are too hurt to give consent (for example, if you are not awake)
- the doctor believes the emergency treatment will save your life
- you haven't told us that you DO NOT want the treatment
- the person doing the treatment has looked at your care plans.

Duty of Care and Dignity of Risk Policy

About this document

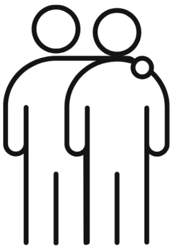
We will make sure you are always able to make choices for yourself.

Making your own choices can make you feel:

- special
- independent
- smart
- in control.

All our workers want to let you make decisions all the time, but sometimes they have to help you. This is called a **duty of care**.

This document will:



- talk about how you can make decisions

- explain why sometimes a worker might have to help you make a decision

- what may happen when you make decisions.

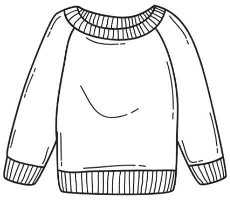
Dignity of risk

Dignity of risk means you are allowed make decisions and choices of what you can and cannot do.

You are always allowed to make your own decisions.

An example of decisions you can make, may be:

- choosing to ride a bike



- choosing to wear a nice jumper

- choosing to eat something yummy.

You are allowed to make mistakes.

You are allowed to have accidents.

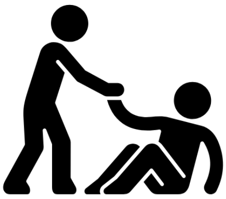
We will always continue to support you, even if a mistake or accident happens when you make a decision.

What is duty of care?

A **duty of care** means your workers have to help keep you safe.

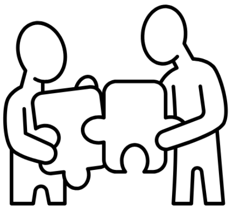
Sometimes if you make a decision a support worker might need to help you.

A support worker might help you make a decision, if the decision:



- could hurt you

- could hurt someone else

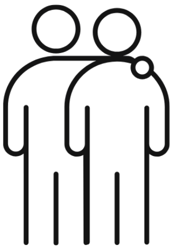


If your support worker thinks that your decisions could hurt you or could hurt someone else, they must try to help you.

A support worker may help you make a decision by:

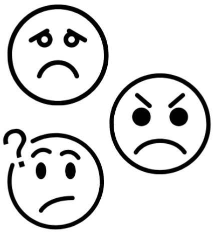
- talking about what might happen

- making some changes, to make the space you are in safer



- helping you to do the activity.

Sometimes it may be too dangerous, and the support worker might need to stop you from making the decision.



This might make you feel:

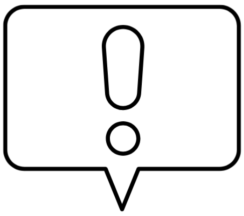
- sad
- angry
- Confused.

The support worker will always tell you why they stopped you from making a decision.

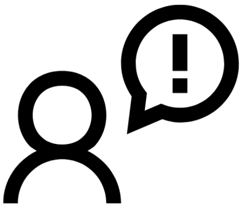
You and the support worker can talk about why your decision was stopped and ways you can safely make the decision.

How to get help

If you think your support worker has stopped you from making a decision unfairly, you are allowed to make a complaint. (See Feedback and complaints easy read).



If you think your support worker knew you would get hurt and didn't help you, you are allowed to make a complaint.



We will help you make a complaint if you decide to do this.

Entry and exit policy

About this document

Our services are available to people eligible for the NDIS.

We will always make sure that entering and exiting our services is as easy as possible.

This document will tell you about:

- how we will help you decide if our services are right for you
- how we will help you get started with our services
- when services might need to finish
- how we will help you switch from our service to another service.

Contacting us

The first step to getting access to our services is contacting us.
You can contact us by:

- calling us
  1300 059 618

- sending us an email
  hello@evercaresupport.com.au

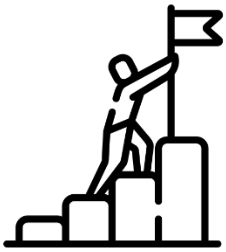
- letting us know in person.

A member of our team will reply to you and let you know what happens next. This marks the beginning of **service entry**.

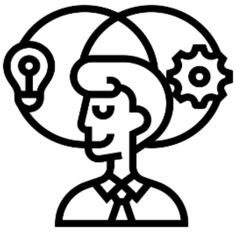
We will always respond to you as quickly as possible.

Intake assessment

We want to make sure that the services we offer suit your:



- goals



- needs; and

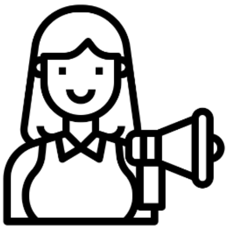
- preferences.

This is called **intake.**

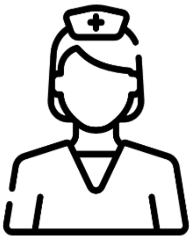
We will meet discuss your goals, needs and preferences with:

- you

- your family and/or guardians



- your advocate



- other service providers that are helping you.

When assessing if you can enter into our service, we will think about:

- if you are eligible for the NDIS
- if we have the right physical resources to help you (e.g. rooms and spaces, tools and equipment, transport options.)
- if we have workers that can help you effectively
- if there are other services in the area that could help you better.

How we will help you get started

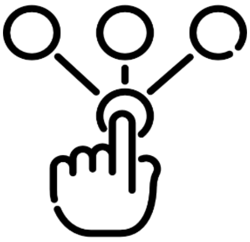
We will provide written confirmation that you have been accepted for our services.

We will give you a clear timeline for entry, including the date your services will start.

We will have meetings with you and other people that help to support you.

The goal of these meetings will be to come up with a service agreement.

Our goal is to have a service agreement that fully meets your goals, needs and preferences.



You have full choice about what services you get from us and how they are provided.

We will make sure to give the time and help you need to make decisions.

We will also let you know about any additional services available in your area.

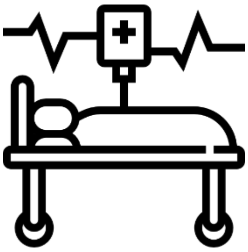
Choosing to exit

If you want to stop receiving services from us, you can let us know at any time. This is called **exiting**.

Some reasons why you may choose to exit include:

- moving to a different area (too far away to reach us)

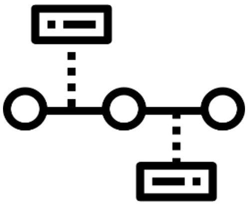
- transferring to a different service provider



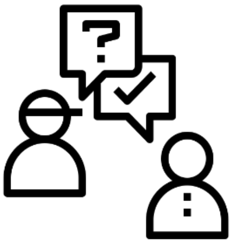
- changes in your health.

If your choice to exit is linked with an incident or complaint, we will make sure to help you resolve this (please see Incident management and Feedback and complaint easy reads).

You can change your mind about exiting. We will give you plenty of time to make a final decision.



If you decide to exit, we will give you a clear timeline for exiting, including the date your services will finish.



Why you might have to exit

We might ask you to exit our services.

Some reasons why we might ask you to leave our services include:

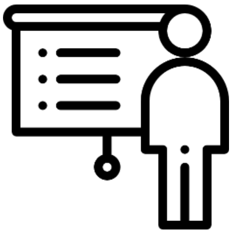
- your goals have changed and we cannot help you with your new goals

- there are problems with paying for services

- we no longer have the resources (e.g. workers or facilities) to provide the help you need

- we are shutting down.

We will ask you to exit in person and in writing.



We will always give you reasons why you are being asked to exit.

We will give you a clear timeline for exiting, including the date your services will finish.

We will give you plenty of notice before stopping services.

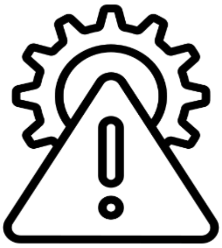
We will always help you to find a new service provider after you exit and help you to create a transition plan.

Transition plans

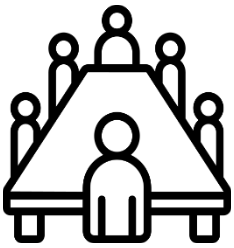
When you enter or exit a service, we will create a transition plan.

A transition plan is made to make sure changing service providers is as easy as possible.

We will make sure the transition plan is suited to your goals, needs and preferences.



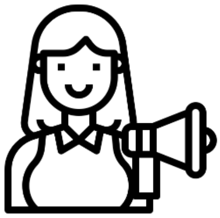
We will make sure to help you with any risks that might come from changing providers.



We will meet discuss your transition with:

- you

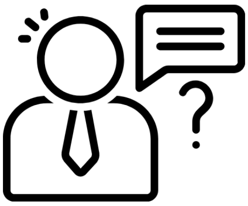
- your family and/or guardians



- your advocate

- other service providers that are helping you.

Incident Management Policy



About this document

We will always respond to and resolve incidents. Our goal is to make sure that you are happy and safe.

This document will help you to understand:

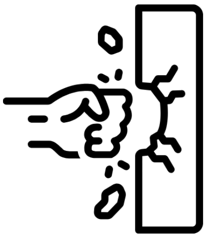
- how to recognise an incident
- how to get help
- how we respond to incidents
- what information we will need from you
- how we will help if you are part of an incident.

What is an incident?

An **incident** is when something goes wrong. It usually means that something bad happened to you or someone else.

There are many types of incidents. Some examples are:

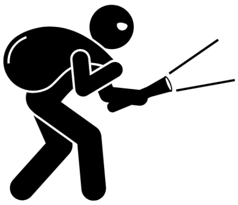
- a person experiencing harm of any type of harm or abuse (see Abuse, neglect and exploitation easy read)



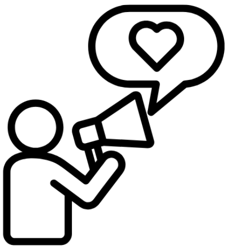
- loss or damage of property

- a near miss that could have caused harm

- taking the wrong medications



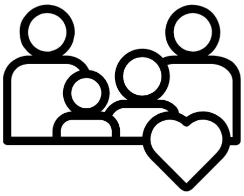
- illegal activities (e.g. theft or drug use).



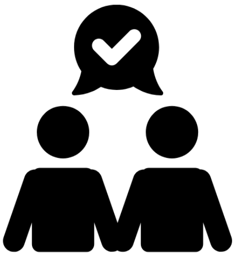
How to get help?

If you experience an incident or believe someone else may have experienced an incident, you should let us know. This is called **reporting**.

You can report an incident at any time. We will help you to do this.



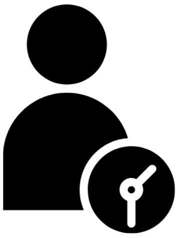
Family members, advocates or friends can also help you to report an incident.



You can report an incident by:

- letting a worker know about the situation
- sending an email
- making a phone call.

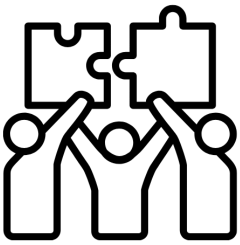
If you believe we did not sort out the incident well, you can make a complaint to the NDIS. We will help you if you decide to do this.



How we respond to incidents

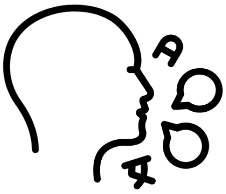
Once we know about an incident we will respond immediately, if possible. If we cannot do this immediately, we will let you know when and how we will respond.

We will make sure that all our workers know how to respond to incidents.



Less serious incidents will be resolved by us. We will work with you and any other people involved.

We might also tell your friends and family about incident and ask them to help.



If an incident is serious we will involve other organisations to help us resolve it. This is called **escalation**.

Depending on the type of incident, we might need to escalate it by contacting:

- the NDIS Quality and Safeguards Commission
- the police
- an external investigator
- other support services (for example, a doctor or counsellor).

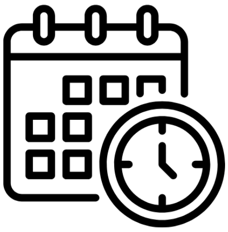
What information will we need?

To resolve an incident we need to write down what happened and what we did to help. This is called **keeping records**.

To keep good records we will need to ask you about the incident. We might ask questions like:

- What happened?
- At what time did it happen?
- Where did it happen?
- Who was involved?

If you are uncomfortable sharing information with us at any time, please let us know.



Records about what happened will be kept for at least 7 years after the incident.

How will we help you?

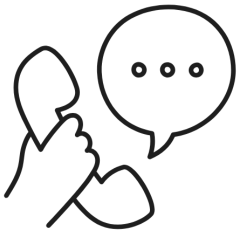
We will always uphold your rights and ensure that you are safe.

We will give you the help you need if you are affected by an incident.

For example: If you are stressed because of an incident, we can provide a counsellor who will help you to feel better.

If needed, we will discipline any people that did the wrong thing.

For example: If a worker caused harm to you or others, they will not work with us again.



We will check that we resolved the incident properly.

If needed, we will change how we do things to improve our services and make sure the incident

Participant Induction Pack

About this document

This document is about how we make sure your rights are met.

What are my rights?

If you need help saying what you want, you can get an **advocate**.

An advocate is an independent person who will speak for you.

If you want an advocate, we can help you find one.

If you are not happy with our service, you can make a complaint.

Your complaint will help us improve our services.

You can make your own **choices**.

We will give you all the information you need to make the right choice.

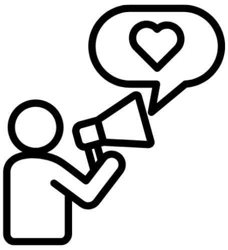
You have the **right** to:

- have your values and beliefs respected
- make informed choices
- be protected from violence, abuse or discrimination.

What are our responsibilities?

We aim to ensure there is no conflict of interest between you and our staff.

A **conflict of interest** is when someone does not do their job fairly. They may provide better services to one participant than other participants.



We have a duty of care to protect you from getting hurt as we help you reach your goals.

We protect your **private** information.

We create a **service agreement** that explains all the services you will receive. It also helps us understand if our services meet your needs and goals.

Participant Rights Policy

Easy Read

About this document

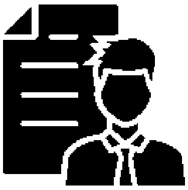
Every person that is receiving help from us has rights.

Your rights help make sure that you receive the best services for you.

This document outlines the basic rights that you have at all times.

This document should be read together with other easy read documents.

Other easy read documents you will be given will give you more information about your rights.



Other easy read documents that are available include:

- Abuse neglect and exploitation
- Advocacy
- COVID-19
- Entry and exit
- Decision making and consent
- Duty of care and dignity of risk
- Participant induction pack
- Privacy and confidentiality
- Feedback and complaints
- Incident management
- Infection control

Your rights

You have the right to access services that:

- respect all your legal and human rights
- promote your freedom of expression.

You have the right to make choices about every aspect of the services you receive.

You have the right to maximise your independence.

You have the right to have your culture, values and beliefs respected.

You have the right to intimacy and to express yourself sexually.

You have the right to feel comfortable when receiving services.

You have the right to have your information kept private.

You have the right to get services that are free from:

- violence
- abuse
- neglect
- exploitation
- discrimination.

You have the right to access an advocate.

You have the right to give us feedback at any time.

If you are not happy with our services, you have the right to make a complaint (for further information and contact details please see the Feedback and complaints easy read)

Privacy and Confidentiality Policy

About this document

This document tells you about our privacy and confidentiality policy.

The privacy and confidentiality policy says how we do what the law says we must do to protect your privacy.

Privacy means that any person has the right to have their personal information to not be told or shown to anyone.

Confidentiality means that there is a duty to keep your personal information private and protected.

If you would like to know more information or you have a question, please ask our staff.

Your Privacy

This document is about your privacy. This document will tell you:

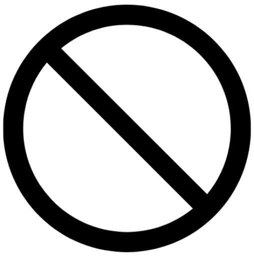
- what we know about you
- why we know things about you
- how we will use what we know
- how we will keep what we know safe
- what we do when your personal information has been accessed without your consen

There are laws to protect your personal information.

Personal information is anything that is about you. This could be:

- your name
- where you live
- your date of birth
- your job or day activities
- information about your disability.

We will keep your information **private.**



This means we will **not** tell people your personal information unless we have to.

You do **not** have to give us your personal information.

If you choose not to give us personal information we may not be able to give you services you need.

Why do we keep your personal information?

We ask for your personal information for different reasons:

- it helps us to provide the right services and supports
- we can help with your complaints
- we can get the right workers for you.

What personal information do we keep?

The personal information we keep might include:

- your name
- your date of birth
- your phone number
- your email address

Sometimes your personal information is sensitive information.

Sensitive information is normally private and can include:

- your cultural background
- your religious beliefs
- you sexual orientation
- information about your health.

We also keep personal information on:

- other service providers you receive services from
- your family or carers
- our staff.

We will not tell anyone about your personal information unless we have to.

The NDIS Commission might need the information to keep you safe.

How do we use your personal information?

We will use your personal information to help us provide the best services and supports.

We might need to tell other people about you because they give you the supports you need.

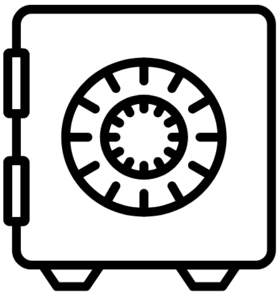
You need to give consent for us to tell other people your personal information. Consent means you say ‘yes’.

We might give other people your information when you have not given consent if:

- the laws say we must
- it will keep you safe.

You can ask us any time about the personal information we keep about you.

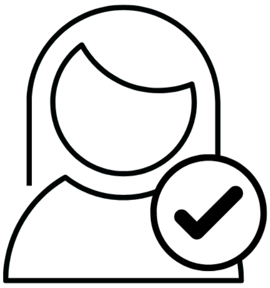
You can request a copy of your personal records.



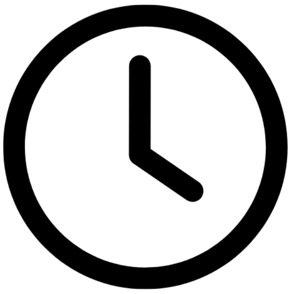
How do we keep your personal information safe?

We usually don’t keep paper records, but if we do, we keep them safe in our offices under lock and key.

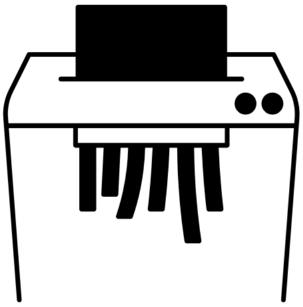
We keep your personal information stored on computers protected with a password.



Only staff who provide supports and services to you can see your personal information.



We only keep your personal information as long as we need it.



We destroy your personal information when we no longer need it

What happens when someone accesses your information without your consent?

When someone has accessed your personal information without our permission and without your consent, this is called a data breach.

If a data breach happens:

- we will tell you what happened
- we will take action to make sure you will not be harmed
- we will find out why it happened
- we will improve the way we handle your personal information
- we may have to report this to the government
- this will not affect the services we provide

Injections policy

About this document

You might be taking medications to make you feel better.

Many medicines are taken through the mouth.

Some medicines need to be put under your skin with a needle. This is called an **injection**.

This document will help explain how we give injections.

How we give injections

We want to make sure that you feel comfortable with us giving you an injection.

Our workers know how to give an injection safely.

We will always ask for your permission before giving you an injection.

An injection is only given to make you feel better.

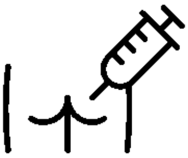
We will always explain what will happen and how it will make you feel better.

We will always explain where we will put the needle.
We might need to put the needle into:

- your tummy

- your arm

- your thigh



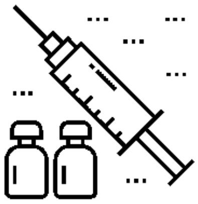
- your bottom.

We will keep everything clean when giving you the injection.

You can always tell us if you still feel uncomfortable or scared.

If there are other things we can do to make you feel more comfortable, please let us know.

When giving you an injection we will follow these steps:

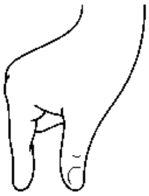


1. Get all the injection supplies.

2. Clean our hands.

3. Clean the area of your body where you will get the injection.

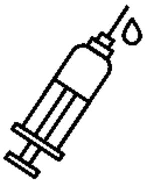
4. Fill the needle with medicine.



5. Pinch your skin a little.

6. Insert the needle into your skin.

7. Hold the needle in your skin for a few seconds (you might feel a small sting).

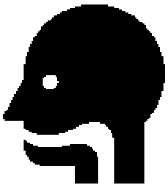


8. Remove the needle.

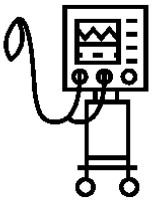
9. Clean the area on your body where you had the injection (you might feel some pressure on your skin) and put on a band aid if needed.

Tracheostomy management policy

About this document



A **tracheostomy tube** is a tube that you have in your throat.
This tube is put there to help you breathe.



This tube might also be connected to a machine that helps air go in and out of your body. This machine is called a **ventilator**.

This document will explain how we will help with your tracheostomy tube.

How we will help with your tracheostomy tube

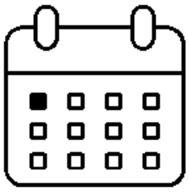
We want to make sure that your tracheostomy tube is as comfortable as possible.

It is very important that your tracheostomy tube works correctly.

Our workers know how to safely look after people with tracheostomy tubes.

Some things about tracheostomies are complicated. For example, changing your tube or changing how your ventilator works.

Complicated things like this can only be done by a doctor. We will help you get help from a doctor if you need it.



Every day we will make sure that every part of your tracheostomy tube is:

- in the right place

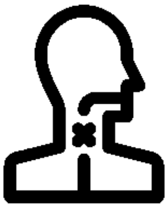
- clean

- working correctly.

Our goal is to fix any problems with the tracheostomy tube to stop them getting worse.

We will always explain what we will do and ask your permission before touching your tracheostomy tube or doing anything to the tube.

We will help you if there is something wrong with your tube.



Some things you might experience if something is wrong with your tube are:

- difficulty breathing

- quick, shallow breathing

- feeling very thirsty

- vomiting

- stress

- coughing

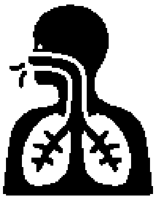
- tiredness.

If we cannot solve the problem, we will take you to see your doctor.

If the problem is very bad and needs to be fixed urgently, we will call an ambulance (000).

Ventilator management policy

About this document

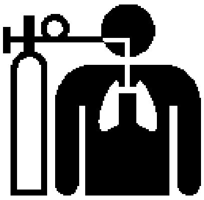


A **mechanical ventilator** is a machine that helps air go in and out of your body. It is a machine that helps you breathe.

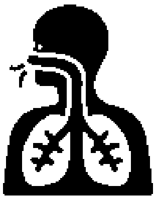
This document will explain:

- when a ventilator is used
- how we will help you move whilst on a ventilator
- things you may feel whilst using a ventilator.

When a ventilator is used

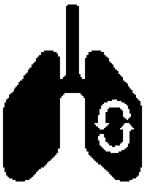


If you have hard time breathing, you may need a mechanical ventilator.
There are two different types of ventilators:



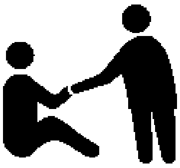
- some ventilators are a tube that go into your mouth or your nose, down a tube in your neck and into your lungs.

- some ventilators are a mask that cover your mouth or nose and blow air into your mouth and nose.



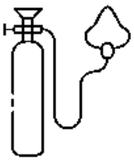
Both ventilators put clean air into your body and helps take away old air from your body.

A team of people with special knowledge will help you decide if a ventilator is something you need.



Moving around

If you have to move from one place to another, two support workers will always help you.



When we are moving you, we will always have spare air in case anything happens.

We will always talk to you and your chosen family if we need to move you.

You can always signal if you are in pain, uncomfortable, or would like to stop.

Things you may feel whilst using a ventilator

Some ventilators can make it hard to:

- talk

- cough

- swallow.

The team that is helping you will always talk to you and your family about the things you may feel and how we will make you feel comfortable.