



## Document of Policies

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# Abuse, neglect and exploitation

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## Introduction

Every person has a right to live a life free from the fear of violence, abuse, harm, neglect and exploitation regardless of their gender, age, disability, background or any other characteristic. We are committed to ensuring the safety and wellbeing of all participants we provide supports and services to.

Any alleged, suspected or act of abuse, neglect or exploitation is a reportable incident. It must be reported to the NDIS Commission, police and any other relevant authority (see: Report incident to NDIS).

It is our organisation's responsibility to respond to reportable incidents immediately (see: Incident management policy), and a notification process will be undertaken with the NDIS Commission and relevant stakeholders.

Documentation of all incidents will be recorded on an internal incident report and logged onto an internal incident register.

Records of incidents will be kept for a minimum of 7 years from date of incident.

## Applicability

### When

- applies at all times and in all locations.

### Who

- applies to all representatives including key management personnel, directors, full time workers, part time workers, casual workers, contractors, volunteers.

## Governing obligations for this policy



NDIS Practice Standards 1.5.1 Violence, abuse, neglect, exploitation and discrimination



NDIS Practice Standards 1.5.2 Violence, abuse, neglect, exploitation and discrimination



NDIS Practice Standards 1.5.3 Violence, abuse, neglect, exploitation and discrimination

## Governing regulations for this policy



National Disability Insurance Scheme Act 2013 (Cth)



NDIS (Quality Indicators) Guidelines 2018 (Cth)

## Documents relevant to this policy



## Preventing abuse and neglect

- we will provide supports and services in an environment free of abuse and neglect
- we will ensure people with high support needs and/or communication difficulty are well supported to enable detection and prevention of abuse and neglect
- we will ensure staff are trained to recognise, prevent or minimise the occurrence or recurrence of abuse and neglect of participants.

## Responding to abuse and neglect

We will respond to any case of abuse, neglect or exploitation by:

- promoting a culture of no retribution for reporting of suspected cases of abuse or neglect
- escalating all alleged or suspected incidents of abuse or neglect to key management personnel immediately
- ensuring any victim of suspected or alleged abuse or neglect is adequately supported by an independent person such as a relative, friend, advocate or legal practitioner
- responding promptly and sensitively where an alleged case of abuse or neglect has occurred, to protect the person from further harm, and coordinating appropriate responses in line with duty of care obligations
- where relevant (especially for criminal acts), preserving and recording the evidence and maintaining the scene of the incident by taking photos and protecting any personal articles relevant to the incident
- recording what is known about the incident including the services and people involved and any witnesses
- informing participants about what is going to happen before taking action and throughout any response to abuse and neglect
- ensuring appropriate physical, emotional and psychological support is provided to, available to and easily accessible by a person following a report or allegation of abuse or neglect
- ensuring the victim, family, guardian or other support person has the choice of pursuing the matter through the legal system, and/or the choice to refer to the police, and be supported to access advice and services required.

## Abuse and neglect responsibilities

- all staff are responsible for providing supports and services in a manner consistent with the Code of Conduct and treating participants with respect and dignity at all times
- all staff are responsible for responding promptly and sensitively to protect the victim from further harm
- key management personnel are responsible for ensuring all staff and volunteers are aware of, trained in, compliant with, and implement the policies and processes to prevent and respond to abuse, neglect and exploitation of participants
- key management personnel are responsible for informing and reporting the appropriate authorities (e.g. police), and the victim's family, guardian or substitute decision maker of alleged or suspected incidents of abuse or neglect, unless the guardian or decision maker is the alleged or suspected perpetrator
- all staff and witnesses will cooperate with the investigations of police or other external agency.

## What is not abuse and neglect

- to restrain a participant in accordance with an approved behaviour support plan authorised by a restricted practices authorisation mechanism
- to take reasonable steps to disarm a participant seeking to harm themselves or others

- to separate participants who are fighting
- to move a participant out of harm's way
- to restrain a participant from causing intentional damage to property, in self-defence, or in the defence of others.

## Breach of abuse and neglect policy

Any workers found to be perpetrating any form of abuse or neglect will lead to disciplinary action including termination of employment.

Any attempt to cover up or failure to report suspected or actual incidents of abuse will lead to disciplinary action including termination of employment.

# Advocacy

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Advocacy is acting, speaking or writing to promote and protect the human rights and welfare of a vulnerable person or group of people. Examples of vulnerable people include Aboriginal and Torres Strait Islander peoples, children and their families, refugees, the elderly, the LGBTQIA community, the homeless, and people with disability. Advocacy services for people with disability in Australia are funded by the National Disability Advocacy Program (NDAP) which ensures there is no cost for participants or service providers to access advocacy services.

Types of advocacy include:

- individual advocacy—a one-on-one advocacy aimed to prevent or address instances of discrimination or abuse to a person with disability
- systemic advocacy—advocacy to influence or secure long-term changes to ensure the collective rights and interests of people with disability
- family advocacy—when a parent or family member advocates with and on behalf of a family member with disability
- group advocacy—advocacy for a group of people with disability, such as a group of people living in shared accommodation
- citizen advocacy—where community volunteers advocate for a person with a disability over the long-term, supported by a citizen advocacy organisation
- legal advocacy—where a lawyer provides legal representation, pursues positive changes to legislation, or gives legal advice to people with disability about discrimination and human rights.

An advocate can:

- provide direct advocacy on behalf of a person
- provide information and advice so a person can advocate for themselves (e.g. deal with a landlord, go to court, deal with police, get legal advice, negotiate deals, deal with problems at work or education, deal with guardianship and financial matters)
- connect a participant to relevant services e.g. solicitor
- help a participant work through problems
- help a participant make formal actions on matters e.g. assist to make a complaint with the anti-discrimination board.

Advocates do not:

- provide counselling
- make decisions for another person
- provide mediation
- provide case management.

## When

- applies to all services at all sites.

## Who

- applies to all representatives involved in providing services including key management personnel, full time workers, part time workers, casual workers, contractors and volunteers.

### Governing obligations for this policy



NDIS Practice Standards 1.4.5 Independence and informed choice



NDIS Practice Standards 1.5.1 Violence, abuse, neglect, exploitation and discrimination

### Governing regulations for this policy



Disability Discrimination Act 1992 (Cth)



Disability Services Act 1986 (Cth)



National Disability Insurance Scheme Act 2013 (Cth)



NDIS (Nominees) Rules 2013 (Cth)

### Documents relevant to this policy



Advocacy (easy read)

## Advocacy commitment

- upon commencing services, new participants are informed of the role of advocates, their right to use advocates and advocacy services, and how to contact and involve advocacy agencies
- participants are supported if they choose to self-advocate, change advocates, or withdraw their authority for an advocate
- if a participant needs an advocate and a family or carer cannot provide it, we will attempt to introduce an advocate chosen by the participant
- if a participant requests one of our workers to be an advocate, their authority to act is recorded along with the issues important to the participant and their goals
- we will work with the advocate chosen by a participant and involve the advocate in all areas of the participant's service planning and decision making
- whenever a participant is assisted by an advocate, we will document this.

# Bullying harassment and discrimination

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## Introduction

All services and supports are provided in a safe, flexible and respectful environment for workers and participants free from all forms of bullying, harassment and discrimination. All representatives are required to treat others, including other workers and participants, with dignity, courtesy and respect. This policy sets a standard for all workers and creates a positive environment for both workers and participants.

## Applicability

### When

- applies at all times including when we provide services to participants and when we interact with members of the public
- applies on-site, off-site or after hours work; during work-related social functions and conferences—wherever and whenever workers may be as a result of their duties.

### Who

- applies to all representatives including key management personnel, directors, full-time workers, part-time or casual workers, job candidates; student placements, apprentices, contractors, volunteers
- applies when workers encounter participants and members of the public in the course of their duties.

Governing regulations for this policy

	Age Discrimination Act 2004 (Cth)
	Anti-Discrimination Act 1977 (NSW)
	Anti-Discrimination Act 1991 (Qld)
	Anti-Discrimination Act 1992 (NT)
	Anti-Discrimination Act 1998 (Tas)
	Australian Human Rights Commission Act 1986 (Cth)
	Charter of Human Rights and Responsibilities Act 2006 (Vic)
	Disability Discrimination Act 1992 (Cth)
	Disability Inclusion Act 2014 (NSW)
	Disability Inclusion Act 2018 (SA)
	Discrimination Act 1991 (ACT)
	Equal Employment Opportunity (Commonwealth Authorities) Act 1987 (Cth)
	Equal Opportunity Act 1984 (SA)
	Equal Opportunity Act 1984 (WA)
	Equal Opportunity Act 2010 (Vic)
	NDIS (Quality Indicators) Guidelines 2018 (Cth)
	Racial Discrimination Act 1975 (Cth)
	Sex Discrimination Act 1984 (Cth)
	Workplace Gender Equality Act 2012 (Cth)

#### Applicable processes for this policy

	Manage complaint
	Manage incident
	Manage worker performance
	Report incident

## Worker rights

Every worker has the right to:

- recruitment and selection decisions based on merit and not affected by irrelevant personal characteristics
- work free from discrimination, bullying and sexual harassment
- raise issues or make an enquiry or complaint in a reasonable and respectful manner without being victimised
- reasonable flexibility in working arrangements, especially if needed to accommodate family responsibilities, disability, religious beliefs or culture.

## Worker responsibilities to prevent bullying harassment and discrimination

To prevent bullying harassment and discrimination, worker responsibilities are to:

- follow the standards of behaviour outlined in this policy.
- offer support to people who experience discrimination, bullying or sexual harassment, including providing information about how to make a complaint.
- avoid gossip and respect the confidentiality of complaint procedures and information provided by workers.
- treat everyone with dignity, courtesy and respect.

## Key management personnel responsibilities to prevent bullying harassment and discrimination

To prevent bullying, harassment and discrimination, the responsibilities of key management personnel are to:

- model appropriate standards of behaviour
- take steps to educate and make staff aware of their obligations under this policy and the law
- intervene quickly and appropriately when they become aware of inappropriate behaviour
- act fairly to resolve issues and enforce workplace behavioural standards, making sure relevant parties are heard
- help staff resolve complaints informally
- refer formal complaints about breaches of this policy to key management personnel for investigation
- ensure workers who raise an issue or make a complaint are not victimised
- ensure that recruitment decisions are based on merit and that no discriminatory requests for information are made
- seriously consider requests for flexible work arrangements.

## Unacceptable conduct

Discrimination, bullying and sexual harassment are unacceptable and unlawful under the following legislation:

- [Sex Discrimination Act 1984 \(Cth\)](#)
- [Racial Discrimination Act 1975 \(Cth\)](#)
- [Disability Discrimination Act 1992 \(Cth\)](#)
- [Age Discrimination Act 2004 \(Cth\)](#)
- [Australian Human Rights Commission Act 1986 \(Cth\)](#).

Any workers or key management personnel found to have engaged in such conduct will be counselled, warned or disciplined—severe or repeated breaches may lead to formal discipline or dismissal.

Any allegation of discrimination, bullying or harassment is an incident—follow the Manage incident process for resolution.

## Discrimination

Discrimination is treating, or proposing to treat, someone unfavourably because of a personal characteristic protected by the law, such as sex, age, race or disability.

Discrimination can occur:

directly	<p>When a person or group is treated less favourably than another person or group in a similar situation because of a personal characteristic protected by law (see list below).</p> <p>For example, a worker is harassed and humiliated because of their race</p> <p>or</p> <p>A worker is refused promotion because they are 'too old'.</p>
indirectly	<p>When an unreasonable requirement, condition or practice is imposed that has, or is likely to have, the effect of disadvantaging people with a personal characteristic protected by law (see list below).</p> <p>For example, redundancy is decided based on people who have had a worker's compensation claim rather than on merit.</p>

Protected personal characteristics under Commonwealth discrimination law include:

- a disability, disease or injury, including work-related injury
- parental status or status as a carer, for example, because they are responsible for caring for children or other family members
- race, colour, descent, national origin, or ethnic background
- age, whether young or old, or because of age in general
- gender
- industrial activity, including being a member of an industrial organisation like a trade union or taking part in industrial activity, or deciding not to join a union
- religion
- pregnancy and breastfeeding
- sexual orientation, intersex status or gender identity, including heterosexual, gay, lesbian, bisexual, transsexual, transgender, queer or questioning
- marital status, whether married, divorced, unmarried or in a de facto relationship or same sex relationship
- political opinion
- social origin
- medical record
- an association with someone who has, or is assumed to have, one of these characteristics, such as being the parent of a child with a disability.

It is against the law to treat someone unfavourably because you assume they have a personal characteristic or may have it at some time in the future.

## Bullying

If someone is being bullied because of a personal characteristic protected by equal opportunity law, it is a form of discrimination.

Bullying can take many forms, including jokes, teasing, nicknames, emails, pictures, text messages, social isolation or ignoring people, or unfair work practices.

Under Commonwealth law, this behaviour does not have to be repeated to be discrimination—it may be a one-off event.

Behaviours that may constitute bullying include:

- sarcasm and other forms of demeaning language
- threats, abuse or shouting

- coercion
- isolation
- inappropriate blaming
- ganging up
- constant unconstructive criticism
- deliberately withholding information or equipment that a person needs to do their job or access their entitlements
- unreasonable refusal of requests for leave, training or other workplace benefits.

Bullying is unacceptable and may also breach work health and safety laws.

## Harassment

Harassment is when a person, or a group of people, is intimidated, insulted or humiliated because of one or more characteristics. This is unlawful harassment which can be a single incident or a number of incidents over a period of time.

Harassment can include:

- telling jokes about particular racial groups
- sending explicit or sexually suggestive emails or texts (see sexual harassment)
- displaying offensive or pornographic websites or screen savers (see sexual harassment)
- making derogatory comments or taunts about someone's race or religion, gender, sexual orientation or disability
- making jokes and innuendos, or threats to a person based on their sexual orientation (see sexual harassment)
- referring to a transgender person as 'him' although she identifies as female and has asked to be addressed accordingly
- forcing a worker or participant who identifies as intersex to use separate facilities such as a unisex, gender neutral or all gender toilet
- asking intrusive questions about someone's personal life, including their disability or sex life
- creating a hostile working environment, for example, where the display of pornographic materials or crude conversations, innuendo or offensive jokes are part of the accepted culture.

## Sexual harassment

Sexual harassment is a specific and serious form of harassment often in the form of unwelcome physical, spoken or written sexual behaviour, which could be expected to make a person feel offended, humiliated or intimidated.

Sexual harassment can include:

- comments about a person's private life or the way they look
- sexually suggestive behaviour, such as leering or staring
- brushing up against someone, touching, fondling or hugging
- sexually suggestive comments or jokes
- displaying offensive screen savers, photos, calendars or objects
- repeated unwanted requests to go out
- requests for sex
- sexually explicit posts on social networking sites
- insults or taunts of a sexual nature
- intrusive questions or statements about a person's private life
- sending sexually explicit emails or text messages
- inappropriate advances on social networking sites
- accessing sexually explicit internet sites
- behaviour that may also be considered to be an offence under criminal law, such as physical assault, indecent exposure, sexual assault, stalking or obscene communications.

Even if someone does not object to inappropriate behaviour in the workplace, it does not mean that they are consenting to the behaviour.

Sexual harassment is covered in the workplace when it happens at work, at work-related events, between people sharing the same workplace, or between colleagues outside of work.

All staff and volunteers have the same rights and responsibilities in relation to sexual harassment.

A single incident is enough to constitute sexual harassment—it doesn't have to be repeated.

All incidents of sexual harassment—no matter how large or small or who is involved—require key management personnel to respond quickly and appropriately.

We recognise that comments and behaviour that do not offend one person can offend another.

This policy requires all our representatives to respect other people's limits.

## Victimisation

Victimisation is subjecting or threatening to subject someone to a detriment because they have asserted their rights under equal opportunity law, made a complaint, helped someone else make a complaint, or refused to do something because it would be discrimination, sexual harassment or victimisation.

Victimisation is against the law.

It is also victimisation to threaten someone (such as a witness) who may be involved in investigating an equal opportunity concern or complaint.

## Gossip

Workers should not talk with other workers, participants or suppliers about any complaint of discrimination or harassment.

Breaching the confidentiality of a formal complaint investigation or inappropriately disclosing personal information obtained in a professional role is a serious breach of this policy and may lead to formal discipline.

## Merit

All recruitment and job selection decisions are based on merit—the skills and abilities of the candidate as measured against the inherent requirements of the position—regardless of personal characteristics.

It is unacceptable and may be against the law to ask job candidates questions, or to in any other way seek information, about their personal characteristics, unless this can be shown to be directly relevant to a genuine requirement of the position.

## Resolving issues

We strongly encourage any worker who believes they have been discriminated against, bullied, sexually harassed or victimised to take appropriate action by speaking to key management personnel or submitting a complaint.

## Breach of bullying harassment and discrimination policy

Any allegation that breaches this policy is an incident—refer to the Manage incident process for resolution.

Allegations that breach this policy may lead to disciplinary action including termination of employment—refer to the Manage worker performance process.

Victimisation is also a serious breach of this policy and is likely to result in formal discipline against the perpetrator.

# Child Safe

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## Introduction

The protection of children and young people is a cornerstone in safeguarding and improving the lives of children and young people with a disability. While providing supports and services under the NDIS, workers are uniquely placed to identify and respond to the needs and vulnerabilities of children or young people with a disability. Everyone has a responsibility to protect the wellbeing and safety of children or young people whom they have contact, and report any case a child or young person is suspected to be at risk of significant harm.

Our organisation is committed to ensuring our practice is compliant with all relevant legislation for our state, as well as national legislation and regulations, including the National Principles for Child Safe Organisations

## Policy objective

This policy aims to ensure that the organisation provides supports and services in a child-safe environment and that concerns about the welfare or safety of children and young people are responded to appropriately. The purpose of this policy is to:

- adhere to the Child Safe Organisations National Principles
- set out appropriate standards of behaviour and practices for people working and volunteering with children and young people in a Child safe code of conduct
- provide standards by which the organisation can be held accountable to workers, volunteers, parents, guardians, carers, children and young people that are involved with the organisation
- increase worker awareness of factors that create a risk of harm to children and young people and the strategies in place to minimise risks
- build worker knowledge of how to identify if a child or young person is, or may be, at risk of harm and how to respond appropriately to allegations, concerns or instances of harm
- ensure that all workers understand reporting requirements and processes to be followed when making a report
- encourage organisational leaders to promote sharing good practice and learnings about child safety and wellbeing.

### When

- applies to all sites and services.

### Who

- applies to all representatives including key management personnel, directors, full time workers, part time workers, casual workers, contractors and volunteers.

Governing regulations for this policy

-  Care and Protection of Children Act 2007 (NT)
-  Child Protection (International Measures) Act 2003 (Qld)
-  Child Protection (Offender Reporting and Offender Prohibition Order) Act 2004 (Qld)
-  Child Protection Act 1999 (Qld)
-  Child Protection Regulation 2023 (Qld)
-  Children, Young Persons and Their Families Act 1997 (Tas)
-  Children, Youth and Families Act 2005 (Vic)
-  Children and Community Services Act 2004 (WA)
-  Children and Young People (Safety) Act 2017 (SA)
-  Children and Young People (Safety) Regulations 2017 (SA)
-  Children and Young People Act 2008 (ACT)
-  Children and Young Persons (Care and Protection) Act 1998 (NSW)
-  Childrens Court Act 1992 (Qld)
-  Child Safety (Prohibited Persons) Act 2016 (SA)
-  Child Safety (Prohibited Persons) Regulations 2019 (SA)
-  Child Wellbeing and Safety Act 2005 (Vic)
-  Working with Children (Criminal Record Checking) Act 2004 (WA)

#### Documents relevant to this policy

-  Child safe (easy read)
-  National Principles for Child Safe Organisations
-  Poster - National Principles for Child Safe Organisations
-  State-based implementation guide - Child safe

## Our commitment to child safety

We are committed to supporting an environment that promotes the safety and wellbeing of children and young people as our priority. This policy has been developed to ensure that our organisation is a safe and welcoming place for children and young people, and one where children and young people are equally valued, respected and encouraged to participate. This commitment extends to all children and young people regardless of their abilities, sex, gender, or background.

## National Principles for Child Safe Organisations

The National Principle for Child Safe Organisations this policy is based on are as follows:

1. Child safety and wellbeing is embedded in organisational leadership, governance and culture.
2. Children and young people are informed about their rights, participate in decisions affecting them and are taken seriously.
3. Families and communities are informed and involved in promoting child safety and wellbeing.
4. Equity is upheld and diverse needs respected in policy and practice.

5. People working with children and young people are suitable and supported to reflect child safety and wellbeing values in practice.
6. Processes to respond to complaints and concerns are child focused.
7. Staff and volunteers are equipped with the knowledge, skills and awareness to keep children and young people safe through ongoing education and training.
8. Physical and online environments promote safety and wellbeing while minimising the opportunity for children and young people to be harmed.
9. Implementation of the national child safe principles is regularly reviewed and improved.
10. Policies and procedures document how the organisation is safe for children and young people.

## When is a child or young person at risk?

A child or young person is at risk when they have suffered, or there is a likelihood they will suffer, harm. The relevant harm may be physical, emotional or psychological. A child or young person is also at risk where the parent or guardian is unable or unwilling to care for the person.

## Reporting concerns about children and young people at risk

We are committed to providing a supportive and safe environment for staff and volunteers who disclose harm or risk to children and young people. All suspicions that a child or young person is at risk must be reported to key management and to the appropriate state/territory child protection hotline.

All concerns that do not meet the threshold of child at risk, but which involve a concern about the welfare or safety of a child are to be reported to key management.

The below table provides a reference for local state/territory authorities and legislation related to reporting children and young people at risk.

State/territory	Local authority	Relevant local legislation
ACT	<a href="#">Child and Youth Protection Services</a>	<a href="#">Children and Young People Act 2008 (ACT)</a>
NSW	<a href="#">The NSW Department of Communities and Justice</a>	<a href="#">Children and Young Persons (Care and Protection) Act 1998 (NSW)</a>
NT	<a href="#">Department of Territory Families, Housing and Communities</a> <a href="#">Report child abuse</a>	<a href="#">Care and Protection of Children Act 2007 (NT)</a>
QLD	<a href="#">Department of Child Safety, Seniors and Disability Services</a>	<a href="#">Child Protection Act 1999 (Qld)</a>
SA	<a href="#">Department for Child Protection</a>	<a href="#">Children and Young People (Safety) Act 2017 (SA)</a>

TAS	<a href="#">Department of Justice</a>	<a href="#">Children, Young Persons and Their Families Act 1997 (Tas)</a>
VIC	<a href="#">Department of Families, Fairness and Housing</a>	<a href="#">Children, Youth and Families Act 2005 (Vic)</a>
WA	<a href="#">Department of Communities, Child Protection and Family Support</a>	<a href="#">Children and Community Services Act 2004 (WA)</a>

## What is a child safe environment?

Child safe environments are safe and friendly settings where children and young people are protected and feel respected, valued and encouraged to reach their full potential. To provide an environment safe for children and young people, we will:

- take a preventative, proactive and participatory approach on child wellbeing and safety issues
- seek out and embrace the opinions and views of children and young people on issues relating to our services that they consider important or impact them
- take action to protect children and young people from harm.

## Working with children and young people

The standards and requirements identified below in our commitment to child safety identify the professional boundaries, ethical behaviours that are accepted and behaviours that are unacceptable. All staff are required to abide by and follow these standards and requirements.

## Child safe code of conduct

As part of our commitment to child safety, all workers and volunteers in the organisation will:

- Act in accordance with child safety and wellbeing policies and procedures at all times.
- Behave respectfully, courteously and ethically towards children and their families and towards other staff.
- Listen and respond to the views and concerns of children, particularly if they communicate (verbally or non-verbally) that they do not feel safe or well.
- Promote the human rights, safety and wellbeing of all children in the organisation.
- Demonstrate appropriate personal and professional boundaries.
- Consider and respect the diverse backgrounds and needs of children.
- Create an environment that promotes and enables children's participation and is welcoming, culturally safe and inclusive for all children and their families.
- Involve children in making decisions about activities, policies and processes that concern them wherever possible.
- Contribute, where appropriate, to policies, discussions, learning and reviews about child safety and wellbeing.
- Identify and mitigate risks to children's safety and wellbeing as identified by risk assessments and Risk management policies and processes.
- Respond to any concerns or complaints of child harm or abuse promptly and in line with the Complaint management policy and Manage complaint process.
- Report all suspected or disclosed child harm or abuse as required by relevant state and federal legislation and the Report incident process.
- Comply with protocols on communicating with children.
- Comply with relevant state and federal legislation and policies and procedures on record keeping and information sharing.

All workers and volunteers in the organisation will not:

- Engage in any unlawful activity with or in relation to a child.
- Engage in any activity that is likely to physically, sexually or emotionally harm a child.
- Unlawfully discriminate against any child or their family members.
- Be alone with a child unnecessarily.
- Arrange personal contact, including online contact, with child participants for a purpose unrelated to work activities.
- Disclose personal or sensitive information about a child, including images of a child, unless the child and their parent or legal guardian consent or as a result of reporting requirements.
- Use inappropriate language in the presence of children, or show or provide children with access to inappropriate images or material.
- Work with children while under the influence of alcohol or prohibited drugs.
- Ignore or disregard any suspected or disclosed child harm or abuse.

## Recruitment and worker screening

The organisation will comply with and carry out Working With Children Checks in accordance with state/territory requirements of the National Disability Insurance Scheme Act 2013 (Cth).

All WWCC will be validated online and verified by management prior to a new worker or board member commencing in a child-related role.

Any existing worker who cannot renew their WWCC must notify key management as soon as possible, and any worker or volunteer with a WWCC bar or interim bar will be removed from child-related employment immediately in line with the standards outlined in the National Principles for Child Safety.

Our recruitment practices will take account of risks and other factors that impact on children and young people, and worker selection, referee checks and background checks will reflect our commitment to ensuring child safety and wellbeing. We will review our recruitment and human resources management practices regularly to make sure that we are aligned with best practice approaches for the protection of children and young people.

Any third party contractors engaged in providing supports to children will have appropriate measures in place to ensure the safety and wellbeing of children and young people.

## Staff training

All staff will be made aware of their responsibilities to children and young people as part of their induction and ongoing training and development and will be required to acknowledge this policy alongside their record keeping, information sharing and reporting responsibilities.

Staff supervision and management will support employees to maintain a focus on child safety and wellbeing and to draw attention to breaches of the Code of Conduct within the organisation. We will provide a safe and supportive environment for workers to identify and disclose risk of harm to children and young people.

## Online and social media safety

Online spaces provide additional challenges to maintaining the safety of children and protecting them from harm.

Social media also poses a variety of risks to children. It is vital that staff, parents and carers understand these risks and the responsibility to ensure there are codes of conduct in place for the use of social media when interacting with children and young

people.

Each child's risk management plan will include risks relating to social media. These risks include:

- exposure to inappropriate content
- overfamiliar relationships between children and people in positions of power (e.g. children interacting with teachers on social media)
- cyber bullying
- the sharing of inappropriate images
- physical health challenges, such as headaches
- mental health challenges, such as depression and social isolation
- data breaches and data misuse
- grooming.

Our risk management plans will include an overview of each risk, as well as mitigation and management strategies. In addition, our risk management plans and strategies will be developed in conjunction with staff, the child, other professionals and advocates, as well as the child's support network. This will help ensure that all relevant parties are empowered to provide early help if online incidents occur.

Staff, parents and carers are responsible for teaching children social media safety. Some key principles of social media safety include:

- only sharing information the child would be happy for their grandparents, parents and teachers to see
- understanding that people online can lie about their identities
- remembering that a post, once published online, cannot always be taken back; even if a post has been removed, it may have already been saved and shared
- ensuring that all social media accounts are set to 'private'
- understanding the importance of secure passwords
- blocking people that exhibit negative behaviours, such as cyberbullying
- considering that content can always be shared, even if it is sent in a private message.

In addition to the above, it is vital to have appropriate online privacy settings and child safety filters in place and discuss with the child the reasons these are in place.

All staff at our organisation will be trained to:

- support children to engage with online spaces in a safe manner
- be engaged, open and supportive in relation social media use
- understand the devices and platforms children are using
- set reasonable rules around social media use
- understand the needs and preferences of each child in relation to social media use
- understand and manage the risks associated with social media
- respond to the misuse of digital devices and to unacceptable online behaviours in line with disciplinary policies
- maintain clear processes for reporting online safety issues or breaches of acceptable use in line with incident reporting requirements
- manage complaints and incidents in a compliant manner.

Any inappropriate use of social media by staff will be reported to the relevant authorities in line with the Complaints management and Disciplinary policies.

## Communication and review of children and young people protection policy and systems

All new workers, including volunteers and contractors, will be trained on the requirements of this policy.

This policy will be made available to all participants and their families, along with any other additional information required.

## Breach of child safe policy

Breach of this policy, or the Child safe code of conduct, may result in disciplinary action and/or referral to the appropriate government authority.

In addition to this, all adults in Australia with a reasonable belief that an adult has committed a sexual offence against a child have an obligation to report that information to the police (failure to report). Key management will commit an offence if they know of a substantial risk of child sexual abuse and have the power or responsibility to reduce or remove the risk, but negligently fail to do so (failure to protect).

# Decision making and consent

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## Introduction

Consent is the permission given by a person or substitute decision maker concerning decisions that affect a person's life. Consent requires a person to be informed about what they are giving consent to or for. Consent requires an understanding of the decision at hand which is referred to as capacity. When a person has the capacity to make a particular decision, they can:

- understand the facts and choices involved
- weigh up the consequences, and
- communicate the decision.

Some people may need support to exercise their capacity to make decisions that affect them, and to increase their decision making skills and confidence. Participants are always presumed to have the capacity to make their own decisions and give consent when it is required, unless there is evidence otherwise. We don't assume a person lacks capacity because of their age, appearance, disability, behaviour, language skills or any other condition or characteristic.

## Applicability

### When consent is required

- when a participant provides us sensitive personal information
- when providing supports and services to participants
- when creating or reviewing plans for participants
- before a participant begins a planned activity
- before a participant undertakes a health assessment
- when supporting participants to have medical or dental treatment
- when supporting participants to take medicine
- if we intend to share a participant's personal information with a third party
- before planning the use of any of the participant's funds
- before commencing a restrictive practice as part of a behaviour support plan
- when images or video of the participant is to be used for promotional purposes
- when a forensic procedure is required for a police investigation.

### When consent is not required

- any routine treatment or non-intrusive examination for diagnostic purposes, such as a visual examination of the mouth, throat, nose, eyes or ears
- first aid medical treatment in a situation when a person cannot give consent (e.g. they are unconscious)
- when urgent medical treatment is required to save the person's life, to prevent serious damage to a person's health or to alleviate significant pain or distress.

### Who

- applies to all representatives including key management personnel, directors, full time workers, part time workers, casual workers, contractors and volunteers.

Governing regulations for this policy

 National Disability Insurance Scheme Act 2013 (Cth) NDIS (Quality Indicators) Guidelines 2018 (Cth)

#### Applicable processes for this policy

 Authorise regulated restrictive practice

#### Documents relevant to this policy

 Decision making and consent\_Easy Read Participant Consent Form Privacy and confidentiality\_Easy Read

## Consent for medical treatment

- the medical practitioner must advise the participant about the general nature and effects of the proposed treatment
- the medical practitioner must advise the participant any risks associated with the proposed treatment
- the medical practitioner must advise the participant the general nature, effects, benefits and risks of alternative treatments or of not having treatment.

## Autonomous decision making

- for participants with the capacity to make their own choices without support, all decisions must be referred to them
- participants with the capacity to make their own choices can talk to family or friends, or carry out their own research before making any decisions
- participants are supported to make informed choices about the benefits and risks of decisions under consideration.

## Supported decision making

- participants that need help to make decisions and give consent will be supported in ways that best suits the individual, e.g. arranging an interpreter, supporter or advocate, getting information, communication tools, or arranging a certain time or place that best supports the participant
- where a participant has been assessed as not having the capacity to make his or her own decisions, we will support substitute decision makers, either informal or formal
- participants are always assumed to have capacity to make their own decisions no matter if their decision-making capacity is only small
- at any stage, participants are provided sufficient time to consider and review their options and seek advice if required, e.g. during assessment, planning, provision, review and exit.

## Impaired decision-making capacity

- if a participant is assessed to have impaired decision-making capacity, substitute decision making is required

- impaired decision-making capacity is when a person is unable to make decisions at a particular time because they are incapable of either:
  - understanding any information that may be relevant to the decision
  - retaining such information
  - using such information in the course of making the decision
  - communicating his or her decision in any manner
  - by reason of being comatose or otherwise unconscious, is unable to make a particular decision about his or her medical treatment.
- a participant's capacity can be lost or regained depending on a number of factors.

## Informal decision making

- informal decision making is where a person making a decision on behalf of another person has not been legally appointed
- informal decision makers can include the person's family, friends, carer or nominated support, and can help make decisions on behalf of a participant about who the participant wishes to see, their work, leisure, recreation, holidays or accessing services
- details for informal decision makers is recorded for each participant and this information is available to all relevant workers.

## Formal decision making

- formal decision making is where a legally appointed guardian or person responsible can make decisions for a participant
- formal decision making can assist if there is conflict over decisions being made about the person
- formal decision making can assist if that person's safety or the safety of others is at risk and a guardianship order is in place by the relevant state or territory authority
- formal decision making can assist where there is specific legislation that requires it, such as consent for medical treatment
- details for formal decision makers is recorded for each participant and this information is available to all relevant workers
- details of formal decision makers are recorded for participants, if relevant, and are available to all relevant workers.

## Substitute decision makers

If there is uncertainty over who can provide consent when a participant with an impaired decision-making capacity requires it, the order of priority is:

- a. a guardian (including an enduring, private or public guardian) who has been appointed with a medical and dental consent function
- b. a spouse, de facto spouse, or partner who has a close and continuing relationship with the person
- c. the carer or person who arranges care regularly and is unpaid (the carer's pension does not count as payment)
- d. the carer of the person before they went into residential care, or
- e. a close friend or relative.

If a person above is not capable of consenting for the participant, or they refuse to consent, the next person in the hierarchy can consent.

If we think it is in a participant's best interest to get help from a substitute decision maker, we should:

- explain to the participant why we think someone needs to make a decision for them
- ask the relevant state or territory authority (usually a civil administrative tribunal) to look at whether or not to appoint a guardian or administrator.

An application for consent by the relevant state or territory authority is required for participants with impaired decision-making capacity for medical treatments which include:

- special medical treatment (e.g. termination of pregnancy, treatment likely to result in significant side effects, or for removal of tissue for transplanting to another person)
- significant medical or dental treatment, and there is no person responsible or the person responsible is not available, or
- significant or routine medical treatment when the patient is objecting and there is no appointed guardian authorised to override such objection.

## Consent rights for participants

- consent is required every time a participant seeks access to services to ensure they are fully informed of their rights and our obligations
- participants have the right to make decisions about things that affect their lives and to take calculated risks
- children and young people have a right to be involved in decisions that affect them in ways appropriate to their age and stage of development
- each participant must have sufficient time to consider and review their options and seek advice if required, at any stage of support provision, including assessment, planning, provision, review and exit
- each participant has the right to withdraw or amend their consent if they wish.

## Our consent responsibilities

- encourage and support participants to make informed decisions when their consent is required
- ensure consent arrangements for participants, including any legal authorisations required, are recorded in the participant's file, and are reviewed and updated regularly
- ensure consent for financial matters is obtained from the participant, or legally appointed financial manager or person appointed under a Power of Attorney
- obtain consent from the participant or legally appointed guardian, for life decisions such as accommodation, medical and dental treatment, forensic procedures, and behaviour support
- obtain consent from the participant prior to collecting, using and storing a participant's information and provide reasons why the information is needed
- obtain consent before disclosing any of a participant's personal information (such as case notes, management plans or assessments) to other parties
- only disclose participant information without consent if we believe the person is at risk of harm, an unlawful act has occurred or as otherwise required by law
- not influence or limit decision making and self-determination with our interests, beliefs or values when providing decision making support.

## How we obtain consent

Consent from a participant or a substitute decision maker should always be in writing but if this is not practicable, verbal consent is acceptable providing it is later confirmed in writing.

## When consent is refused

- a note of a participant's refusal to consent must be stored in the participant's file
- there are no consequences for a participant in terms of receiving services.

## When consent is not possible

- informal decision making can help make decisions for the participant when there is no legal arrangement
- formal decision making may be required if there is conflict over decisions about the participant, the participant's safety or the safety of others is at risk, or the law requires it.

# Diversity and inclusion

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## Introduction

This policy aims to support and promote an inclusive environment that recognises, respects and values the individual differences of all people engaged with our services including participants and workers. These individual differences can include:

- gender
- age
- language
- ethnicity
- cultural background
- disability
- sexual orientation
- religious beliefs
- family responsibilities.

In our workforce, diversity is an important resource as it helps us:

- attract and retain employees from a wide pool of talent
- foster a culture that reflects our values and is open to all
- improve innovation, creativity and inspire worker engagement and satisfaction
- improve the connection between our people and the people we support.

When supporting participants, being culturally responsive is an important part of providing person-centred supports. Person centredness means the supports are “person focused” rather than “service focused” and culturally responsive means we are able to interpret, define and respond to the individual cultural needs of each participant.

## Applicability

### When

- applies to all areas of the business at all times.

### Who

- applies to all representatives including key management personnel, directors, full time workers, part time workers, casual workers, contractors and volunteers.

## Governing obligations for this policy

 NDIS Practice Standards 1.2.1 Individual values and beliefs

 NDIS Practice Standards 1.2.2 Individual values and beliefs

## Governing regulations for this policy



Interpretation Act 1987 (NSW)



NDIS (Quality Indicators) Guidelines 2018 (Cth)



Racial Discrimination Act 1975 (Cth)

## Promoting diversity and inclusion

Diversity and inclusion is promoted by:

- filling employment openings based on merit
- fostering an inclusive environment respectful of all cultural backgrounds and beliefs
- fostering a workplace culture that is inclusive and embraces individual differences
- fostering a physical and cultural environment that encourages participation
- consulting participants, carers, family members, community groups, and other organisations on the needs of individual participants
- supporting and encouraging each participant to be part of the community
- ensuring participants have access to the same facilities and services as the rest of the community
- supporting participants with opportunities to socialise and build enduring relationships within their local communities
- providing supports and services in a way that is culturally responsive.

## Supporting participants from CALD backgrounds

When providing services to participants from CALD backgrounds, we will:

- where possible, recruit/match workers with the same background as the participant
- ensure all workers supporting the participant are trained in or are aware of how to provide services in a culturally sensitive way.

## Supporting participants that identify as LGBTQI+

We recognise that LGBTQI+ people are a diverse group that is comprised of a variety of sexual orientations and gender identities. People with diverse gender and/or sexual identities may be more vulnerable to abuse, isolation, mental health conditions and other problems associated with discrimination. We understand this and are committed to providing inclusive services. To support participants that identify as LGBTQI+ our organisation will:

- foster an environment where participants feel safe to express and develop their gender identity and/or sexual orientation
- acknowledge that, as with all other participants, LGBTQI+ people have the right to voice their views on issues that affect them
- avoid assuming a participant's gender and sexual orientation
- use inclusive and respectful language when speaking to or about LGBTQI+ individuals
- include information about LGBTQI+ issues during worker training
- identify and challenge any discriminatory beliefs if they are present
- provide resources that help participants understand their identity
- where appropriate, refer participants to relevant LGBTQI+ support services if required (e.g. local social spaces)
- ensure that we observe appropriate levels of confidentiality regarding participants' information, including information about their gender identity and/or sexual orientation
- respect participants' right to not disclose their gender identity and/or sexual orientation.

## Arranging interpreting and translation services

We will help each participant to make decisions about whether or not they require any foreign language services. Foreign language services include oral interpreting and, if required, the translation of written documents.

The role of an interpreter is to interpret spoken words only. The role of a translator is to translate written documents.

An interpreter or translator cannot provide:

- counselling services
- advice regarding any form of support provision
- advice about the NDIS.

We will help each participant to find an interpreter that is most suited to their needs and preferences.

The participant has the right to request a specific interpreter. For example, this could be a specific individual or an individual from a particular background or cultural group.

The participant has the right to bring an English-speaking family member or carer to assist with interpreting. However, in general, we will also obtain the assistance of a person from an external translation and interpreting service, such as [Translating and Interpreting Services \(TIS\) National](#).

We will ensure to assess all key risks relating to interpreting and translating services. This includes risks relating to:

- conflicts of interest
- loss of objectivity; and
- privacy breaches.

In addition, when an interpreter is required we will record:

- the name and contact information of the interpreter
- situations and service contexts when the interpreter will be required
- whether any documents need to be translated
- how the interpreter will be contacted (e.g. face-to-face, telephone).

In general, NDIS face-to-face meetings will include an onsite interpreter. Phone interpreter services may be used for shorter and less complex discussions.

It is acceptable to use any reputable interpreting and translation service. However, services provided by TIS National can be billed to the NDIA.

# Duty of care and dignity of risk

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## Introduction

A duty of care is a legal obligation for us to take reasonable care for those we support, so as to not cause harm to another person, when that harm could be reasonably foreseen. Workers are required to use their judgement to balance their legal duty of care to ensure a participant's safety and wellbeing is maintained whilst ensuring a participant's right to live an autonomous and self-determining life is supported. This right is referred to as dignity of risk.

We recognise that when duty of care and dignity of risk is balanced it promotes positive risk-taking for the participant which:

- improves autonomy, social interaction and health
- supports independent living and self-determination, and
- enables a person-centred approach.

When duty of care and dignity of risk is not appropriately balanced it can have negative impacts on both the participant and workers. The participant may feel patronised, over protected and a loss of dignity. Whilst workers may be found negligent for failing to fulfil their obligation of duty of care to participants, it is therefore important that our workers understand and take appropriate actions to ensure they fulfil their duty of care and support participants' right to dignity of risk.

## Applicability

### When

- applies to all areas of service practice.

### Who

- applies to all representatives including key management personnel, directors, full time workers, part time workers, casual workers, contractors and volunteers.

## Governing regulations for this policy



NDIS (Quality Indicators) Guidelines 2018 (Cth)

## Documents relevant to this policy



Duty of care and dignity of risk (easy read)

## Standard of care

As an organisation we are responsible for ensuring all workers have the necessary qualifications, experience and understanding to navigate duty of care obligations and dignity of risk decisions. This may be achieved through:

- training and education, and
- consultation with participants and their support networks to understand their personal goals, values and boundaries.

## Duty of care

We have a **legal, ethical, and professional duty of care to ensure the safety and wellbeing of participants while we are providing support**. This obligation is grounded in Australian law and guided by the NDIS Practice Standards, and **applies at all times during service delivery**.

Where children under the age of 18 are involved, we ensure they are suitably supervised and supported at all times during service provision, particularly when no other guardian is present. Staff must also ensure that appropriate supervision is in place at the end of support, in line with any relevant custody arrangements or court orders.

We are responsible for ensuring that our standard of care supports participants in living a meaningful and independent a life as possible. However, it also means taking necessary caution and proactive measures when certain risks present in everyday life for the participants we support.

When a situation, choice or activity arises where duty of care and dignity of risk need to be considered, it is important we factor:

- participant's previous experience in similar situations
- participant's desires, opinions, goals, values and knowledge
- the context in which the decision is being made
- the possible outcomes and extent of harm to the participant and others if the participant does pursue the choice.

If there is a reasonable and foreseeable chance of significant harm to the participant or others, then it is our legal responsibility to act with a duty of care. This may include:

- discussing with the participant the potential outcomes and ways they may be able to protect themselves or others
- adjusting the environment or activity to eliminate potentially harmful outcomes
- assisting in the action or activity where the risk or hazard is likely to occur, or as a last alternative
- stopping or postponing the activity.

If there are no reasonable adjustments or assistance that can be offered it may be necessary to intervene or stop the choice or activity. If this occurs, the worker will discuss the decision with the participant and explain why they made that decision and ways in the future it may be navigated. If the worker is required to intervene, this will require an incident report.

## Dignity of risk

Whilst we are responsible for maintaining a duty of care, it is also our responsibility to allow participants to take risks. Like all adults, it is participants' right to learn from experience even if the outcomes may pose a potential risk.

Any decision a participant makes will be supported as far as practicable whilst maintaining a duty of care.

Any dignity of risk decision made by a participant will not provide the basis for service withdrawal or denial.

## Breach of duty of care

A **breach of duty of care is a failure to meet the relevant standard of care**. This means that a worker either does something that has put the participant at risk which resulted in foreseeable harm, or they did not act to protect the participant when there

was reasonable expectation or foreseeable risk that it would result in harm. This is known as negligence.

If a worker or organisation is found to have breached their duty of care or a participant's right to the dignity of risk, we will promptly investigate all allegations. This may result in disciplinary action up to and including termination of employment.

If the worker or organisation is found to be negligent, this may result in civil legal action.

## Disciplinary Action

Offence	1st Offence	2nd Offence	3rd Offence
Insufficient Consideration of Risk Vs Choice	Verbal Warning	Formal Written Warning	Termination
Insufficient Duty of Care	Formal Written warning	Termination	
Negligence	Termination		
Serious Misconduct	Termination		

In the event of incidents relating to breach of duty of care and negligence, the worker or organisation may be susceptible to civil legal action.

# Participant rights

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## Introduction

Participant rights set a clear context for how our supports and services are provided.

All participants have the right to:

- receive person-centred supports
- have individual values and beliefs respected
- privacy and dignity
- independence and informed choice
- be free from violence, abuse, neglect, exploitation or discrimination.

## Applicability

### When

- applies to supports and services provided to all participants.

### Who

- applies to all representatives including key management personnel, directors, full time workers, casual workers, contractors and volunteers.

## Governing obligations for this policy



NDIS Practice Standards 1.1.1 Person-centered supports



NDIS Practice Standards 1.1.2 Person-centered supports

## Governing regulations for this policy



NDIS (Quality Indicators) Guidelines 2018 (Cth)

# Person-centred supports

The rights of participants are that;

- each participant can access supports that promote, uphold and respect their legal and human rights
- each participant is enabled to exercise informed choice and control
- supports provided promote, uphold and respect individual rights to freedom of expression, self-determination and decision-making.

## Individual values and beliefs

Each participant can access supports that respect their culture, diversity, values and beliefs.

Each participant's autonomy is respected, including their right to intimacy and sexual expression.

## Privacy and dignity

Each participant can access supports that respect and protect their dignity and right to privacy.

## Independence and informed choice

Each participant is supported to make informed choices, exercise control and maximise their independence in relation to the supports provided.

## Freedom from violence, abuse, neglect, exploitation or discrimination

Each participant can access supports free from violence, abuse, neglect, exploitation or discrimination.

# Person-centred practice

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## Introduction

This policy supports and promotes a person-centred approach in the way we provide our supports and services. When providing person-centred supports, the participant is at the centre of those supports, not the service provider. This means the focus is on what matters most to the participant and their family and/or carer, and how we can support our workers with this.

The key principles that underpin a person-centred practice:

- the participant is at the centre
- the participant’s wider social network is involved as full partners
- there is a partnership between us, the participant, and their family/carer
- the participant’s whole of life is considered.

The benefits of a person-centred approach is that:

- the wishes of each participant are respected
- each participant is encouraged to make informed choices
- it provides flexibility to meet the diverse needs of each participant
- it improves personal development of participants by broadening their experiences
- it improves customer experience and overall satisfaction of participants.

## Applicability

When
<ul style="list-style-type: none"> <li>• applies to supports and services provided to all participants.</li> </ul>
Who
<ul style="list-style-type: none"> <li>• applies to all representatives including key management personnel, directors, full time workers, part time workers, casual workers, contractors and volunteers.</li> </ul>

## Governing obligations for this policy

-  NDIS Practice Standards 1.1.1 Person-centered supports
-  NDIS Practice Standards 1.1.2 Person-centered supports
-  NDIS Practice Standards 1.1.3 Person-centered supports

## Governing regulations for this policy

-  NDIS (Quality Indicators) Guidelines 2018 (Cth)

Applicable processes for this policy



Onboard Participant Project Template

## Our commitment to a person-centred practice

As part of our commitment to a person-centred practice, Evercare Support will:

- ensure our supports and services are in line with the needs, goals and desires of each participant
- listen to each participant and those who know them best to understand what they want for their lives
- support each participant to develop individual outcomes so that we know what success looks like
- support each participant to identify and prioritise obstacles in the way of achieving their outcomes
- support each participant to set steps or goals to address challenges to achieving their outcomes
- ensure our workers are trained, supported and motivated to follow the principles of this policy.

# Privacy and confidentiality

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## Introduction

This policy ensures we protect and handle personal information in accordance with the NDIS and relevant privacy legislation. We acknowledge an individual’s right to privacy while recognising that personal information is required to be collected, maintained and administered in order to provide a safe working environment and a high standard of quality.

The information we collect is used to provide services to participants in a safe and healthy environment with individual requirements, to meet duty of care obligations, to initiate appropriate referrals, and to conduct business activities to support those services.

## Applicability

When
<ul style="list-style-type: none"> <li>• applies to all personal information and sensitive personal information including the personal information of employees and participants</li> <li>• applies to all company confidential information - that is any information not publicly available.</li> </ul>
Who
<ul style="list-style-type: none"> <li>• applies to all representatives including key management personnel, directors, full time workers, part time workers, casual workers, contractors and volunteers.</li> </ul>

## Governing obligations for this policy

-  NDIS Practice Standards 1.3.1 Privacy and dignity
-  NDIS Practice Standards 1.3.3 Privacy and dignity
-  NDIS Practice Standards 3.1.2 Access to supports

## Governing regulations for this policy

-  NDIS (Provider Registration and Practice Standards) Rules 2018 (Cth)
-  NDIS (Quality Indicators) Guidelines 2018 (Cth)
-  Privacy Act 1988 (Cth)
-  Privacy Amendment (Notifiable Data Breaches) Act 2017 (Cth)

## Documents relevant to this policy

-  Privacy and confidentiality\_Easy Read

## Privacy and confidentiality guidelines

To support the privacy and confidentiality of individuals:

- we are committed to complying with the privacy requirements of the Privacy Act, the Australian Privacy Principles and for Privacy Amendment (Notifiable Data Breaches) as required by organisations providing disability services
- we are fully committed to complying with the consent requirements of the NDIS Quality and Safeguarding Framework and relevant state or territory requirements
- we provide all individuals with access to information about the privacy of their personal information
- each individual has the right to opt out of consenting to and providing their personal details if they wish
- individuals have the right to request access to their personal records by requesting this with their contact person
- where we are required to report to government funding bodies, information provided is non-identifiable and related to services and support hours provided, age, disability, language, and nationality
- personal information will only be used by us and will not be shared outside the organisation without your permission unless required by law (e.g. reporting assault, abuse, neglect, or where a court order is issued)
- images or video footage of participants will not be used without their consent
- participants have the option of being involved in external NDIS audits if they wish.

## Security of information

To keep information secure:

- we take reasonable steps to protect the personal information we hold against misuse, interference, loss, unauthorised access, modification and disclosure
- we ensure personal information is accessible to the participant and is able for use only by relevant workers
- we ensure security for personal information includes password protection for IT systems, locked filing cabinets and physical access restrictions with only authorised personnel permitted access
- we ensure personal information no longer required is securely destroyed or de-identified, and removed from access

## Data breaches

As part of information security responsibilities:

- we will take reasonable steps to reduce the likelihood of a data breach occurring including storing personal information securely and accessible only by relevant workers
- if we know or suspect your personal information has been accessed by unauthorised parties, and we think this could cause you harm, we will take reasonable steps to reduce the chance of harm and advise you of the breach, and if necessary the Office of the Australian Information Commissioner.

## Breach of privacy and confidentiality

A breach of privacy and confidentiality is an incident:

- follow the Manage incident process to resolve
- may require an investigation
- an intentional breach will result in disciplinary action up to and including termination of employment.