



Blackall-Tambo Regional Council

Tambo Multi-Purpose Centre

Policies and Procedures

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Tambo Multipurpose Centre Policy

Policy Number: MPC-M1	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

Accountable and Effective Management Planning

PURPOSE AND SCOPE

Blackall Tambo Regional Council Tambo Multipurpose Centre recognises the importance of having accountable and effective management systems in place and will seek to achieve this through:

- Employment of competent staff that have the qualifications and knowledge to effectively perform their roles.
- Internal processes and systems that support effective and efficient decision making.
- Participation in Industry quality reviews.

And will have appropriate and effective systems for:

- Information management
- Continuous improvement
- Financial management
- Workforce management
- Regulatory compliance, including adhering to privacy and confidentiality.
- Feedback and complaints
- Service planning, monitoring, and reporting.

RESPONSIBILITIES

EXECUTIVE MANAGEMENT

- Ensure appropriate policy, procedures and systems are in place to address core business and service delivery functions.
- Oversee the employment of competent and experienced staff in Aged and Disability Management roles.
- Oversee program and reporting / contractual obligations to ensure compliance.
- Ensure compliance with all Aged and Disability Program Guidelines.



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- Monitor changes to legislation and communicate relevant information to the Organisation and the management team as required.

MANAGEMENT

COMPLIANCE, MONITORING AND IMPLEMENTATION

Monitor compliance with key legislative requirements e.g.

- All staff and volunteers have up to date police check, and other checks.
- Workplace Health and Safety considerations are supported through training, resources, and regular audits.
- Privacy and confidentiality is maintained through appropriate policy, procedures, systems and processes.
- Food Safety requirements are met, with additional consideration in place for vulnerable clients.
- A maintenance program for buildings and assets used in the delivery of services is maintained and regular communication occurs with the relevant personnel responsible for asset management and maintenance.
- Safety practices such as Test and Tagging, electrical and fire safety equipment checks and pest control processes are conducted in accordance with schedules, with additional response and support arranged where required.
- Monitor Departmental and Quality and Safety Commission communication and alerts to ensure the organisation is up to date with Industry changes and program requirements.
- Implement changes to program documentation to maintain compliance with any new or changed regulatory requirements e.g.
- Forms and procedures
- Service information on My Aged Care
- Information in operational resources such as Handbooks and procedures
- Client resources such as the Client Handbook, Agreements and brochures.
- Ensure staff are updated on topics of relevance - in meetings, notices, emails, education and training.
- Ensure appropriate information is communicated to other stakeholders e.g. client, carers, referrers, suppliers in a timely and effective manner.
- Record any key changes, where relevant, as improvements in the CQI Register and the Regulatory Compliance Register.
- Implement and manage appropriate employment and human resource practices, with support from your organisation's relevant departments e.g. HR, Executive and Corporate Services.



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- Contribute to the development of appropriate policy, procedures and systems to address core business and service delivery functions.

FINANCIAL MANAGEMENT

- Ensure that all relevant financial data is collected, and appropriate systems are in place to support collection of client fees where applicable and monitoring of all program revenue and expenditure to support effective financial management and comply with legislated and reporting requirements.
- Monitor revenue and expenditure, and capital costs through regular consultation with Blackall Tambo Regional Council Tambo Multi Purpose Centre Finance team. Analyse financial information to inform quality and financial planning that supports compliance and sustainable service delivery.
- Ensure all requirements regarding client fees and publishing prices e.g. for Home Care Packages, are met and pricing is reviewed annually with consumers advised of any fee changes and care agreements updated accordingly.

REPORTING

- Coordinate, manage and adhere to reporting requirements as defined in grant agreements, as required for internal program management, and other reporting defined by the Organisation.

PLANNING AND REVIEWS

- Manage core service planning and apply continuous improvement strategies to improve and maintain performance and evaluate these.
- Assess, monitor and drive improvement in the quality and safety of care and services.
- Participate and lead internal process in all aged care or disability quality reviews, including service self-assessments where required.

COMMUNITY CARE STAFF

- Follow Policy and Procedures and Work Instructions of the Organisation.
- Provide feedback and input into core service planning, quality improvement processes, including client data and related narrative reporting.
- Adhere to defined scope of practice and responsibilities relating to job role.
- Refer or escalate an issue, complaint, or perceived risk appropriately.
- Provide respectful and caring support and services to clients.
- Where required, participate in service self-assessment and quality review processes.
- Provide the Manager or appointed delegate with identified reports in a timely manner.

RELATED LINKS AND REFERENCES

Accreditation & Quality Review <https://www.agedcarequality.gov.au/providers>

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Home Care Packages program information <https://agedcare.health.gov.au/programs/home-care-packages-program>

Commonwealth Home Support Program Guidelines (July 2018)
<https://agedcare.health.gov.au/programs/commonwealth-home-support-programme>

Approved Provider and Regulatory Compliance Policy

Quality and Continuous Improvement Procedure

Police and Checks Procedure

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Privacy Act 1988

Australian Privacy Principles 2013

Accountability Principles 2014

Charter of Aged Care Rights

Local Government Act 2009 Queensland

Work Health and Safety Act 2011

Fire and Emergency Regulations

Aged Care Standards, specifically **Standard 8**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

REVIEW TRIGGERS

This policy/procedure is reviewed internally for applicability, continuing effect and consistency with related documents and other legislative provisions when any of the following occurs:

1. The related documents are amended.
2. The related documents are replaced by new documents.
3. Industry, legislation or service agreement changes may necessitate modifications to procedures.
4. Other circumstances as determined from time to time by a resolution of the Organisation.



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Notwithstanding the above, the organisation may review this policy/procedure annually for relevance and to ensure that its effectiveness is maintained.

VARIATIONS

The Management team reserves the right to vary, replace or terminate this policy/procedure from time to time.

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Tambo Multipurpose Centre Policy

Policy Number: MPC-M2	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

APPROVED PROVIDER AND REGULATORY COMPLIANCE

RATIONALE AND DEFINITIONS

Blackall Tambo Regional Council Tambo Multipurpose Centre is an **Approved Provider** for the provision of Aged Care Services to the frail aged and as such has a responsibility to provide the core functions of:

- Identifying potential clients.
- Assessment and approval of potential clients.
- Planning and provision of safe, quality and appropriate care for identified clients.
- Monitoring of clients' needs and changes and taking appropriate action to optimise health and wellbeing.
- Providing case closure when necessary.

APPROVED PROVIDER (AGED CARE)

An Approved Provider (Aged Care) is an organisation which has been approved by the Secretary of the Department of Social Services to provide Australian Government funded aged care under the *Aged Care Act 1997*.

“An approved provider is responsible for the decisions about the delivery of care and financial management of subsidies and care recipient’s fees and payments. Approved providers have responsibilities and obligations to deliver the care in line with the standards that are specified in the Aged Care Act 1997 (the Act) and the Principles made under section 96-1 of the Act (the Principles).”

AGED CARE STANDARDS AND QUALITY FRAMEWORK

The Australian Government has developed a single quality framework. The single quality framework includes:

- A set of quality standards that will apply to all Commonwealth funded aged care services.

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- Processes to assess organisations' performance against the standards.
- Information for consumers to support them in making choices about their aged care.

The Aged Care Quality Standards comprise eight standards. They are:

1. Consumer dignity and choice
2. Ongoing assessment and planning with consumers
3. Personal care and clinical care
4. Services and supports for daily living
5. Organisation's service environment
6. Feedback and complaints
7. Human resources
8. Organisational governance

CLIENT

In all policies and related procedures, the term '*client*' infers any aged care client, resident, consumer or disability participant'.

MANAGEMENT

In all policies and related procedures, the term 'Management' refers to the Aged Care Manager and may also include other personnel from the Executive and/or Management Team.

ORGANISATION STATEMENT

To achieve the responsibilities of an Approved Provider of Aged Care Services, the organisation will employ suitably qualified and experienced personnel. The Management team will appropriately and effectively manage the day to day operations of the services, including liaising with other stakeholders, to deliver a high quality and culturally relevant, responsive service to the frail aged and people with a disability.

Blackall Tambo Regional Council Tambo Multi Purpose Centre recognises the Aged Care Standards and Disability Standards and will implement appropriate policies and procedures that ensure good practice and compliance with the Standards and the expected outcomes.

OVERARCHING AGED CARE APPROVED PROVIDER RESPONSIBILITIES

Blackall Tambo Regional Council Tambo Multi Purpose Centre acknowledges that as an Approved Provider they have the responsibility to demonstrate compliance with statutory duties by ensuring:

- Appropriate governance structures are in place to support strategic and business plans.
- There is an effective organisational structure with defined roles, responsibilities and accountabilities that is reflected in informed decision making and reporting.
- Any 'key personnel' are **not** disqualified as defined under the *Aged Care Act*.
- That 'key personnel' are updated when changes occur in the organisation.
- All key personnel meet ongoing National Police Check requirements for Aged Care.



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- Effective systems for service planning in all areas of service delivery and across the Standards are in place.
- Effective corporate governance and management of the service through appropriate planning, decision making, reporting, monitoring of key results, annual reporting, policies and procedures occurs.
- The performance of the service against the Standards demonstrates effective corporate and regulatory compliance.
- There are regular opportunities for key decision makers to receive training and education in corporate governance.
- Monitoring of key results which impact on effective governance and its delivery of care and services to consumers occurs.

NOTIFYING THE DEPARTMENT

Approved (Aged Care) providers are required to notify the Department of any changes which may affect their suitability to provide aged care. Failure to comply may result in sanctions being imposed under Chapter 4.4 of the *Aged Care Act*.

The notification must occur **within 28 days** after the change occurs.

The 2019 Material Change Form Revision also requires Approved Providers to:

- Review their circumstances and report any arrangements, including with third party organisations, where it is considered a material change to previous operations.
- Notify the department of current key personnel (as at 1 November 2019) where they had not previously been notified, as they may be material to a provider's suitability. Historical key personnel changes that do not materially impact the current circumstances of a provider do not need to be reported.

<https://www.health.gov.au/health-topics/aged-care/providing-aged-care-services/responsibilities-of-approved-aged-care-providers>

UPDATING DETAILS

Approved (Aged Care) providers should contact their local <https://www.health.gov.au/state-and-territory-offices>

to update operational contact details such as email, postal addresses or other relevant contact information.

RESPONSIBILITIES

EXECUTIVE/ GOVERNANCE BODY

- Ensure compliance with all regulatory requirements and notifications with regard to being an Approved Provider.
- Provide direction to the CEO on the development and provision of a Quality Aged and Disability Care program across the [your organisation] service area.



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EXECUTIVE MANAGEMENT

- Ensure all Board members have appropriate induction and sufficient information to understand their responsibilities as an Approved Provider.
- Provide oversight in the development of organisational policies and procedures that support the employment of appropriate personnel and the provision of safe and adequate infrastructure and equipment, that support the Blackall Tambo Regional Council Tambo Multi Purpose Centre staff to provide quality care to the constituents living in Tambo/Blackall Region.
- Forward and/or approve delegated personnel to issue updates to the relevant Department areas regarding changes in key personnel, or instances where a change or occurrence in service provision may impact on Blackall Tambo Regional Council Tambo Multi Purpose Centre ability to meet its Approved Provider obligations.
- Provide direction to the Manager on the development and provision of a Quality Aged and Disability Care program across the Blackall Tambo Regional Council Tambo Multi Purpose Centre service area.

MANAGER / COORDINATOR

- Inform your organisation Executive of any key regulatory changes or situations in your organisation which relate to risk and compliance; and support action and compliance with these.
- Forwarding financial and operational reports to funding providers.
- The Manager will also be responsible for providing the relevant executive in your organisation or appointed delegate with necessary service activity reports and statistics as required by funding bodies.

SUPPORT WORKERS

- Follow the service and organisation policies and procedures; and
- Operational guidance material such as Handbooks, Work Instructions, Safety Plans etc.

RELATED LINKS AND REFERENCES

Department of Health, Ageing and Aged Care - <https://www.health.gov.au/health-topics/aged-care/providing-aged-care-services/before-providing-aged-care-services>

Aged care quality standards - <https://www.health.gov.au/health-topics/aged-care/providing-aged-care-services/delivering-quality-aged-care-services#aged-care-quality-standards>

Australian Aged Care Quality Agency – Guidance and Resources for Providers: <https://www.agedcarequality.gov.au/providers/standards>

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NDIS Provider Quality and Safeguards – <https://www.ndis.gov.au/about-us/operational-guidelines/overview-ndis-operational-guideline/overview-ndis-operational-guideline-quality-and-safeguards>

HELPFUL LINKS

General information regarding approved providers including approved forms and guidelines can be accessed from the Commonwealth Departments website:

<https://www.health.gov.au/health-topics/aged-care/providing-aged-care-services/before-providing-aged-care-services>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Privacy Act 1988

Australian Privacy Principles 2013

Accountability Principles 2014

Charter of Aged Care Rights

Aged Care Standards (**All Standards**)

Anti-discrimination legislation nationally

Queensland food safety and handling legislation and regulations

Queensland mental health, guardianship and administration, enduring power of attorney and medical directive/advance care planning legislation

Queensland work health and safety legislation

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

REVIEW TRIGGERS

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VARIATIONS

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Tambo Multipurpose Centre Policy

Policy Number: MPC-M3	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

ARCHIVING AND SECURITY OF SENSITIVE INFORMATION

ORGANISATION STATEMENT

The Blackall Tambo Regional Council Tambo Multipurpose Centre recognises that documents which contain personal information relating to an individual have the potential to cause physical, financial, emotional or other harm to the individual should they be disclosed inappropriately.

All personal client and/or staff documentation shall be treated as sensitive information and will be adequately secured and archived according to relevant legislation.

COMMUNITY SERVICES MANAGEMENT

- Documentation to be handled according to relevant Blackall Tambo Regional Council Tambo Multipurpose Centre policies relating to information management.
- Management and security of sensitive client information.

PROCEDURES

Client files contain sensitive information and must be stored in a secure identified place within the Service, e.g. Locked Filing Cabinet, in a lockable room in the Aged and Disability Care Centre building.

All Deceased client files are stored according to the Organisation's archive policy

CLIENT RECORDS

- The Manager is responsible for organising archived client information and keeping archived records secure.
- The Manager will liaise with relevant personnel regarding archiving/action for client files or other documents that are to be forwarded to Queensland Archives.

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STAFF RECORDS

- All staff HR records are stored centrally at Head Office. Any information kept at the Service Centre, for example a register of staff licenses must be appropriately secured.

OPERATIONAL/ADMINISTRATIVE RECORDS

- Key administrative information, such as copies of food orders, supply records, minor equipment/goods purchases etc. are maintained by the Manager.
- Operational information such as orders and receipts of food deliveries are forwarded weekly to the relevant Blackall Tambo Regional Council Tambo Multipurpose Centre personnel.
- Diaries used by staff to record client information or organisational activities as part of the operation of the service remain the property of the Organisation and shall be archived according to relevant Acts.

DESTRUCTION AND ARCHIVING OF INFORMATION

Archived information is securely destroyed after the following time periods subject to any other provisions in the *Public Records Act 2002 (Queensland)*.

Client records e.g. care plans, assessment documents, incident reports, progress notes.	All documents that are owned by the services must be archived in accordance with the <i>Information Privacy Act 2009 Act (Queensland)</i> . Aboriginal client records may be destroyed 15 years after the last attendance or 15 years after the last access on the clients' behalf. Also refer to Notes 1 and 2 (below)
Financial records	After seven years
General administrative records	Seven years, e.g. client service data except where this has been uploaded to another data base e.g. DEX. HCP client budgets and statements need to be retained for 7 years as part of client documentation however an electronic version is sufficient.
Policy and procedures	The Director or appointed delegate will advise of any changes/updates on corporate policies.
Records of deceased clients	Aboriginal client records may be destroyed 10 years after the date of death or 10 years after the last access on behalf of the deceased, whichever is the latest (provided the client attained or would have attained the age of 25 years). Also refer to Note 1 (below)
Staff records	Seven years after the staff person ceases employment.



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Notes:

- (1) Any client who identifies as a member of the Stolen generation and/or have been removed from their family, must have their records archived permanently once they are no longer a client of the service.
- (2) Documents that are 'owned' by another organisation, e.g. medical summaries from the Health Service, do not need to be archived as these are the responsibility of the relevant organisation.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Aged Care Records Principles 2014 and Aged Care User Rights Principles 2014

Aged Care Standards, **specifically Standards 1,2,3,8**

Local Government Act 2009 (Queensland)

Public Records Act 2002 (Queensland)

Right to Information Act 2009 (Queensland)

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Tambo Multipurpose Centre Policy

Policy Number: MPC-M4	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Service	

CHOICE AND DIGNITY OF RISK

ORGANISATION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre acknowledges the right of the client to make choices about their life and the care and support they receive. This right includes the ability to accept or decline a service.

Blackall Tambo Regional Council, Tambo Multipurpose Centre will ensure that appropriate policy and procedures are in place and that service delivery supports a high quality of care that meets the Aged Care Standards and the Disability Standards, the provisions as relevant in the *Aged Care Act 1997*, User Rights Principles and the *Disability Service Act 2006*.

Blackall Tambo regional Council, Tambo Multipurpose Centre recognises that a client may choose to disregard health or care recommendations.

Blackall Tambo Regional council, Tambo Multipurpose Centre acknowledges the right of a client, who understands the implications of their decision, to make choices that may adversely impact on them. We also recognise that we have a duty of care to ensure that the client has received sufficient information on identified risks, any potential negative outcomes and to assist the client to manage risk as far as possible.

Where an individual is non-compliant, and the Aged Care staff believe the individual does not understand the implications of non-compliance, or the risks involved in the course of action they are taking/not taking, staff will speak with relevant health professionals and family members about the issue, to identify ways to assist the client.

- *The Organisation is **not** responsible for non-compliance of an individual in the areas of medications.*

MANAGEMENT

- Ensure staff have access to appropriate resources and supports (policies and procedures, forms and administration resources etc.), along with education and training, to support consumer choice and decision making.



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Coordinator will notify relevant health professionals of non-compliance where medication prompting is a part of the client's Care Plan and staff have concerns about compliance.

- Engage with other stakeholders such as family, GP or other health professionals and ensure that they are aware of the client's decision/s, identified risks and consequences.
- Assist clients to understand any identified risks and consequences.
- Escalate to management where there are concerns about the capacity of a client to understand the nature of any risk and consequences.
- Ensure client choices are documented including any identified risks and consequences, information that has been communicated to the client and other stakeholders and any interventions or risk mitigation strategies implemented.

SUPPORT WORKERS

- Work in a way that supports consumer choice and decision making.
- Alert the Coordinator to client decisions or actions that lead to non-compliance and/or where these have the potential to impact negatively on the well-being of the client.
- Ensure all client decisions that may have a negative impact on the wellbeing of the individual are clearly documented.

PROCEDURES

Non-compliance and declined services/support

Where a client and/or their carer declines a service or support, or is non-compliant in self-care, e.g. medication management, **staff should:**

- Work with clients, carers and family members in addressing issues to support problem solving and tailor workable solutions.
- If a reason for the decision is identified and can be remedied this should be documented in the client's progress notes along with any changes to their Care Plan and raised with Management as appropriate.
- Where the client places himself or herself in a position of risk through their choices, or there are concerns about a client's ability to assess risk, this will be discussed with the client and their carer.
- If a serious concern is identified regarding client safety and wellbeing, this will be referred directly to Management.
- If the issue cannot be resolved, all matters related to non-compliance and/or declined services/supports are to be documented and escalated to management for further action, e.g. family meeting, referral for external support, e.g. health practitioner review.
- Revised services or supports should be put in place as soon as possible to enable positive client outcomes e.g. a client may not want a morning shower in winter due to cold weather, a remedy could be to change the timing of the shower.



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- Refer to relevant agencies e.g. Adult Guardianship, Palliative Care, Allied Health as required, where the person and/or their carer does not have the capacity to assess risk, or is making a choice that may be harmful to them.

RELATED LINKS AND REFERENCES

My Aged Care <https://www.myagedcare.gov.au>

Legislated Rights and Responsibilities Providers and Consumers
<https://agedcare.health.gov.au/programs-services/home-care/legislated-rights-and-responsibilities-of-providers-and-consumers>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Privacy Act 1988 (Cth)

User Rights Principles 2014

Quality of Care Principles 2014

Charter of Aged Care Rights

Aged Care Standards, specifically **Standards 1 and 2**

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Commonwealth)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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VARIATIONS

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Tambo Multipurpose Centre Policy

Policy Number: MPC-M5	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

COMMUNICATION, ENGAGEMENT AND NETWORKS

ORGANISATION STATEMENT

To ensure that services are relevant, effective, and responsive, Blackall Tambo Regional Council Tambo Multipurpose Centre will maintain contact and involvement with the community, clients, and relevant stakeholders. This will help to inform the direction the service needs to take to meet current and future needs and support effective and quality care.

Key actions will include:

COMMUNICATION AND ENGAGEMENT

- Attendance of Management team at relevant Interagency and community meetings.
- Discussion with clients and family members on service delivery needs, working in partnership to understand what's important to them.
- Discussions between the Management team and local care staff at meetings on potential, or actual, client needs.
- Discussions between the Manager and local care staff at weekly staff meetings on potential, or actual, client needs.
- Review of client/family unmet needs requests on a (minimum) annual, or as required, basis.
- Conducting regular surveys of current clients and their carer/s about service standards and expectations.

MEDIA AND PUBLICITY

All activities and actions regarding publicity and media must follow Blackall Tambo Regional Council policy and procedures.

ELECTRONIC INFORMATION AND SECURITY

All Blackall Tambo Regional Council Tambo Multipurpose Centre personnel must comply with paper based information, electronic information and security requirements, including the proper use of software and use of Internet.



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Blackall Tambo Regional Council employees should be aware of the consequences of inappropriate material downloads and/or information sent from Blackall Tambo Regional Council Tambo Multipurpose Centre email and computers.

RESPONSIBILITIES

- Provide direction to the Blackall Tambo Regional Council Tambo Multipurpose Centre team in relation to media and publicity; and help promote the Aged & Disability program in a constructive manner.
- Lead and promote effective liaison with relevant stakeholders to support quality care and service delivery.
- Attendance at Interagency and community meetings on a regular basis or as requested.
- Implement effective liaison and /or promote partnership with relevant stakeholders that are involved in or support client care is supported, e.g. brokerage agreements, shared work protocols etc.
- Act in accordance with the Blackall Tambo Regional Council Tambo Multipurpose Centre media and related communication policy and take direction from the Executive team in relation to all requests for information, interviews, presentations etc.
- Attendance at Aged and Disability Care Meetings as required.
- Attending and participating in local staff meetings.
- Documenting and forwarding any requests by clients or their families, particularly where there are unmet needs – to the Management team.
- Participate in stakeholder engagement and networking with others involved in supporting quality care, e.g. health service providers, allied health and other providers of support and care for aged care consumers and disability participants.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Aged Care Standards, specifically **Standards 1, 2, 6 and 8**

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

REVIEW TRIGGERS

This policy/procedure is reviewed internally for applicability, continuing effect and consistency with related documents and other legislative provisions when any of the following occurs:

1. The related documents are amended.

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2. The related documents are replaced by new documents.
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4. Other circumstances as determined from time to time by a resolution of the Organisation.

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VARIATIONS

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Blackall-Tambo **Regional Council**

Tambo Multipurpose Centre Policy

Policy Number: MPC-M6	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

COMPLAINTS, FEEDBACK AND OPEN DISCLOSURE

ORGANISATION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the need for an easy to manage, timely complaint and feedback mechanism for clients. The information and feedback gathered assists the Blackall Tambo Regional Council to respond appropriately and improve the quality of the Service.

We recognise a client complaint as any expression of dissatisfaction, whether expressed verbally or in writing, by a client of the service or their representative.

THE ORGANISATION AFFIRMS THAT:

- All clients will be made aware of their right to complain and given access to a range of options and tools to support this. Direction on how to make a complaint or provide feedback will also be given where needed.
- Clients have a right to complain without worry that assistance may cease, or they will face some sort of reprisal.
- All complaints will be dealt with sensitively and with respect to privacy issues.
- All client complaints will be documented and dealt with according to the type of complaint within an acceptable timeframe.
- Complainants will be informed of any action taken and the practice of open disclosure will be supported by staff and management.
- All complaints will be recorded in the Complaints Register which is to be maintained by the person responsible for maintaining register.
- Feedback and complaints will be reviewed and used to inform quality improvement where this is relevant, and learnings will be shared appropriately across the Aged & Disability team.

RESPONSIBILITIES

EXECUTIVE MANAGEMENT

- Ensure all staff are aware of and trained in the correct handling of complaints.

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- Support a culture of learning from mistakes and feedback.
- Ensure that all complaints that are escalated to the management level are dealt with sensitively and in a timely manner.
- Deal with all 'urgent' type complaints in conjunction with the Aged & Disability Management team.

MANAGER

- Deal with all 'simple' and 'regular' complaints in a timely manner.
- Deal with 'urgent' type complaints in conjunction with corporate office and executive personnel as required.
- Ensure all complaints are correctly documented, logged and forwarded to the appropriate organisational area as required.
- Deal with 'simple' complaints as they arise, forwarding information on to the Coordinator and management team as required.
- Communicate all complaints received to the Manager for appropriate action and participate in corresponding action as required.

PROCEDURES

Simple Complaints

Will be addressed immediately where possible and remedy will be made as part of the day-to-day operation of the service. Where this was a simple issue that was remedied and no changes to procedure are required the complaint and action shall be noted in the client's notes.

These are complaints where:

- The facts are not in dispute.
- The annoyance or inconvenience is of a minor nature; and
- Minimal concern or distress has been caused to the person complaining. For example, someone was overlooked when picking up clients to go on an outing.

Investigate what and why this happened, apologise and put in measures to minimise the risk of this re-occurring.

Document in the client's progress notes and in the complaints register, if a change in process arose out of this incident ensure all relevant staff are notified and document in Quality Improvement register.

Timing – respond to client within 7 days.

Regular Complaints

These are complaints that:



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- Happen frequently;
- Have a greater effect on the client; and
- Relates to someone in the service or a part of the service which is not the responsibility of the staff member to whom the complaint has been made.

For example, the meals are consistently not suitable for a client's diabetic dietary requirements.

Investigate what and why this happened. Meetings with external stakeholders may need to be held to develop strategies to minimise this issue from re-occurring. Apologise to client and appraise them of what is being done to address the issue.

Document in the client's progress notes and in the complaints register, where a change in process arose out of this incident ensure all relevant staff and stakeholders are notified and document in Quality Improvement register.

Timing – respond to client within 3 days.

Urgent Complaints

These are complaints that relate to:

- Allegations of theft, physical harm, sexual abuse or other crimes; and/or
- Situations that cause significant emotional harm or stress to the client.
- Any allegations **must be reported** to the authorities and the Department must be advised as soon as management becomes aware of the allegation. Management and staff will assist the authorities with any investigation.

Document in the client's progress notes and in the complaints register, where a change in process arose out of this incident ensure all relevant staff and stakeholders are notified and document in Quality Improvement register.

Timing – respond immediately on becoming aware of the complaint.

CLIENT AWARENESS

- Clients are to be made aware of their right to complain and the process at the time of assessment and care planning.
- Clients will also be made aware they may use an advocate of their choice should they wish to lodge a complaint.
- Information about the complaints process will be displayed in a public area of the service centre and documented in the Client Handbook.

RECORDING OF COMPLAINTS

- All complaints should be recorded on a complaints form and logged in the Complaints Register by the Coordinator and a summary included in regular reports back to the Executive.



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- The complaints register will be regularly reviewed by the Aged & Disability management team.

PERMISSION TO ACT

- Permission should be sought from the client making the complaint to act on the complaint. Clients may request that simple or regular complaints not be acted upon - these must still be recorded and logged.
- All **urgent** complaints must be acted upon.

ACKNOWLEDGEMENT AND TIME FRAME FOR RESPONSE

- Staff will respond according to the type of complaint. Clients or their representative will receive acknowledgment of their complaint within two working days of the complaint being raised. All issues will be dealt with promptly.

CONFIDENTIALITY

- All complaints should be dealt with in a confidential manner within the need to resolve the issue as raised.
- Where the complaint relates to a specific client, all records of complaint shall be kept on the client file in a locked filing cabinet/area within the Aged and Disability Care Office.

FEEDBACK

- Feedback can be received at any time and any verbal feedback from staff, clients or carers should be raised in staff meetings.
- Dependent on the nature of the feedback, it and any related action will be recorded in the relevant register or document, e.g. Hazard report, Quality improvement etc.
- Regular client surveys will be conducted to help the service know what is working well and what could be changed or improved.

OPEN DISCLOSURE

- Open communication will be promoted and the service will acknowledge and apologise when things go wrong, or a mistake has been made.
- The client, carer and/or their nominated representative will be provided with information about what happened in a timely, open and honest manner. Ongoing updates/ provision of information related to the matter will also be provided where relevant.

CONTINUOUS QUALITY IMPROVEMENT

- Appropriate analysis and monitoring of feedback and data should be used to inform changes required as part of ongoing quality improvement.
- Feedback on outcomes and any changes to process should be forwarded to the Manager for recording under 'Continuous Improvement'.



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RELATED LINKS AND REFERENCES

Aged Care Complaints <https://www.myagedcare.gov.au/quality-and-complaints/aged-care-complaints-commissioner>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Privacy Act 1988

User Rights Principles 2014

Charter of Aged Care Rights

Aged Care Complaints Principles 2015

Aged Care Standards, specifically **Standards 1, 6 and 7**

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Blackall-Tambo Regional Council

Tambo Multipurpose Centre Policy

Policy Number: MPC-M7	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

CONTINGENCY AND EMERGENCY MANAGEMENT

ORGANISATION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that the continuity of services may be impacted by a variety of issues and that identified strategies (**contingencies**) are required to help deal with situations as and when they occur.

The key contingency planning areas include: *staffing levels, environmental conditions, operational context, legal and / or financial issues.*

Blackall Tambo Regional Council, Tambo Multipurpose Centre will make all efforts to ensure the continuity of service to clients on an ongoing and consistent manner.

Where a service or the level of service is affected, management and staff will work together to identify appropriate contingency strategies to minimise any adverse impact on clients, carers or other stakeholders.

Any change of service and the relevant reason will also be communicated clearly to clients, carers and their families.

Key procedures are identified for the following specific situations:

- Minimal Staffing and 'No Show' Policy
- Christmas and Holiday season closure arrangements
- Non-compliance of the service (and temporary closure)
- Emergency and / or Disaster response.

MINIMAL STAFFING

At times of minimal staffing other organisational staff, or contracted staff, will be sourced to assist the Aged & Disability team to ensure basic services are delivered.

- The Coordinator will alert the Manager if there are staff absences that negatively impact on the ability of the service to provide basic levels of care and support to clients.
- The Coordinator will work with the Manager to identify suitable staff to assist in the delivery of essential support services.

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- Clients, their families and carers are to be informed of the situation and advised that services may be limited to essential supports only.
- Non-essential services may be suspended until staffing levels return to normal.

CHRISTMAS AND HOLIDAY SEASON ARRANGEMENTS

The Manager will provide guidance regarding any Christmas or other holiday closures.

It is recognised that high needs clients may need to continue to receive daily services and service delivery to be provided as per the clients assessed care needs, including outside of normal business operating days where there is an identified need.

- Staff will be asked to nominate if they plan to put in a leave request over the Christmas and / or other holiday times.
- A roster and service delivery plan may be required to meet the needs of high care clients during Christmas, Easter and other public holidays.
- In the event of closure due to a public holiday, additional meal or service delivery may be arranged prior to the holiday, or alternate arrangements may be discussed and provided to clients.
- The organisation will liaise with the other relevant stakeholders to **identify appropriate support strategies** for any vulnerable clients. These will be documented appropriately and shared with stakeholders where required.
- Key stakeholders will be informed of holiday arrangements covering this period, any emergency contacts and protocols, e.g. on call Aged Care personnel.

NON-COMPLIANCE OF THE SERVICE AND TEMPORARY CLOSURE

- Where the Service receives notification of **an impending decision to enforce measures of non-compliance**, e.g. kitchen fails a health inspection, the Executive, or appointed delegate, will determine appropriate contingency measures, in consultation with the regulatory / enforcement agency involved.
- An appropriate contingency plan will be enacted, with ongoing monitoring by Management until the matter is resolved and the delivery of services meets identified compliance issues.

EMERGENCY AND / OR DISASTER RESPONSE

- Where an emergency or local disaster is, imminent or has occurred, e.g. fire, flood, cyclone etc., the Manager is to contact the Executive immediately, and enact the relevant organisational Emergency procedures.
- Appropriate counter disaster / emergency measures will be enacted, dependent on the situation. For example, if there has been fire and the Aged Care building is extensively damaged, alternate local options need to be identified, e.g. access to other local facilities, support from external caterers for meals provision etc.
- An appropriate contingency plan will be enacted with ongoing monitoring by management until the matter is resolved and the delivery of services can return to normal.



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- Staff will follow the Disaster Management Plan and take direction from authorities and delegated personnel.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Aged Care Standards, specifically **Standard 8**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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If a workplace participant is unsure about any matter covered by this policy/procedure, they should seek the assistance of their Manager.

VARIATIONS

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Tambo Multipurpose Centre Policy

Policy Number: MPC-M8	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

Diversity and Cultural Safety

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre seeks to actively manage and promote diversity and inclusion across the organisation to eliminate discrimination and inequality for both clients and staff.

We recognise that diversity refers to the visible and invisible differences that exist between people including (but not limited to) disability, sex, sexual orientation, gender identity and intersex status, age, race, ethnicity, religion, culture, physical impairment and life experiences.

In seeking to address diversity Blackall Tambo Regional Council, Tambo Multipurpose Centre also recognises a need to balance this with ensuring the cultural safety of clients accessing support through the service.

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the definition of cultural safety outlined by Williams (1999):

“An environment that is spiritually, socially and emotionally safe, as well as physically safe for people; where there is no assault, challenge or denial of their identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience of learning together”

To support both diversity and cultural safety we will follow and uphold equal opportunity policies and procedures when recruiting, along with recognising and responding to the needs and requirements of the target client group, respecting their diversity and upholding cultural safety.

Blackall Tambo Regional Council, Tambo Multipurpose Centre also recognises the Australian Commonwealth Government **Aged Care Diversity Framework**, noting that while clients may have similarities relating to their cultural background, each person is an individual with specific social, cultural, linguistic, religious, spiritual, psychological, medical and care needs.

RESPONSIBILITIES

Executive Management



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- Provide orientation on cultural safety practices for identified staff as part of their induction.
- Provide orientation on the service and community context for all externally recruited staff to the Aged and Disability program.
- Ensure recruitment practices follow anti-discrimination policies within a framework of promoting cultural safety for the client base.

Manager

- Participate in any cultural safety orientation and/or training activities as directed by Management.
- Ensure care planning and service delivery recognise the diversity of each individual.

Support Workers

- Contribute to a work environment that recognises and respects cultural and spiritual differences and support social and emotional wellbeing for all clients and other staff.
- Contribute to service delivery, including client care planning and review, providing relevant cultural insight where required.

PROCEDURES

- Review current organisation practices against the Aboriginal and Torres Strait Islander action plan for providers, noting any actions required to address identified gaps into strategic planning on an annual basis or more often if necessary.
- Ensure organisational recruitment processes are followed, advising Human Resources where specific requirements for meeting cultural safety are required.
- Support workers carry out any identified actions as directed by Management to support the intent of the Aged Care Diversity Framework.

RELATED LINKS AND REFERENCES

Aged Care Diversity Framework action plans <https://agedcare.health.gov.au/support-services/people-from-diverse-backgrounds/aged-care-diversity-framework-action-plans>

Australian Health Ministers' Advisory Council (2016). Cultural Respect Framework for Aboriginal and Torres Strait Island Health 2016-2026

Centre for Cultural Diversity in Ageing, Inclusive Service Standards 2018

Williams, R. (1999). Cultural safety – what does it mean for our work practice? Australian and New Zealand Journal of Public Health, 23(2), 213-214.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

User Rights Principles 2014

Quality of Care Principles 2014

Aged Care Standards, **(All Standards)**

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Single Charter of Aged Care Rights 2019

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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VARIATIONS

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Blackall-Tambo Regional Council

Tambo Multipurpose Centre Policy

Policy Number: MPC-M9	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

DOCUMENTATION AND FILE NOTES

ORGANISATION STATEMENT

Blackall Tambo Regional Council Tambo Multipurpose Centre recognises the necessity of keeping accurate records for legislative and administrative purposes.

To maintain documentation standards Aged & Disability Management will:

- Develop efficient systems for the management and upkeep of documentation so that the process is not cumbersome or time-consuming.
- Ensure staff understand the need for documentation that is accurate, relevant and succinct.
- Provide facilities for the storing of records safely and securely, ensuring that the confidentiality of records is maintained.
- Ensure that documentation is accessible for those with authority of access.
- Manage the archiving of documentation according to legislative requirement.

RESPONSIBILITIES

MANAGEMENT

- Ensure secure storage facilities.
- Provide efficient documentation processes and pro-forma's and training / orientation on how to use them.

Support Workers

- Maintain files and other documents according to procedures.
- Complete documentation according to policy and procedures.
- Secure on-site documents.

FILE NOTE DOCUMENTATION

A File Note is one that discusses broader interactions with other people or organisations about general procedures or groups of people, rather than an individual.

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File notes are to be recorded as soon as possible after a meeting with a stakeholder or other person. They should record:

- Date and time of meeting
- Who was at the meeting / involved
- The issue/s discussed
- Any agreed upon activities, responsibilities and timeframes where relevant.

File Notes should be placed in the File Note Folder, or relevant location according to issue.

File Notes may also reflect what has been discussed in a telephone conversation or, alternatively, may be a series of emails relating to an issue that have been saved as a PDF and stored electronically or printed and placed on file.

File Notes may be recorded in organisational diaries where appropriate, however must not be recorded in personal diaries as this information remains the property of the organisation.

File Notes can be a handwritten record of the meeting, typed minutes of a meeting or a follow-up email that outlines the above information.

EXAMPLE (WRITTEN) FILE NOTE

23/09/18	<i>Met with Geena, current relief nurse at the clinic, today. Discussed issues around clients not receiving their Webster packs in a timely manner. Geena described the problems they are having with lack of staff currently due to illness and training courses. Agreed aged care staff will drop clients off at clinic for the next week to collect their medications.-----F. Long</i>
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OBJECTIVE INFORMATION

All aged care documentation concerning incidents in the workplace, or relating to interactions with clients, should reflect an objective report of events. Objective information is based on observable or measurable facts.

CONFIDENTIALITY

- All documents are to be respected as confidential information. No files are to be left in publicly accessible areas or where non-relevant staff have access.
- All sensitive documentation shall be securely stored at the completion of each working day and during the day as appropriate.
- Where confidential information is stored on a computer, the computer must be password protected.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Privacy Act 1988

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Blackall-Tambo **Regional Council**

Accountability Principles 2014

Records Principles 2014

Aged Care Standards, specifically **Standards 2, 6 and 8**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

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Blackall-Tambo **Regional Council**

Tambo Multipurpose Centre Policy

Policy Number: MPC-M10	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

ENVIRONMENTAL SUSTAINABILITY

ORGANISATION STATEMENT

All businesses operate in a world where there are limited resources. Business operations need to take into consideration the environment impact of activities and the need to ensure that service delivery and development is ecologically sustainable.

Blackall Tambo Regional Council Tambo Multipurpose Centre is committed to implementing and monitoring processes and actions that support sustainable and environmentally friendly outcomes.

We believe it is our social responsibility to use resources wisely and work in an environmentally sustainable and ethical manner and commit to:

- Conducting business in a socially responsible and ethical manner.
- Protect the environment and the safety of people.
- Support Human Rights.
- Support the communities and the cultures which we work with.

The management team undertakes business activities in a manner that recognises the importance of environmental protection and sustainability through:

- Complying with all relevant environmental legislation and regulations
- Eliminating avoidable travel by use of telephone and video conferencing facilities where possible
- Utilising online resources and training opportunities including webinars to minimise the travel burden on staff and cost to the organisation and the environment
- Planning travel routes to minimise backtracking and inefficient processes
- Purchasing locally where possible
- Promoting ethical purchase of all office equipment and consumables
- Considering the environmental impact of purchases such as vehicles, and using sustainability as one of the selection criteria to be considered when purchasing
- Using electronic methods of communication where appropriate to stakeholders

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- Minimising the consumption of energy and water where possible
- Using resources efficiently and minimise the generation of waste
- Recycling wherever possible and
- Monitoring and reviewing work practices to continually improve capacity to work in a manner that is environmentally responsible.

We aim not to be wasteful of resources, to eliminate or minimise pollution, to comply with all relevant legislation and regulations, and to minimise our organisation's carbon footprint wherever possible.

All personnel are expected to comply with legal and other requirements, including the prevention of pollution and adoption of sustainable and environmentally friendly practice.

RESPONSIBILITIES

Executive Management

- Ensure this policy is communicated across the team and that processes that directly impact on environment such as printing, travel and use of other resources such as electricity, fuel and water are done in a way that minimises environment impact.
- Promote and encourage eco-friendly and sustainable practice wherever possible such as recycling and using recycled materials; use and purchase energy efficient tools as part of workplace/work environment/s.
- Support the purchase and uptake of low impact resources such as cloud storage, eLearning platforms and opportunities and cloud-based applications that minimise the amount of paper usage across the organisation.

Management Team

Implement directives set by executive in relation to process and resource use where possible, e.g.

- Identifying fuel efficient vehicles when seeking replacement
- Planning direct and efficient routes for transport where possible and consider opportunities for sharing transport where practical
- Documenting and distributing meeting minutes electronically
- Using recycled paper in printing and recycle replacement items such as toner/ cartridges where appropriate
- Purchasing materials and products e.g. uniforms that have been sustainably produced
- Recycling paper and other re-usable materials
- Use an electronic archiving and storage option
- Conserving electricity and water through good practice and eco-friendly practice.

Support Staff

Follow directives as set by Management and documented in the Staff Handbook.

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Blackall-Tambo

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Apply the following principles in work processes

- Use resources efficiently and to minimise the generation of waste
- Recycle wherever possible
- Follow planned routes wherever possible
- Alert management to any issues that impact on resources which could result in wastage or shortening the life of a resource
- Contribute to the monitoring, and review of work practices to continually improve capacity to work in a manner that is environmentally responsible.

PROCEDURES

Procurement

- Prior to seeking quotes for products management are to ascertain preferred products that are identified as sustainable and ethical according to the organisation's position statement.
- Quotes are to be reviewed against identified sustainability commitments as well as price.

Operations Transport

- Transport routes are to be arranged according to the shortest effective route within reason.
- Drivers are to receive training in understanding the need to adhere to planned routes as far as practical.
- Where possible and safe to do so, shared rides are encouraged.

RELATED LINKS AND REFERENCES

Environmental management and your business

<https://www.business.gov.au/risk-management/environmental-impact/environmental-management-and-your-business>

RELEVANT STANDARDS AND LEGISLATION

ISO14001 specifies the requirements for an environmental management system that an organisation can use to enhance its environmental performance. ISO 14001:2015 is intended for use by an organisation seeking to manage its environmental responsibilities in a systematic manner that contributes to the environmental pillar of sustainability.

<http://www.iso.org/iso/home/standards/management-standards/iso14000.htm>

Aged Care Act 1997

Accountability Principles 2014

Aged Care Standards, specifically **Standards 5 and 8**

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Blackall-Tambo **Regional Council**

Disability Services Act 1986 (Commonwealth)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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VARIATIONS

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Tambo Multipurpose Centre Policy

Policy Number: MPC-M11	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

ORGANISATIONAL SUSTAINABILITY

ORGANISATION STATEMENT

The business and operational decisions that are made by management can impact both positively and negatively on the sustainability of an organisation. Major decisions made within the organisation need to consider how these will impact on the ongoing operation of the organisation. Hurried business decisions and poor planning can lead to employee and client dissatisfaction as well as financial losses.

Additionally, the organisation may need to consider vulnerability to market changes and industry reforms and may be required to consider diversification opportunities to support sustainability.

Blackall Tambo Regional Council Tambo Multipurpose Centre recognises the need to consider the impact that major decisions such as taking on new projects, can have on the sustainability of the organisation and will ensure that due diligence processes will be followed prior to agreeing to expansion of the scope of services provided by the organisation.

Additionally, the organisation will consider the potential for diversification where this supports the overall sustainability of the organisation.

NEW OPPORTUNITIES

All opportunities will be subject to scrutiny by the Board and Executive (CEO/CFO/COO/Manager) before significant commitments are made by the organisation. External third-party experts will be used where identified as appropriate to help inform the decision making process.

To support organisational sustainability the management team will require all major decisions, including the opportunity to take on new projects, to develop a business case that considers:

- Whether the opportunity reflects the organisation's core business and strategic / risk financial or other plans
- Alignment to the objectives of the organisation
- The benefits and risks of the opportunity
- Expected timeframe and scale of the project

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- Any co-contribution or in-kind contribution requirements
- Any dependencies of the project
- Staff requirements
- Current capacity within the organisation, including resource requirements
- Expected cost of operating the project including allowance for contingency
- Return on investment
- Reporting requirements
- Impact on the reputation of the organisation, positively and negatively
- Alignment with the organisation's environmental sustainability policy
- Other risks

DIVERSIFICATION OPPORTUNITIES

On occasion the organisation may seek the opportunity to diversify its operations to support sustainability.

When looking for diversification opportunities management will consider opportunities:

- That build on, and are complimentary to current programs and competencies
- Where the organisation has demonstrated capacity or expertise in the past
- That fit with the organisation's strategic direction
- That employ current underutilised assets.

RESPONSIBILITIES

Executive Management

- Monitor national, regional and local trends to identify potential opportunities for diversification that support organisational sustainability.
- Set clear parameters for the management team when considering opportunities for diversification that are in line with the organisation's strategic direction.
- Review business case presentations and consider organisational and operational impact.

Management Team

- Develop a business case for identified opportunities to be presented to the Board for consideration.

PROCEDURES



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BUSINESS CASE DEVELOPMENT

Where an opportunity for tendering or applying for a new or expanded funding arises a business case should be developed and forwarded to the Executive for review and consideration before an application is made. Identify:

- The name of the funding body and program
- The key person within the organisation who is responsible for the application should this proceed
- How this application / opportunity aligns with the organisation's strategic direction
- Brief description of the project
- Benefits to the organisation / service user group should the application be successful
- Timescale of the project - e.g. short term / ongoing
- Cost to the organisation / expected return on investment
- Any dependencies that the project relies on
- How this can integrate with other projects or use underutilised resources
- How this assists in supporting the organisation to be more sustainable and uses the strengths of the organisation
- Risks of taking on this project

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Accountability Principles 2014

Aged Care Standards, specifically **Standard 8**

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Tambo Multipurpose Centre Policy

Policy Number: MPC-M12	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

PURCHASING

ORGANISATION STATEMENT

The Blackall Tambo Regional Council Tambo Multipurpose Centre is committed to providing a Purchasing System in support of activities which comply with current legislation, industry and internal performance standards, codes of practice and is in accordance with the Mission, Vision and Values of the Organisation.

Systems of purchasing are established that ensure ready, available supplies of suitable equipment affording the comfort and safety of all consumers and staff at the Blackall Tambo Regional Council Tambo Multipurpose Centre.

All purchases made by and for the organisation follows these principles:

- Value for money including developing local industry.
- Environmental responsibility.
- Opportunities, risks and impacts on the organisations activities.
- Work Health & Safety.
- Efficiency and effectiveness.
- Integrity and equity, minimizing opportunity for fraud.
- Effective competition.
- Waste Reduction.
- Ethical production.
- Compliance with AS/NZ standards and Work Cover Codes of Practice, where relevant.

When plant and equipment items are purchased, employees receive adequate training and instruction to enable them to use the equipment to perform their work safely.

Staff are to ensure that they provide assistance in the investigation and reporting of any hazardous incidents that may occur with purchased products.

All areas of the centre/care home are required to use, where possible, the same products, methods, storage, and procedures for all purchases.

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Purchasing of the following products and/or services may be considered for tender, for a period of time to be fixed at the time of tender:

- Cleaning chemicals
- Laundry chemicals
- Food and catering supplies
- Gas, electricity, or other power supplies
- Fire equipment maintenance and servicing

The acquisition of other products and/or services is determined on an as needs basis and may include:

- Electrician, Plumber etc.
- Computer hardware & software
- Air-conditioning maintenance and servicing
- Printing and stationery needs
- Paper supplies such as toilet rolls and hand towels
- Medical consumables.

PROCEDURES

The manager/coordinator maintains a list of preferred suppliers. Where possible, purchases are to be made from this list of preferred suppliers. An alternative supplier may be used where no suitable supplier is listed, or where it is impractical or impossible to purchase from a listed supplier. The list of preferred suppliers is reviewed periodically.

Blackall Tambo Regional Council Tambo Multipurpose Centre considers the following conditions prior to purchasing or accepting any tenders for the supply of products and/or services:

- Tendered price
- Product range
- Availability
- Delivery arrangements
- Quantity of supply – whether supplied in bulk or smaller quantities. If supplied in bulk, then equipment must be available on site for decanting or distribution according to the needs of the organisation.
- Whether the product meets the requirements of the AS/NZS.
- Past performance
- Quality Assurance Accreditation of the supplier.



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The Manager shall organise a risk assessment of any new products prior to use, or before the product or capital equipment is commissioned. If necessary, a training needs assessment may also be carried out.

This assessment shall include:

- Manual handling requirements
- Staff training requirements
- Impact on staff and consumers on the introduction of new equipment, or methods and work practices.
- Documentation of safe handling techniques
- Requirement for additional personal protective equipment that is not already in use at the Blackall Tambo Regional Council Tambo Multipurpose Centre.
- Availability of Material Safety Data Sheets prior to the product being introduced for use.

If necessary, a trial period of use prior to purchase is arranged. This allows staff members to fully assess the suitability of the product or equipment and its fitness for the purpose for which it is to be utilised.

Comparison to previous equipment used at Blackall Tambo Regional Council Tambo Multipurpose Centre to determine if controls and/or switches are the same as equipment currently known to Blackall Tambo Regional Council Tambo Multipurpose Centre staff. If differences are evident, then staff are not to use the equipment until appropriate training has been provided, and documentation/manuals for the equipment provided.

Only products and/or services as listed below that have been selected as a result of the tender or other agreed process by the Board can be ordered by the Manager for supply on a regular basis for the duration of the contracted tender period or timeframe as determined.

For general purchases, for which no formal contract exists, The Manager seeks authorisation from the Board as directed.

Staff members purchasing on store accounts must sign the receipt of purchase (invoice).

When the goods are delivered, they must be checked against the delivery docket/tax invoice, which is signed and dated as acceptance of goods in acceptable condition. If incorrect, a notation should be made on the delivery docket/tax invoice, and the supplier notified immediately with arrangements made for the return of goods, and the correct/acceptable ones sent.

Supplies must be stored in their correct area.

Signed delivery dockets/tax invoices are used by the Manager to check orders for discrepancy, before forwarding to the Accounts Section for payment.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Work Health and Safety Act 2011

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Charter of Aged Care Rights

Aged Care Standards, specifically **Standard 8**

REVIEW TRIGGERS

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Blackall-Tambo **Regional Council**

Tambo Multipurpose Centre Policy

Policy Number: MPC-M13	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

QUALITY AND CONTINUOUS IMPROVEMENT

ORGANISATION STATEMENT

QUALITY

Blackall Tambo Regional Council Tambo Multipurpose Centre recognises that clients and/or their families are paying customers who expect and deserve quality service.

Whilst we acknowledge that 'quality' is a subjective word, the organisation will endeavour to meet and exceed the standard expected by the individual and their family, as well as respecting and responding to Aged Care, and Disability Quality Standards.

To assist in achieving and maintaining a quality service the organisation will:

- Review service delivery against national quality standards.
- Seek feedback from clients, participants and their families and staff on service delivery and care support to inform improvement for individuals and the broader service.
- Support and implement internal continuous quality improvement processes, e.g. maintain client progress notes and related improvement/actions; encourage staff discussion and problem solving and maintain service improvement registers, recording issues, actions arising and resolutions.
- Negotiate minimal standards for services delivered by outside agencies and monitor service delivery quality.

CONTINUOUS IMPROVEMENT

Blackall Tambo Regional Council Tambo Multipurpose Centre recognises that service delivery standards and client expectations change over time and that effective change management relies on having appropriate systems and strategies to capture and act upon opportunities for improvement.

To best meet the needs of clients, our service proposes to actively pursue continuous improvement.

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THE ORGANISATION WILL DO THIS THROUGH:

- Ensuring staff understand what continuous improvement is.
- Having systems and processes in place to support continuous improvement, e.g. hazard / near miss reporting and quality improvement registers.
- Conducting regular client feedback surveys and respond to issues identified or suggestions for improvement.
- Conducting responsive and pro-active service planning.
- Reviewing qualitative information gathered and using it to inform changes to systems and processes.

- Reviewing the impact of future or current changes required by legislation or funding bodies.
- Identifying gaps or unmet needs in service delivery.

RESPONSIBILITIES

Executive

- Monitor service delivery via receipt of verbal and written reports from the Aged & Disability team.
- Act as required to support continuous improvement of the service, i.e. review recommended and approve policy amendments, fees or service delivery model changes.
- Support and monitor internal **continuous quality improvement processes**, including but not limited to Quality and Safety Commission reviews.
- Review task progression and updating of timeframes for achieving goals.

Management

- Gather information and feedback from clients and family members on a regular basis, and utilise this to inform client assessment and care planning to support responsive, safe and quality care.
- Encourage an environment amongst staff that promotes lateral thinking of problems and is open to new ideas.
- Encourage staff to actively participate in **continuous quality improvement** through observation, sharing information and ideas, participating in 'operational' problem solving, and providing feedback to staff which may be helpful regarding policy and general service delivery issues and solutions.
- Maintain a central Registers file to record key information such as complaints, quality improvement, hazard reports, maintenance requests etc. recording issues, actions arising and resolutions.



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Support Workers

- Provide feedback on, and input into quality improvement processes.
- Implement changes as directed to support responsive, safe and quality care.

RELATED LINKS AND REFERENCES

Aged Care Quality and Safety Commission <https://www.agedcarequality.gov.au/>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Complaints Principles 2014

Australian Aged Care Quality Agency Act 2013

Quality Agency Principles 2013 (Compilation No. 3)

Aged Care Standards, specifically **Standard 8**

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Regional Council

Tambo Multipurpose Centre Policy

Policy Number: MPC-M14	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

Risk Management

ORGANISATION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre seeks to minimise the potential of injury to any staff member, client, or member of public by actively identifying hazards in the workplace and providing timely resources and response to minimise risk.

Blackall Tambo Regional Council, Tambo Multipurpose Centre will ensure that workplace health and safety (WH&S) practices will be followed and that all staff are trained in the identification of hazards, appropriate responses, and risk mitigation strategies relevant to their role.

The organisation recognises that the main areas of risk include:

- People (staff, clients, carers, and family)
- Environmental
- Operational (including Human Resources and WH&S)
- Corporate Governance
- Regulatory Compliance
- Financial
- Information Management
- Physical resources, e.g. vehicles and equipment.

How does Blackall Tambo Regional Council, Tambo Multipurpose Centre Aged & Disability manage risk?

- Following Work Health and Safety procedures.
- Utilising feedback from internal and external audits, e.g. quality reviews.
- Analysis of suggestions, compliments, and complaints.
- Responding appropriately to client and carer feedback.
- Analysis of employee and/or stakeholder suggestions.

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- Completing and responding to the hazard record log.
- Completing and responding to the complaints and feedback register.
- Following the organisations risk management action plan.
- Following relevant policies and procedures relating to risk and strategies for risk mitigation.

Any action taken to minimise the re-occurrence of an incident should be documented in the Hazard Register, located at the Tambo Multipurpose Centre, and reported to the Tambo Multipurpose Coordinator.

Identified hazards and actions are also to be included in reports from the Manager or Support workers e.g. Hazard/Incident Reporting.

Risk Categories and Examples

Risk type	Example
Human	Individuals or organisations, illness, death
Operational	Disruption to supplies and operations, loss of access to essential assets, failures in transport
Reputational	Loss of employee confidence, or damage to reputation among clients and the community
Procedural	Failures of accountability, internal systems and controls, organisation, fraud
Financial	Business failure and budget management, cost escalation
Technical	IT and communications systems failure
Natural	Threats from weather, natural disaster, accident, disease

ASSESSING THE RISK

- Establishing the objective(s) of the activity.
- Identifying Key Risk Areas (threats) associated with reaching the objective(s).
- Identifying sub-areas, if any, within each Key Risk Area.
- Identifying the associated risks and the level of impact (high, medium, low) associated with each risk.
- Evaluating and ranking the risks by using a Risk Assessment Formula.

NOTE: The Service Risk Management Strategy should be reviewed on a regular and/ or needs basis.



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RESPONSIBILITIES AND PROCEDURES

EXECUTIVE MANAGEMENT

- Ensure that Risk Management processes for the Aged & Disability program are in place and reviewed, at a minimum, annually, with input from the team.

Management

- Ensure that Risk Management for the service is in place and that regular discussion on risk occurs across the team.
- Liaise with the organisation's WH&S Officer regarding Incident and near miss reports and Hazard Identification.
- Respond to concerns raised by, staff, clients, carers, family or other stakeholders, e.g. service providers - about the safety of clients and/or service delivery.
- Ensure any staff have access to relevant training and support, e.g. WH&S, incident response procedures etc.
- Contribute to an annual Risk Management review and assist more frequently as needed.
- Complete an annual Hazards Record Log and review more frequently as needed.
- Ensure that Incident Reports are completed for all moderate and major incidents and any subsequent recommendations and/or actions are implemented.
- Review all regular and urgent complaints as defined in procedure for Complaints and Feedback.

Support Workers

- Support workers assist clients, other staff or visitors who are involved or affected by incidents where it is safe to do so.
- Support workers report to the Manager - all incidents (moderate and major).
- Support workers report to the Manager - all complaints (regular and urgent).
- Support workers escalate all incidents and complaints that are beyond your scope of practice in a timely manner.
- Support Workers complete WH&S training when offered.
- Support workers complete and/or assist in completing an incident form where involved, affected or witness to an incident.
- Support workers assist in provision of information to clients on how to make a complaint or compliment.

RELATED LINKS AND REFERENCES

Safe Work Australia <https://www.safeworkaustralia.gov.au/risk>

RELEVANT STANDARDS AND LEGISLATION

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Aged Care Act 1997

Aged Care Standards, specifically **(All) Standards**

Work Health and Safety Act 2011

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Blackall-Tambo Regional Council

Tambo Multipurpose Centre Policy

Policy Number: MPC-M15	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

SERVICE REPORTING

ORGANISATION STATEMENT

Blackall Tambo Regional Council Tambo Multipurpose Centre recognises the importance of good reporting systems to support an accountable service.

Blackall Tambo Regional Council Tambo Multipurpose Centre will maintain quality reporting by:

- Ensuring all staff responsible for providing reports are aware of time frames and the information required.
- Have the skills, training and information required to complete reports.

Blackall Tambo Regional Council Tambo Multipurpose Centre will work to ensure that its staff have access to, and training in, data collection, analysis, information management and reporting as required.

Blackall Tambo Regional Council Tambo Multipurpose Centre will maintain appropriate financial records and ensure that all relevant financial reports and information are maintained and submitted as required to the relevant departments or regulatory bodies.

RESPONSIBILITIES

Executive Management

- Maintain quality control of reports.
- Ensure timely submission of reports to funding and regulatory bodies.

Management

- Collation of data for use in reporting and completion of applicable forms or claims, e.g. Medicare.
- Compile service output information such as client services and ensure this is entered into the Proda and DEX Exchange.

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- Compile and forward reports as required by Executive management in a timely manner.

Support Workers

- Complete data collection as required, informing the immediate supervisor of any key changes in service delivery as a result of changing circumstances of the client, or service delivery issues.

PROCEDURES

Data collection

- Support Workers record service activity on relevant document.
- The Manager checks and collates this information.

Home Care Package (HCP) - Medicare Claims

- Monthly client data is sorted and compiled by the Manager at the end of each month.
- The Manager will then complete and submit Medicare Claim forms.

Home Care Packages (HCP) Reporting to Individual Clients

Home Care Package monthly statements are completed and provided to the consumer, or their nominated representative in a timely manner and in a format, that they can understand.

Home Care Packages (HCP) Financial Report

The Annual Aged Care Financial Report (ACFR) is reported via an online portal and is due by 31 October each year.

Report	Reporting Period	Due	Responsibility
Annual Aged Care Financial Report (ACFR)	1 July – 30 June	31 October	Finance section – with support from the Management team

Commonwealth Home Support Programme (CHSP) Data (DEX)

- Weekly service data is to be compiled by managers informed by data collected, e.g. via tick sheets/ rosters.
- Data collected supports the 6 MONTHLY online reporting via the Commonwealth Data Exchange (DEX).

CHSP Reporting Timeframes

Report	Reporting Period	Due	Responsibility
Financial Acquittal Report	1 July - 30 June	31 October	Finance



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Performance/Service Delivery Report via DSS data collection system (DEX)	1 July - 31 December 1 January - 30 June	31 January 31 July	Management team
Wellness Report	1 July - 30 June	31 October	Management team

A final report is required at the end of a service provider's funding agreement or if the funding agreement is terminated.

RELATED LINKS AND REFERENCES

Commonwealth Home Support Programme Manual <https://agedcare.health.gov.au/news-and-resources/publications/fact-sheets/commonwealth-home-support-programme-programme-manual-2017>

Home Care Packages Program information <https://agedcare.health.gov.au/programs/home-care/information-resources-home-care-package-delivery>

How to complete the ACFR for Home Care Package providers
<https://www.youtube.com/watch?v=ISj98hOhQyw&feature=youtu.be>

National Torres Strait Islander Flexible Aged Care Program Manual 2018

<https://agedcare.health.gov.au/programs-services/flexible-care/national-aboriginal-and-torres-strait-islander-flexible-aged-care-program>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Accountability Principles 2014

Fees and Payments Principles 2014 (no.2)

Aged Care Standards, specifically **Standard 8**

Public Records Act 2002 (Queensland)

Right to Information Act 2009 (Queensland)

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

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Blackall-Tambo **Regional Council**

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C1	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

ABUSE, NEGLECT AND REPORTING

POSITION STATEMENT

There are mandatory reporting provisions contained in the *Commonwealth Aged Care Act 1997* relating to the reporting of cases of Elder Abuse.

The NDIS also has a 'Zero Tolerance' framework to support the wellbeing and safety of people with a disability which includes information on the responsibility of organisations when responding to allegations of violence, neglect and/or abuse.

Blackall Tambo Regional Council Tambo Multi Purpose Centre recognises it has a duty of care to clients providing services to aged and disability clients. Community staff may be in a position to identify the abuse of people receiving care and support through the service; this includes Elder Abuse, as well as the abuse of any person with a disability.

The organisation will:

- Ensure staff are aware of the definition of abuse and what this means when working with aged care clients and people with a disability.
- Ensure staff are briefed on how to:
 - Identify Elder Abuse and the abuse of other vulnerable clients.
 - Make a report where they believe beyond any reasonable doubt that another person has caused or is likely to cause harm to a client of the service.
 - Provide emotional support to clients.
 - Assess risk of abuse for vulnerable clients, both aged and those with a disability.
 - Document (record) any incident and action taken.
 - Refer the person experiencing the abuse to appropriate supports.

RESPONSIBILITIES

Executive Management



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- Ensure the organisation remains informed on the abuse of vulnerable clients, reporting requirements and processes - ensuring Aged & Disability staff are briefed and that key information is circulated to them.
- Mentor and support on actioning a referral or report where required.
- Assist in the application for a protection order on behalf of the client where appropriate.

Manager

- Attend briefings/read material provided by the organisation and follow directions for informing staff and clients.
- Report cases of abuse or neglect of a client through the identified process.
- Document any reports made or evidence that is witnessed in the relevant client file.
- Report any suspected cases of abuse or neglect through the identified process.

Support Workers

- Attend training sessions on Elder Abuse or abuse of a vulnerable person where offered.
- Report incidents or suspected incidents of abuse to the Manager and provide follow up statements where required.
- Provide information and support to clients who have experienced abuse to report to the relevant authorities.
- Support Workers report incidents of neglect, or concern, to the Manager.

PROCEDURES

Where a case of abuse, including intentional or unintentional neglect, is suspected, staff should immediately report to the Manager.

Where investigation reveals that harm has been caused unintentionally by a carer or family member the Manager will seek direction from Executive Management on options for training and upskilling the carer or family member/s to prevent reoccurrence of the harm.

Where harm to a client has occurred due to neglect or mishandling by a carer or family member, and support and training has previously been provided, this should be reported to management who will escalate to the relevant authority where necessary.

The Manager must advise the Executive Management of all incidents of abuse or neglect, taking any additional action as directed by Management.

In circumstances where the Manager believes on reasonable grounds that:

- a relative, other person with whom the client is in a domestic relationship, or family carer has caused, or is likely to cause, harm to a client or
- the life or safety of a client is under serious or imminent threat because domestic violence has been, is being or is about to be committed **will report this to the police.**

Where financial abuse is identified, or suspected, the Manager is to discuss this with the client and options for financial management and support investigated with the client.



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All actions and reports are to be documented on the client file, incident forms and progress notes.

RELATED LINKS AND REFERENCES

Elder Abuse Helpline (9am – 5pm, Monday to Friday) Ph: 1300 651 192

Office of the Public Guardian Queensland Ph: 1300 653 187

National Aged Care Advocacy Programme – 1800 700 600

Australian Aged Care Quality and Safety Commission

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Domestic and Family Violence Protection Act 2012

Aged Care Standards Specifically **Standard 2, 3 and 8**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C2	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

ADVOCACY

POSITION STATEMENT

Blackall Tambo Regional Council Tambo Multi Purpose Centre recognises that advocacy for the frail aged, or person with a disability, is defined as acting, with minimal conflict of interest, on behalf of the interests of a person to promote, protect and defend the welfare of and justice for the person.

Blackall Tambo Regional Council Tambo Multi Purpose Centre acknowledges that a client or their carer may choose to speak through an advocate for a variety of reasons. The organisation acknowledges this is a valid request and will recognise and work with an advocate appointed by a client, and acknowledges the client may appoint, discharge or change their advocate as they wish.

RESPONSIBILITIES

All Staff

- Ensure clients understand what an advocate or advocacy service is and how to appoint an advocate.
- Ensure clients are aware of their right to access an advocate of their choice.
- Acknowledge the appointed advocate as representing the interests of a client.

PROCEDURES

- Clients wishing to appoint an advocate to negotiate on their behalf should inform the service staff or Manager.
- All appointed advocates shall be recorded in client files.
- Family advocates shall be supported to understand the responsibility of an advocate.
- Where a client wishes to access an external Aged Care or Disability Advocacy service, the Manager shall provide assistance for them to do so.
- Interpreter services shall be utilised where necessary to ensure clients are aware of the option of using an advocate.

RELATED LINKS AND REFERENCES

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Blackall-Tambo

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[My Aged Care – How to Make a Complaint](#)

National Aged Care Advocacy Program, Ph: 1800 700 600

[The National Disability Advocacy Program](#)

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Aged Care Standards Specifically **Standards 1, 2, 3 4 and 6**

Commonwealth Home Support Programme Guidelines

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Disability Services Act 2006 (Queensland)

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C3	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

ASSESSMENT AND REASSESSMENT

POSITION STATEMENT

All screening assessments for accessing Aged Care supports for potential aged care clients are conducted by an impartial, assessment service provided through My Aged Care.

Blackall Tambo Regional Council Tambo Multipurpose Centre recognises the need for gathering additional information on aspects of a person’s needs, their personal health, family supports and living environment, as well as personal preferences and goals, to best meet the needs of the individual.

Blackall Tambo Regional Council Tambo Multipurpose Centre recognises that while NDIS participants have discussed their needs with an NDIS planner and that their support plan reflects this discussion, additional information may be required to provide a quality service to the individual that reflects their personal preferences.

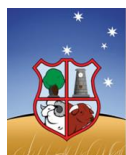
Blackall Tambo Regional Council Tambo Multipurpose Centre also recognises that collection of personal information needs to be done in a sensitive and confidential manner.

All referrals will be acted upon and assessment will commence within 14 days of receiving the referral.

*(*The timeframe may take longer where there are unexpected staffing shortages, i.e. Team Leader is on sick leave)*

To meet the needs of the individual, the service will provide a formal assessment of each individual requesting support from the organisation.

- All assessments and care planning meetings will be sensitive to the concerns of the individual and their family.
- A client can request to negotiate with the service through a third party or an advocate.
- All information gathered during an assessment will remain confidential.
- Where possible, staff will avoid duplicating information and assessment material gathered by My Aged Care or other organisations where the client has given permission for information sharing.



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- Blackall Tambo Regional Council Tambo Multipurpose Centre recognises it may be unable to fully service the assessed needs of a client due to insufficient resources; where this occurs, the service will endeavour to source additional resources or refer the client to another provider.
- Blackall Tambo Regional Council Tambo Multipurpose Centre recognises that the client or their carer/s may already be performing many of the activities and duties offered by the service and will not attempt to take over this role, thereby making the client dependent on the service unnecessarily, unless specifically requested.
- Where a client has the ability and the resources to adequately carry out a task, the service will not take on service delivery in this area except where the client demonstrates a need.
- Where assessment or reassessment identifies additional support needs that fall outside the approval provided by My Aged Care under the Commonwealth Home Support Programme, or are in excess of what can be provided under the person's Home Care Package, the individual will be referred back to My Aged Care for reassessment.

Blackall Tambo Regional Council Tambo Multipurpose Centre will also ensure ongoing monitoring, review and re-assessment of clients is conducted, using tools and processes such as:

- Maintaining and reviewing client progress notes.
- Conducting Case Management meetings with the individual and / or other stakeholders.
- Reviewing and updating case management plans at least every 12 months, or more often if needed.

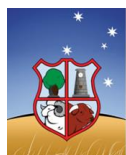
Additionally, the following will be applied when completing a client re-assessment:

- A review of the client's goals, including evaluation of the outcomes of services, supports and interventions provided.
- Re-negotiation of the person's goals and service delivery plans, including negotiation of the individualised budget where applicable.
- Information provision and support for the person to make informed decisions on the management of their care package (where they are a packaged care client).

RESPONSIBILITIES

Executive Management

- Ensure the relevant personnel hold a valid AUSKey and have access to the My Aged Care portal for the acceptance of incoming referrals and client information for review and consideration.
- Be aware of referrals sent to and received from My Aged Care, including the outcome of client assessment.
- Be aware of Direct to Service referrals sent to service by external agencies and the status of My Aged Care referral for these individuals.



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Management

- Accept and respond to referrals for potentially eligible clients sent by My Aged Care to the organisation.
- Accept and respond to Support Plan referrals from individuals seeking support through the NDIS.
- Assist clients and potential clients to access assessment through My Aged Care where necessary
- Conduct care planning procedures with clients seeking to access services, using both incoming referral information and internal forms
- Inform Executive Management of complex / high care issues raised in assessment which may impact on the ability of the organisation to provide appropriate services to a client.
- Ensure all documentation relating to assessment and reassessment is stored according to privacy legislation
- Liaise with the other service providers and stakeholders as necessary.
- Monitor and review clients on a regular basis and implement changes where identified.
- Refer to My Aged Care where a client has higher care needs than their care package can sustain or have additional needs not identified previously for CHSP clients.

PROCEDURES

Assessment will be conducted at the location of service delivery to allow assessment of family carer needs and the living environment. At the initial assessment, the care planner will:

- Review and confirm incoming referral information from My Aged Care or other source to determine information gaps and ascertain referred needs.
- Gather relevant statistical information on the client according to assessment documents, e.g. DOB, family name.
- Present information on services provided by the organisation and any associated costs.
- Gather further information referred needs including Activities of Daily Living (ADL's) to support My Aged Care referral or NDIS support plan.
- Gather information on preferences for service delivery of the client or their carer.
- Gather information on the supports available to the client, noting responsibilities for assessed care needs where the family or carer indicate a preference to provide.
- Complete a home safety check where required.
- Obtain information from other services providing assistance to the client, if in place.



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ASSESSMENT AND CARE PLANNING

- All information on a client will be contained in an individual client file and stored according to Blackall Tambo Regional Council Tambo Multipurpose Centre Privacy Policy.
- The information contained in the My Aged Care referral and gathered by staff will form the basis of the client's Care Plan.
- Clients will receive care according to their assessed needs and available funding.
- Aged Care clients will be reassessed at a minimum of 12 monthly.

PRIORITY – WAIT LIST

All approved Home Care Package consumers are placed on a National Wait List managed by My Aged Care. The time a person needs to wait for the assignment of a Home Care Package is dependent on date of approval, assessed need and circumstances and is outside the control of the organisation.

INTERIM HOME CARE PACKAGES AND LIMITATIONS TO ADDITIONAL CHSP SERVICES

In some instances, a client will be assigned an interim package; this is a package that is lower in funding value than the person's assessed level of need, e.g. a level 2 package while waiting for a level 4 package.

Where a client is offered an interim package, Blackall Tambo Regional Council Tambo Multipurpose Centre will work with the client to identify service priorities that can be delivered within the package funding. This may result in a client not receiving all services identified through their assessment.

Where the service has insufficient funds to support additional CHSP clients or an expansion of services to an individual, and there are no alternate service providers in the region, the person will be placed on a wait list. Clients are ranked according to assessed need, not time on the list.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Privacy Act 1988 (Cth)

Aged Care Standards Specifically **Standards 1, 2, 3 and 4**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

REVIEW TRIGGERS

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C4	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

ASSESSMENT OF THE CLIENT'S HOME ENVIRONMENT

POSITION STATEMENT

Blackall Tambo Regional Council Tambo Multipurpose Centre recognises the need to ensure a safe working environment for all staff. As the work environment of some staff includes the homes of clients, all reasonable efforts will be made to work with clients, their carers and families to ensure a safe working and living environment is maintained.

Where it is not possible to establish a safe working environment for staff due to lifestyle choices of the client, services will not be provided. Where this places the client at risk resolutions will be sought with appropriate agencies and / or referral to guardianship may be initiated.

The purpose of a home safety assessment is to identify potential risks to staff, to limit the chance of injury to staff attending to the client and to promote a safe and healthy environment in the client's home. Feedback will be provided to the client in the instances of a risk being identified including ways to mitigate risk.

The Manager will carry out a Home Safety Check assessment of a client's home prior to services commencing where services are provided in the client's home. This check will be conducted whenever a client assessment and reassessment is done.

Where a client is receiving basic supports, such as transport services or delivered meals, the home safety assessment will be limited to addressing risks potentially encountered by staff providing these services.

RESPONSIBILITIES

Manager

- Monitor that Home Safety checks are in place for identified clients.
- Provide support for staff as required.
- Complete Home Safety Checks form where the need is identified (refer to procedures below), ensuring that this is documented in the client's file.

Support Worker

- Provide feedback to the Coordinator regarding any issues that arise in the delivery of care services.



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- Assist with Home Safety checks as directed, e.g. as a cultural broker between the service and client/family.

PROCEDURES

A Home Safety Check should be completed:

- Where there is a service change e.g. additional tasks performed by staff, e.g. support worker providing personal care to client **in** the home environment.
- Where there is a significant change in the family structure or building as identified by the client or family.
- Where the client has moved to a new house/accommodation.

All Home Safety checks (records) are to be placed in the Client's File when completed.

A Home Safety Check may include review and assessment of the following areas:

- Exterior of the client's home including steps, pathways, ramps, gates, grass etc.
- Outdoor areas such as the clothes line
- Pets and identified risks/behaviour issues
- Inside the client's residence, looking at floor surfaces, power points, ventilation, lighting, space and fire hazards etc.
- Toilet/bathroom
- Client's sleeping area/bedroom.

Where risks to either staff and/or the client are identified and these cannot be easily remediated the Manager should speak with the clients' family and other service providers involved in the care of the client, referring to **Adult Guardianship** if relevant.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Privacy Act 1988

Aged Care Standards Specifically **Standards 2, 3, 4 and 8**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

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Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards



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Tambo Multipurpose Centre Policy

Policy Number: MPC-C5	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

ASSISTANCE WITH MEDICATIONS AND INCIDENT MANAGEMENT

ORGANISATION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre will ensure that appropriate systems, processes and procedures are in place that meet workplace health and safety, infection control, and other legislative requirements related to medications and any role that staff may have in supporting clients to manage their medication.

The organisation recognises that while the client, or his or her family carer, is responsible for the clients' medication regime, some clients will require assistance to maintain medication compliance.

Blackall Tambo Regional Council, Tambo Multipurpose Centre will work with health clinics and health professionals in supporting clients and recognises the responsibility of these services for the making clinical diagnoses, dispensing, and administering medication.

The organisation recognises that medication assistance is the 'prompting and / or assisting the client with self-medication which may involve:

- Reminding or prompting the client to take their medication
- Observing that the client has taken their medication
- Assisting (if needed) e.g. holding the blister pack while the client pops the tablets out
- Signing the 'Medication Prompt' form to indicate that the medication has been taken

Community Service staff ***may, where they have had and met relevant training competencies***, provide assistance in prompting (reminding) and observing the client taking their medication in accordance with the person's written Care Plan and any Medication Support Plan.

Unqualified staff e.g. those who have not completed training in medication competencies, cannot provide medication assistance.

Where a client requires **medication administration** the organisation will assist the client to attend their local health service to receive relevant medical care from qualified health staff where this has been identified as an assessed need in their care plan.



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Any and all **medication incidents** must be documented on the appropriate organisation Incident Reporting Form and reported appropriately and responded to according to the type and seriousness of the event.

RESPONSIBILITIES

Clients

- Clients are responsible for their own medications (e.g. managing and administering their own medications). Clients and / or their family carer may be transported to the health centre to pick up medications as part of their care or support plan.

Executive Management

- Provide appropriate guidelines on medication assistance to staff.
- Where required, ensure that staff have appropriate access to external and internal training and professional supervision, and that they have appropriate skills, knowledge and qualifications to perform designated duties associated with medication assistance.

Management

- Ensure identified support needs are documented in the client assessment.
- Any actions regarding medication assistance are clearly documented in the clients' care plan; and clients with more complex health care needs have access to an appropriate health professional to provide advice and assistance, as and when needed.
- Provide appropriate orientation and training to support staff who are expected to assist clients with self-medication as part of their role on commencement and annually thereafter. The training should be inclusive of but not limited to, scope of practice, breaches and penalties, organisational policy, PPE, incident response and reporting requirements.
- Monitor all medication assistance and ensure that all related records are maintained on the client file and in client notes.
- Liaise with relevant Health Care staff, referring the client to appropriate Health Care Provider/s where further assistance is required.
- Respond to concerns raised by the Community Services staff about medication incidents.
- Assist clients to access relevant support(s) where affected by a medication incident.
- Support staff members who are involved or affected by medication incidents.
- Report all medication incidents to Management.

Support Workers

- Follow practices for supporting a client with self-medication according to their scope of practice.



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- Alert the Coordinator immediately to any issue or concerns relating to a client's medication management, e.g. refusal to take medication, handling or storage issues observed AND of any significant changes occur e.g. adverse reactions, decline in health status or function.
- Complete any organised training in medication support arranged by the organisation.
- Complete and/ or assist in completing an incident form should they be involved, affected or witness to a medication incident.

PROCEDURES

ASSISTANCE WITH MEDICATIONS

All medication assistance will be limited to the skills, training and scope of practice held by the staff member.

Staff can assist the client, taking note of the following requirements:

- Client medication should be in a medication administration aid (such as a blister pack prepared by a pharmacist) and have the client's name clearly identified, and timing of administration on the pack.
- Where medication is not suitable for a medication aid (e.g. liquid, eye drops, eardrops, ointment, cream, etc.), support staff are only to provide medication assistance where it is within their scope of practice to do so.
- Clients and their carers are encouraged to apply any prescribed topical medication.
- Assistance with non-medicated creams e.g. sorbelene, may be provided as part of personal care tasks.

CLIENT MEDICATION SUPPORT PLANS

Where required a Client Medication Support Plan based on the medications that the client is self-administering should be in place. This will be developed by the health care provider. Key information that should be documented in the medication support plan should include but not be limited to:

- a description of key support tasks
- client's name and date of birth
- client allergies and reaction to allergens
- type of medication to be taken (tablets, creams etc)
- dose to be taken
- specific route e.g. oral, topical, etc.
- time to be taken
- specific instructions regarding the medication, e.g. to be taken with food
- commencement date of medication
- cessation or review date of the medication.



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The Coordinator will communicate with the client's Doctor, pharmacist, and/or other health professional when required, to clarify or discuss the client's medication assistance.

IN THE EVENT OF A MEDICATION INCIDENT

- Identify the nature of the incident. For example, has the wrong tablet been taken, has the medication been dropped on the floor or has the client refused to take their medication.
- Contact the clients' Doctor or poisons information centre for information and advice
- Follow advice provided by the Doctor or poisons information centre and document in clients' progress notes as soon as possible after the event and include it as part of the medication incident report.
- Instruct the support worker to call emergency services on '000' or the relevant Health Clinic, in the event the client is in distress or showing signs of being unwell.
- Assist the Support worker to complete an **Incident Report**.
- Advise the client's carer or significant other of the medication incident.
- Check on the client later in the day/next day (where appropriate).
- Record the incident in the client's progress notes and on the client medication record.
- Investigate the specific incident in line with the Incident reporting process.
- Develop an action plan to prevent re-occurrence of the incident and share the decided actions.
- Contact the Manager immediately to seek further advice.
- Call emergency services on '000' immediately if the client is in distress or showing signs of being unwell.
- Observe the client for changes in behaviour or well-being as a result of the incident and report any concerns immediately to the Manager.
- Reassure the client and do not leave the client until instructed to do so by your Manager.
- Complete an **Incident Report** and forward to the Manager.

RELATED LINKS AND REFERENCES

Poisons Information **Ph: 13 11 26**

Medication Management – My Aged Care <https://www.myagedcare.gov.au/getting-started/healthy-and-active-ageing/medication-management>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Quality of Care Principles 2014

Aged Care Standards, specifically **Standards 2, 3, and 8**

Australian Pharmaceutical Advisory Council (APAC), Guiding Principles for Medication Management in the Community, June 2006

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Health (Drugs and Poisons) Regulation 1996

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Blackall-Tambo **Regional Council**

Tambo Multipurpose Centre Policy

Policy Number: MPC-C6	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

CARE PLANNING AND MANAGEMENT OF SUPPORTS

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that each client is an individual with varying needs and desires and the need for good care planning and management of service delivery is an important aspect of delivering high quality care to clients. The organisation also recognises that developing and regularly reviewing a written care plan and sharing relevant information, reduces the chance of conflicting service delivery or duplication of services between stakeholders.

The service will ensure this through:

- Recognising that care plans are working documents and require regular review.
- Working with other service providers where required to ensure appropriate services and supports are in place for clients.
- Employing staff with case management skills and/or training staff in assessment and care planning.
- Involving the client, their carer and others that the client wishes to involve in the assessment process and in ongoing monitoring and review of their plan of care.
- Developing individual care/support plans for each client covering the areas identified in assessments.
- Regularly reviewing care/support plans.
- Referring to other services where the organisation is unable to provide the identified care needs.

REHABILITATION NEEDS

Rehabilitation services are not a core service provided by the organisation. However, access to rehabilitation may be facilitated where appropriate resources are available. For example, Aged & Disability staff may assist in referring clients to Allied Health service providers and supporting access to their services.



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RESPONSIBILITIES

Manager

- Monitor the completion, and standard of care plans including regular review of care and supports delivered against client goals and identified outcomes and according to Service policy.
- Facilitate and participate in case management processes as required.
- Develop client care plans within set timeframes.
- Be involved in case management meetings as required.
- Review care plans as required including adjusting plans in response to changing needs.
- Support clients, including those with impaired decision-making skills, to make choices on care received.
- Ensure staffing levels as well as skills and experience of staff are adequate for meeting care needs of clients.

Support workers

- Provide service according to the client's care or support plans.
- Provide feedback to the Coordinator regarding any adjustment that may be required to client's care plans.

PROCEDURES

CARE PLANNING

- All clients must have an assessment and care plan developed prior to receiving services.
- Each care plan is to be developed using information from the client's assessment and other information provided by other relevant stakeholders.
- The initial care plan may need to be adjusted within the first six weeks of service as more information on the client and their needs are obtained.
- The Coordinator will liaise with the client and their carer/s over the first six weeks to obtain a clear idea of the client's needs.
- Supports offered must consider the needs and concerns of the individual, as well as any stated goals, with an emphasis on wellness and re-ablement where possible.
- Where the family or carer has indicated, they wish to be the provider of any identified care supports this must be noted in the care plan.

REVIEWS

- Care plans must be reviewed **twelve-monthly**, or more frequently should the need arise according to the *Aged Care Act 1997* and care plans amended where necessary.



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SHORT-TERM CLIENTS

- Where possible care plans for short-term clients or visitors should follow the same procedure as for permanent clients, except in the case of brokered clients where the client's Approved Provider has supplied relevant information.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Records Principles 2014

Aged Care Standards - specifically **Standards 2, 3, 4 and 7**

CHSP Programme Manual

Home Care Packages Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

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Blackall-Tambo Regional Council

Tambo Multipurpose Centre Policy

Policy Number: MPC-C7	Effective Date: 16 February 2022
Version Number:	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

CHALLENGING OR RESPONSIVE BEHAVIOURS AND RESTRAINT

POSITION STATEMENT

Blackall Tambo Regional Council Tambo Multipurpose Centre recognises that clients may at times express **challenging behaviours** that can adversely impact on staff, carers, other customers and the general public and seeks to both support and mitigate risk by applying appropriate strategies when dealing with these situations when they arise.

Blackall Tambo Regional Council Tambo Multipurpose Centre also recognises it has a duty of care to ensure a safe service environment for both staff and customers and that challenging behaviours need to be managed for the benefit of all.

We focus on responding to the customer's behaviour and understanding its cause or trigger, recognising that this approach, rather than attempting to control behaviour, is a safer and more appropriate option.

Blackall Tambo Regional Council Tambo Multipurpose Centre acknowledges there is often a valid reason for the behaviour displayed by a customer and that challenging behaviours may be a person's attempt at communicating an issue.

Staff will not make assumptions prior to gaining more understanding of the situation and will refer to the relevant professional where additional insight to the behaviour is required.

RESTRAINT

Restraint is anything that limits the movement or actions of a person. The ability to live in a restraint free environment is a basic human right for people. Restraint infringes on a person's right to freedom and dignity of choice.

Restraint is not a substitute for adequate supervision.

A restraint free approach means that the use of any restraint must always be the last resort after exhausting all other reasonable alternative options. ¹

Examples of restraint in a Community Care context may include:

¹ *The Quality of Care Principles amendment 2019, Part 4A – Physical or chemical restraint to be used only as a last resort.*



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- Physical, e.g. Placing a table or something in front of a person that makes it difficult for them to get out of a chair and move around freely or installing child safety gates that the person cannot easily open.
- Chemical, e.g. Where a medication is used to sedate or restrict the movement of a person, rather than treating a diagnosed health condition.

RESPONSIBILITIES

Executive Management

- Arrange training for staff in the management of challenging behaviours.
- Maintain currency on information regarding regulations, e.g. restraint, ensuring staff are made aware of any changes.
- Arrange debriefing or counselling for staff where necessary.
- Ensure that incidents are reported to the Board via management reports and information is provided on outcomes, actions or recommendations arising.

Manager

- Ensure individual care plans acknowledge the client's behavioural issues and strategies to manage these.
- Assist care staff to understand how to effectively support a person with challenging behaviours, including accessing training where required.
- Liaise with family and Health Practitioners working with the customer and their family to understand their needs and devise alternatives to restraint.
- Ensure staff are trained and understand the proper use of restraint where this has been an identified need for an individual.
- Ensure progress notes and file notes are used to appropriately document issues as they occur.
- Complete incident reports in relation to incidents.
- Complete relevant documentation where there have been changes to processes.
- Assist the carers of clients who exhibit challenging behaviours to access respite where required.

Support Worker

- Implement identified actions and strategies when working with clients who exhibit challenging behaviours.
- Participate in relevant training to improve understanding of client issues and behaviours.
- Under the direction of the Manager, work with clients and families to attempt to understand their needs and develop alternatives to restraint.

PROCEDURES – CHALLENGING BEHAVIOUR

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Should a client's behaviour be challenging, abusive or aggressive it is important that staff members follow some basic steps.

- **Stay calm**

Try not to increase tension by appearing angry or agitated.

- **Consider the surrounding area**

If there are likely threats, or objects that could become a weapon, in the immediate environment suggest, or begin, moving towards a safer environment with the person.

- **Try to keep your voice even and low**

Do not shout; acknowledge their emotion and attempt to discuss the issue in a calm manner.

- **Try to find out why they are angry/ upset**

Act professionally, stay in control and try not to personalise the situation. Listen to the person and try to identify what they are trying to tell you.

- **Seek help and support**

Seek support as necessary and take steps to ensure your safety as far as possible.

- **If you are not able to communicate effectively with them because they are too emotional**

Explain that you will talk to them once things have calmed down. Suggest coming back later.

- **If you are unable to communicate effectively due to a language barrier**

Try to call upon a family member/someone who speaks his or her language, to assist in defusing the situation.

- **Don't attempt to stop the expression of anger unless it gets beyond control**

Some anger expressed can help to reduce anxiety and may be valid.

- **Record the incident in written notes**

To be filed in the client's file for further reference, identifying the cause of the incident where known.

- **Record the incident on organisation incident form**

Complete a written report of the incident on the relevant form and forward to management.

- **If the incident becomes unsafe**

*Seek assistance from other staff or refer to the organisation **Critical Incident Policy** where either the client or you are in danger.*

- **Debrief and Follow up**

Staff members involved can access appropriate debriefing and follow up counselling if required, i.e. if behaviour escalates to a critical incident.

PROCEDURES – PHYSICAL RESTRAINT



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No restraints will be applied to a customer prior to an assessment and specific written direction being obtained from a relevant health professional.

Discuss the following restraint free options: ²

- Stop, look and listen for triggers to changes in behaviours to know when to put in place distraction activities
- Identify familiar household and/or gardening tasks to keep active
- Organise with relatives and/or friends planned visiting times and coordinate regular outings if possible
- Review timing of meals/snacks and other activities like showering
- Identify and minimise confusing sensory environments/loud or disliked music
- Avoid sensory overload
- Use signs with pictures around the house to minimise confusion and ensure adequate lighting
- Ask for specific assistance to plan a possible arts and crafts activity program
- Ask for specific assistance to plan a regular physical activity program
- Identify at least one safe wandering area around the house which has easy access
- DISCUSS THE NEED FOR RESPITE AND ADDITIONAL SUPPORT

PROCEDURES – CHEMICAL (MEDICATION) RESTRAINT

Chemical restraint is the control of a person's behaviour through the intentional use of:

- Prescribed medicines
- Over the counter medicines
- Complementary alternative medicines

Chemical restraint is:

- When no medically identified condition is being treated
- Where the treatment is not necessary for a condition
- To over-treat a condition.

Chemical restraint includes the use of medicines when:

- The behaviour to be affected by the active ingredient does not appear to have a medical cause
- Part of the intended pharmacological effect of the medicine is to sedate the person for convenience or disciplinary purposes
- Examples of pharmacological agents used as chemical restraint are antipsychotic, antidepressant, antimanic, anxiolytic and hypnotic drugs



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- Chemical restraint, medicines which sedate or tranquillise, should not be implemented until alternatives are explored extensively through assessment. ²

If chemical restraint is being used by the consumer/client and/or their carer, the management team must ensure a medical practitioner has assessed the client as requiring the restraint and has been prescribed the medication.

While the client is on the medication—regularly monitor for signs of distress or harm and provide information to the Coordinator/ Team Leader so they can escalate to family representatives and relevant care practitioners involved in the clients care plan and care supports.

RELATED LINKS AND REFERENCES

Aged Care Quality and Safety Commission

Regulatory Bulletin (Regulation of physical and chemical restraint)
<https://www.agedcarequality.gov.au/resources/rb-2019-08-regulation-physical-and-chemical-restraint>

Scenarios involving physical and chemical restraint
<https://www.agedcarequality.gov.au/resources/scenarios-involving-physical-and-chemical-restraint>

[Commonwealth-home-support-programme-chsp-manual](#)

[Department of Health and Ageing – Decision Making Tool \(resources\) – Supporting a Restraint Free Environment in community aged care](#)

[Home Care Packages Program: Operational Manual March 2020](#)

[NDIS Practice Standards and Quality Indicators](#)

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Charter of Aged Care Rights

Duty of Care Principles

Quality of Care Principles 2014; and Minimising the Use of Restraints amendment 2019

User Rights Principles 2014

Aged Care Standards, specifically **Standards 1, 2, 3, 4, 5, 7 and 8**

NDIS Practice Standard # 1,2, 3, 4, 7, 9

Disability Services Act 1986 (Commonwealth)

National Disability Insurance Scheme Act 2013 (Commonwealth)

National Disability Insurance Scheme (Quality Indicators) Guidelines 2018

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

REVIEW TRIGGERS



Blackall-Tambo **Regional Council**

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C8	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Complied by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

Client Agreement

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the requirement to provide a written agreement to a client receiving services and supports from the community services program.

Blackall Tambo Regional Council, Tambo Multipurpose Centre also acknowledges the need to ensure specific inclusions that are required under legislation or program contracts in any agreement and will seek to ensure that agreement documentation is monitored and updated as required.

All client agreements (including relevant supporting documents) will describe how care will be delivered, the level of care and services to be delivered, any fees or client contributions required, the rights of the client, our expectations, an explanation of how clients can terminate their services with the organisation and information on security of tenure and package management for packaged care clients.

All clients will be offered an agreement before care services are provided. Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the right of an individual to reject the offer to sign a written agreement and will note any instances of this in the person's client file. Not signing an agreement will not impact on the person's ability to access services through the organisation.

RESPONSIBILITIES

Executive Management

- Monitor the requirements of legislation and programs, making amendments to documentation as required.
- Monitor the completion of client agreements, providing feedback to Manager on outstanding agreements or updates required in a timely manner.

Manager

- Ensure all clients receive a written agreement prior to the commencement of services.



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- Explain the contents of all client agreements to clients prior to asking them to sign off on the agreement.
- Ensure all changes to the client care plan are accompanied by an updated client agreement, including new budget where required.

Support Worker

- Assist the Manager to explain aspects of the client agreement to the client and their family carer/s where required.

PROCEDURES

- All clients are to be offered a client agreement prior to the commencement of any supports.
- Where the service has received a direct referral for a client for immediate essential support to maintain health and wellbeing, such as by the clinic or hospital, an interim agreement should be offered to the person at initial intake. A full assessment and care plan will also need to be developed, along with agreement once the person has been assessed and approved by My Aged Care.
- A new agreement is required whenever the individual's care plan is updated.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Privacy Act 1988 (Cth)

Charter of Aged Care Rights

Quality Care Principles

User Rights Principles

Aged Care Standards, specifically **Standard 1, 2 and 8**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Commonwealth)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C9	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

CLIENT FEES, BUDGETS AND DEDUCTIONS

POSITION STATEMENT

Blackall Tambo Regional Council Tambo Multipurpose Centre acknowledges the right of clients to have their fees determined in a way that is transparent, accessible and fair.

Blackall Tambo Regional Council Tambo Multipurpose Centre also understands that many of the clients accessing aged care or disability care services are dependent upon pensions for their income. The organisation will ensure that any fees charged will be within the means of the client and reasonable, considering any other necessary expenses the client incurs.

All fees will be reviewed annually against the cost of delivering the service and any increase in fees will be communicated to clients a minimum of four weeks prior to the increase taking effect.

Blackall Tambo Regional Council Tambo Multipurpose Centre will comply with all requirements for setting and publishing fees according to legislated and program contracts and maintain transparency in the setting and application of fees. All clients will be charged equivalent fees for equivalent services.

ABILITY TO PAY FEES

In charging service fees, Blackall Tambo Regional Council Tambo Multipurpose Centre applies the following guidelines:

- Clients who are assessed as having a capacity to pay a fee towards the cost of delivering a service will be expected to contribute.
- A client who does not have a capacity to pay may have their fee reduced.
- The fee for a service is all-inclusive and covers all materials used in the delivery of the service, e.g. meals and laundry.

Refusal to pay: Where a client refuses to pay for a service such as contribution to the cost of delivered meals, or they, or a family member, cancel any pre-arranged payment plans, their non-essential services will be suspended until the debt is recovered or arrangements are made to recover the debt.

Appeals: The client or their representative has the right to appeal if they are unhappy with any aspect of the fee setting. All clients shall be advised of this right and the process of appeal

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at the time of assessment and subsequent reviews. No client will be disadvantaged as a result of lodging an appeal.

NOTE: Where the client has a debt relating to gambling, family pressure to spend on non-essential consumer goods, or where the client has accrued debts relating to the purchase of non-essential consumer goods or fines, the organisation does not recognise inability to pay for meals under financial hardship guidelines. In this instance, Blackall Tambo Regional Council Tambo Multipurpose Centre will work with the consumer to assist them to identify ways that allow for the payment of essential services and supports.

RESPONSIBILITIES

Executive Management

- Annual review of fees.
- Provide financial information to accurately report against client budgets.
- Respond to appeals regarding fees.
- Ensure that any requirements for the publication of fees are met.
- Ensure that fee information is updated in relevant documents including client agreements as required.
- Monitor incoming fees via monthly financial reports and provide information on client contributions to the Finance Team.
- Liaise with insurance companies for payment of services where a client is in receipt of compensation payments that cover service provision.

Manager

- Ensure clients and their carer/s understand fee information included in the client agreement.
- At the time of initial assessment and subsequent reviews, advise clients or their representative of the right to appeal the fee structure if they are unhappy with any aspect of fees.
- Ensure fee deduction forms (e.g. Centrepay or Bank) are completed correctly and submitted in a timely manner.
- Follow up clients in arrears.
- Develop Home Care Package budgets in partnership with clients and/or or their carer based on the agreed care plan.
- Ensure that monthly reports are provided to clients and/or their carers regarding expenditure of services against their Home Care Package and remaining funds.

PROCEDURE

Fees and Centrelink Deductions

A **verbal** explanation of fees and fee breakdown will be provided to clients as part of their initial client agreement process and whenever any fee changes occur.

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- A written copy of the Fees Policy and any related information will be provided, where requested, to the client, their family and/or carer.

Maximum Fees Payable and Means testing

- Clients who are living in their homes who receiving the aged pension will be expected to contribute *no more* than 17.5% of the current basic aged pension for a single person, for assistance they receive through the service.
- Clients whose income exceeds the basic pension may be required to pay extra for the assistance they receive up to the full unit cost of providing the service. This will be determined via an income test which is an external requirement of the Government.

For further information on maximum amounts and limits for income tested fees, refer to My Aged Care [<https://www.myagedcare.gov.au/costs/fees-annual-lifetime-caps>]

Home Care Packages only

EXIT FEES

- Exit fees are published on My Aged Care and updated as required.
- Exit fees are documented in all Home Care Package client agreements.
- Deductions are made as per the Department guidelines, i.e. they will not be more than:
 - the published exit amount (at the time the Home Care Agreement was entered into); and
 - the exit amount included in the client's Home Care Agreement; and
 - the unspent home care amount remaining in the client's package.

OTHER FEES

- Where a client's Home Care Package is fully expended, or they seek additional services that are unable to be paid for with a Home Care Package, the person may elect to pay more for additional services offered by the program, e.g. dog feeding, veterinary care, spring cleaning, etc.

EXCLUDED ITEMS

- Under the HCP program guidelines, the 'purchase of food, except as part of enteral feeding requirements' is an excluded item. Therefore, all clients are expected to pay full recovery cost of the ingredients portion of any delivered or centre-based meals.

CLIENT BUDGETS AND MONTHLY STATEMENTS

The individualised budget will clearly identify the total funds available to the client as required by legislation.

The monthly statement will contain relevant information as outlined in legislation in a format that is appropriate and which clients and their carers can understand. Support will be provided to assist clients and/or their carers to understand their budget and statements where this in an identified need or request.



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REPAYMENTS

- If consumers choose to change providers, any unspent funds (less any agreed exit fee) within their package will follow them to the new home care provider
- Where the client leaves home care, e.g. they die or move into residential care – the Commonwealth Government will be notified, and any unspent package funds returned according to Government procedures
- Any unspent consumer contributions will be returned to either the consumer or their estate.

Clients receiving compensation payments

- Clients who have received or are receiving compensation payments which are intended to pay for the cost of care services will be charged at the full unit cost of providing those services.

RELATED LINKS AND REFERENCES

My Aged Care – Basic Daily Fee <https://www.myagedcare.gov.au/costs/help-home-costs/home-care-basic-daily-fee>

CHSP Client Contribution Framework <https://agedcare.health.gov.au/programs-services/commonwealth-home-support-programme/chsp-client-contribution-framework>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Quality of Care Principles 2014

User Rights Principles 2014 - Amended

Charter of Aged Care Rights 2019

Aged Care Standards, specifically **Standard 2 and 8**

CHSP Programme Manual

Home Care Packages Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

REVIEW TRIGGERS

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C10	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

Client File Management

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre acknowledges the need for all clients to have a well organised, confidential client file. To meet this requirement the Service will:

- Maintain a standardised client file system that meets auditing requirements for all clients.
- Ensure system redundancies are in place in the event of emergency situations or Information Technology issues.
- Ensure all relevant staff are aware of the standardised client file system.
- Conduct an internal audit of client files on an at least annual basis and address any identified issues relating to file contents.
- Provide secure storage facilities for all current and archived client files.

Blackall Tambo Regional Council, Tambo Multipurpose Centre also acknowledges the right of the clients and their designated representative to access to their own personal files, including both hard copy and those maintained on a client management system.

All files will be managed according to Privacy legislation and access to client files will be restricted to those who require information relevant to the provision of services to the consumer, or for the purposes of ensuring a quality service e.g. external auditor.

RESPONSIBILITIES

Executive Management

- Ensure that there are secure systems in place for the storage of sensitive client information.
- Ensure all relevant staff are orientated and trained on the correct use of forms and documentation that make up a client file.

Manager

- Ensure the secure storage of client information is maintained.
- Ensure client files are set up according to the processes of the organisation.



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- Manage client information to ensure client files are up to date and relevant.
- Conduct an audit of client files on a regular basis to identify and address any gaps or changes in client information.

PROCEDURES

Suggested information that should be found on a client file, hard or soft copy:

- Client statistical and personal information e.g. DOB and Next of Kin
- Client Referral/s
- Assessment documents, both internal and external, including information from My Aged Care
- Care Plan and any other documentation that supports care staff understanding of client needs
- Signed Client Service Agreement
- Signed Charter of Aged Care Rights
- Consent documentation relating to the sharing of information with other relevant stakeholders
- Emergency Management Response information
- Home Safety Check (where applicable e.g. services delivered in the client's home)
- Client Progress Notes
- Any additional risk assessment documentation
- Any other relevant information, e.g. alerts, special dietary requirements, rare health condition, etc.

OTHER DOCUMENTS AND CORRESPONDENCE

There may be other documents relating to the care and support of a client such as correspondence from other service providers or allied health professionals.

Any relevant information received regarding a client received via an email or a letter should be printed or saved as a PDF and placed under the correspondence tab in the client file. If relevant, a note should be made in the client's progress notes relating to the receipt of this document.

CLOSING A CLIENT FILE/ CLIENT EXIT

Where a client has exited the service the client file information needs to be retained by the service for a **period of seven years (1)**.

Staff shall:

- Remove the client file from the general client file area.
- Place a note in the front of the client file regarding the reason for the client exiting the service.
- Archive the file according to the organisation's policy and procedure.



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- (1) Any client who identifies as a member of the Stolen Generation and/or have been removed from their family, must have their records archived permanently once they are no longer a client of the service.

RELATED LINKS AND REFERENCES

Charter of Aged Care Rights Template for Signing

<https://agedcare.health.gov.au/quality/single-charter-of-aged-care-rights>

RELEVANT STANDARDS AND LEGISLATION

Right to Information Act 2009 Queensland

Privacy Act 1988 (Cth)

Aged Care Act 1997

Records Principles 2014

Charter of Aged Care Rights

Aged Care Standards, specifically **Standard 1 and 8**

CHSP Programme Manual

Home Care Packages Fact Sheets

Disability Services Act 1986 (Commonwealth)

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C11	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

Client Intake Pathways

POSITION STATEMENT

Blackall Tambo Regional Council Tambo Multipurpose Centre will accept referrals for the supply of care and support to eligible consumers according to program guidelines.

Urgent requests for new or increased services and support which come directly from consumers, family or health providers will be considered where there is an assessed need. The organisation will assist the individual to contact My Aged Care to complete a formal assessment and approval.

The service will provide a full orientation to all new consumers and their family carer/s and to those moving between programs or levels of care. This will include the provision of relevant resources, verbal and written instructions and relevant client documentation.

All clients will be fully informed of their rights and responsibilities, the services they will be receiving and how and when these will be delivered.

The organisation recognises the need to identify any potential risks and relevant workplace health and safety issues that could arise when providing support and services to the consumer and will include relevant assessments during the intake process.

RESPONSIBILITIES

Executive Management

- Ensure all relevant staff are aware of the intake process for people wishing to access aged care and disability programs.
- Manage and approve urgent requests for new or additional services according to program guidelines and budgets.

Manager

- Assist consumers to apply to relevant intake agencies as required e.g. My Aged Care and National Disability Insurance Scheme.
- Accept incoming referrals for supports and conduct relevant assessments.
- Follow organisational intake procedures including establishment of client documentation and planning of services.

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- Distribute client resources such as client handbooks and discussion with client and family carers on expectations when using the service.
- Develop care plan and budget, including negotiation and liaison with external service providers as required.

Support Worker

- Provide cultural, language and other support where required during assessment and care planning.

PROCEDURES

The following steps will be followed to ensure a full and sufficient intake process has been undertaken:

1. All aged care clients must have a referral from My Aged Care before they can commence receiving services.

Where a 'Direct to Service' referral has been received from a health professional, emergency support can be provided to the client while waiting for formal assessment by My Aged Care. This support is limited to Nursing Care, Meals, Personal Care and Transport.

Home Care Package clients must have a My Aged Care package allocation code. This may take the form of an online referral to the service or a letter from My Aged Care.

Commonwealth Home Support Programme clients must have a My Aged Care approval and referral code.

2. **National Disability Insurance Scheme** participants will need to supply a copy of their Support Plan outlining supports requested of the organisation where the organisation is not the person's Coordinator of Supports.
3. All clients will receive an intake assessment to confirm goals and preferences of the client prior to commencing services.
4. An explanation of the services that consumers can be offered and any limitations to these will be provided, this will include discussion and agreement of any brokerage arrangements.
5. All clients will receive information relating to their fees and any other relevant information. The key contents of the client handbook and any relevant brochures will be highlighted to the client and their carer, using a translator where required.
6. The organisation's Centrepay or relevant Bank deduction form will be completed where the client indicates they wish to receive meals or for any other fees that have been agreed upon.
7. The care plan and budget for a Home Care Package client will be developed using information gathered in the intake phase.
8. Confirmation of the client's emergency response information will also be completed as part of the intake process.
9. A Home Safety Check will be conducted where services will be delivered in the home.



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10. Where the client is satisfied with their care plan (and budget for Home Care Package clients) the client agreement will be signed off by both the client and the Team Leader and any family carers where appropriate.
11. The Manager will alert relevant person/s in your organisation of the date of service commencement.
12. Negotiation with external providers and brokered services will commence as required.
13. The Manager will coordinate services and notify support workers of changes or new services and provide relevant client information.
14. The client information and documentation will be entered into relevant filing systems.
15. Tick sheets and rosters will be adjusted where required.

NOTE: Where the client is under the care of the Adult Guardian, the Guardian will be included in all meetings and will be required to sign off on all care plans and funding agreements.

RELATED LINKS AND REFERENCES

My Aged Care referral form <https://www.myagedcare.gov.au/referral-form>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Charter of Aged Care Rights 2019

Aged Care Standards, specifically **Standards 1, 2 and 8**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C12	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

CLIENT MONEY MANAGEMENT

POSITION STATEMENT

The Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that some clients accessing Community Services supports may require assistance in managing their money due to lack of financial competency or external pressures related to financial abuse or other issues, however money management is not a core responsibility of the Blackall Tambo Regional Council, Tambo Multipurpose Centre or staff noting:

- That managing client finances can lead to dependence by the client on the organisation and
- Money management carries with it the risk of financial mismanagement or misconduct if not managed by financially competent individuals.

To assist clients requiring support with money management Blackall Tambo Regional Council, Tambo Multipurpose Centre will direct clients to services designed to specifically help with financial management or refer the individual to the Adult Guardian where this is an appropriate course of action.

Blackall Tambo Regional Council, Tambo Multipurpose Centre ***will provide unaccompanied shopping*** support for clients where this is identified and documented in their care plan. Where the staff member is required to handle client's personal funds to undertake this activity, they will ensure receipts and appropriate record keeping practices are adhered to.

**Blackall Tambo Regional Council, Tambo Multipurpose Centre is not responsible for the operation of these services; clients accessing these services do so at their own risk.*

RESPONSIBILITIES

Executive Management

- Provide clarification on policy and procedure as required.



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Manager

- Direct clients or their families to financial management services which are designed to specifically help with financial management and counselling.
- Where clients are considered financially vulnerable, or have cognitive impairment, a referral to Adult Guardianship should be considered.
- Refer to and work with external stakeholders to support clients with money management where this is an identified need.

Support Worker

- Report any identified concerns regarding the financial capacity of clients where this is impacting negatively on their wellbeing.
- Report any suspected incidents of financial abuse to the Manager.

PROCEDURES

- Refer clients or their carers/ families to financial management services which are designed specifically to help with financial management, e.g. banks, financial planners, Money Management services.
- Refer clients to formal advocacy services to assist with accessing financial supports where required.
- Refer clients to the Adult Guardian using the appropriate procedures set out by the Adult Guardianship Board where required.

RELATED LINKS AND REFERENCES

Office of Public Guardian NT <http://publicguardian.nt.gov.au/about-us/nt-guardianship-adults-act>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Guardianship of Adults Act 2016

Aged Care Standards, specifically **Standards 1, 2 and 4**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

REVIEW TRIGGERS

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Blackall-Tambo **Regional Council**

This policy/procedure is reviewed internally for applicability, continuing effect and consistency with related documents and other legislative provisions when any of the following occurs:

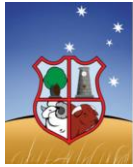
1. The related documents are amended.
2. The related documents are replaced by new documents.
3. Industry, legislation or service agreement changes may necessitate modifications to procedures.
4. Other circumstances as determined from time to time by a resolution of the organisation.

Notwithstanding the above, the organisation may review this policy/procedure annually for relevance and to ensure that its effectiveness is maintained.

VARIATIONS

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Regional Council

Tambo Multipurpose Centre Policy

Policy Number: MPC-C13	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

CLIENT PROGRESS NOTES

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that client progress notes are an important part of client care and support care management practices and positive outcomes for clients. Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that client progress notes assist in:

- Identifying client's progress (positive or negative).
- Recording what level of care is being provided in response to client's state.
- Identifying any 'trends', which may impact on client's care.
- Supporting good communication between stakeholders and promoting continuity of care.

To maintain documentation standards Community Services Management will:

- Develop efficient systems for the management and upkeep of client documentation so that the process is not cumbersome or time-consuming.
- Ensure staff understand the need for client documentation that is accurate, relevant and succinct.
- Provide relevant training on the appropriate and timely completion of progress notes.

Progress notes should be actively maintained and updated regularly. The frequency of clients' progress notes will vary depending on the level of care required by the client. Although some low care clients may only need monthly progress notes recorded, where required, client progress notes will be updated on a weekly or daily basis to reflect actions that support quality care.

All aged care documentation concerning incidents in the workplace, or relating to interactions with clients, should reflect an objective report of events.

NOTE: All Aged & Disability documentation can be subpoenaed by a court of law. Therefore, it is important that the information in any documentation is clear and concise, uses appropriate language and is non-judgemental.

Storage of documents should always comply with privacy policies and procedures.

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Regional Council

A Progress note is defined as:

Notes that describe the interactions with clients or incidents that affect them directly e.g. discussion with client or their carer around going for respite.

RESPONSIBILITIES

- Ensure secure storage facilities.
- Provide efficient documentation processes and pro-formas and training/orientation on how to use them.
- Maintain client files and other documents according to procedures.
- Secure on-site documents.
- Support workers complete progress notes in a timely and professional manner.

PROCEDURES

Documentation

All clients must have regularly documented notes reflective of their level of care and support.

Progress notes are to reflect exception reporting practices.

Progress notes must be:

- Objective (factual) - opinions and speculation are not acceptable and any opinion expressed by a third party must be clearly identified as such.
- Non-judgemental - use of comments such as 'Mr A was violent' are not acceptable. It is acceptable to write 'Mr A hit Mrs B with his stick and shouted at her'.
- A clear record of events as they happened, not an interpretation. They should be written by the care staff directly involved where possible not someone who has heard second hand.

Where staff are uncertain about how to write progress notes or lack required literacy skills their words can be dictated and noted by another party who must sign the notes. The note should commence with the words: 'Information provided by (name of care worker), written by (name of scribe)'.

Progress Notes should be:

- Written in black ink (**pen**), NOT pencil
- Writing must be **clear** and legible
- Use clear simple language
- Clearly identify any words the client has expressed with quotation marks
- Include details of observations or information provided by the client, carer or other people
- Detail any decision made, proposed action or action taken and/or outcomes of any action taken
- **Date** each entry, including the time if this is appropriate



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- Ensure you are writing in the **correct file**, the client's name must be at the top of each page
- Any errors are to be crossed out using a single line drawn through the middle of the word/s, write the word '**error**' and initial it. Whiteout is never to be used
- Leave no lines or spaces between words to prevent anyone else from adding to the entry, at the end of the last sentence, draw a line to the end of the line

- Include the name and signature of the staff member making the note.

Do NOT Include:

- Opinions or personal comments
- Comments that cannot be supported/verified
- Slang or clichés (must be in English) or abbreviations that are not common use
- Irrelevant details e.g. discussion that has no direct relevance to the incident or issue.

NOTE: Remember that clients or their representative have the right to read what has been written in their Care Plan.

CONFIDENTIALITY

- All documents are to be respected as confidential information. No client files, or related progress notes, are to be left in publicly accessible areas or where non-relevant staff have access.
- All sensitive documentation shall be securely stored at the completion of each working day and during the day as appropriate.
- Clients or their identified representative may access their own personal files within seven days of their request.
- Where confidential information is stored on a computer, the computer must be password protected.

RELEVANT STANDARDS AND LEGISLATION

Information Act 2009

Aged Care Act 1997

Records Principles 2014

Charter of Aged Care Rights

Aged Care Standards, specifically **Standards 1, 2, 3, 4 and 8**

CHSP Programme Manual

Home Care Packages Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

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Regional Council

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

Review Triggers

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C14	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

CLIENT SERVICE PROVISION POLICY

RATIONALE AND DEFINITION

All services provided to clients of aged or disability supports should be provided in a way that is physically, emotionally and culturally safe, and by staff with the appropriate skills, competency and qualifications.

To provide quality care the care planner and support staff need to understand the whole person, not just their physical requirements.

Assessment and Care Planning must also recognise the goals and aspirations of the individual. These should be acknowledged, documented and where appropriate incorporated into the support plan.

CLIENT

The term '*client*' infers any aged care client, resident, consumer or disability participant.

MANAGEMENT

In all policies and related procedures, the term 'Management' refers to the Aged Care Manager and may also include other personnel from the Executive and/or Management Team.

ORGANISATION STATEMENT

Blackall Tambo Regional Council Tambo Multi Purpose Centre has a culture of inclusion and respect for clients and associated stakeholders and provides culturally appropriate, safe care.

Initial and ongoing assessment and planning for care and services is done in partnership with the client (and where applicable, their nominated representative) and has a focus on optimising health and well-being, recognising what is important to the client as well as their needs, goals and preferences.

Our staff and management are appropriately trained and supported to identify risks to ensure care and support is provided in a safe and responsive way.

Documentation, processes and practices are appropriate, sufficient and reflect current Industry standards, supporting safe and effective care delivery.

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Blackall-Tambo **Regional Council**

Privacy, confidentiality and dignity in care is an expectation within the organisation and will be upheld by all staff, volunteers and management.

RESPONSIBILITIES

Executive Management

- Promote a culture of safe, inclusive and quality care and services and is accountable for their delivery.

Management

- Ensure that processes and practices are in place to support culturally appropriate, safe and effective care services and supports for all clients.

Staff

- Provide safe, caring and respectful services and support to clients, and work within defined limits of their job role and direction from the management team.

APPROACH

Safe, Inclusive and Culturally Appropriate Support

All assessment, planning and service delivery must consider and recognise the individuality of the consumer including their preferences, cultural background, social history and family supports.

Services are to be delivered in a way that reflects and upholds cultural safety for that individual.

The organisation will actively manage risk for staff and the consumers we support, in balance with supporting consumer choice and independence and dignity of risk.

All information regarding fees will be appropriately communicated with consumers (and their nominated representative where identified), they will be transparent and in line with regulatory requirements.

Documentation will be managed in line with privacy legislation and accountable record keeping practices.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Records Principles 2014

Quality of Care Principles 2014

User Rights Principles 2014

Accountability Principles 2014

Privacy Act 1988 (Cth)

Charter of Aged Care Rights

Aged Care Quality Standards (All standards)



Blackall-Tambo **Regional Council**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

NATSIFAC Programme Guidelines

Commonwealth Department Aged Care

Aged Care Funding Instrument

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (Quality and Safeguarding Framework)

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C15	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

DEATH AND FUNERALS

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre acknowledges the right of an individual to live out their life in the place of their choosing, including the right to palliate at home and on country.

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the deceased client's right to be treated with dignity and respect. Cultural protocols will be followed, where possible, to enable family and community members to demonstrate respect for the deceased person according to local tradition.

Blackall Tambo Regional Council, Tambo Multipurpose Centre acknowledges and recognises that staff working in the sector are likely to experience the death of a client during the time they are working in the Industry. Blackall Tambo Regional Council, Tambo Multipurpose Centre will provide support, including access to counselling services where required and allow staff the opportunity to attend funerals where appropriate.

Blackall Tambo Regional Council, Tambo Multipurpose Centre does not participate in the arrangement of funerals; however, the service may assist by referring families to relevant support organisations.

RESPONSIBILITIES

Executive Management

- Ensure that staff are equipped with relevant information to support understanding of the cultural protocols when a death occurs.
- Minimise risk to the organisation by seeking legal counsel or guidance for reportable deaths and the processes for management and staff to follow in complex incidents.
- Provide access to counselling services for staff affected by the death of a client.
- Provide clear direction to staff on the appropriate response to the death of a client.

Manager

- Contact relevant authority in the first instance where a death has occurred on site.



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- Alert management to any reportable or unexpected death as soon as practical.
- Alert management to any expected death in a timely manner.
- Assist support staff to access counselling services as required.
- Follow community/cultural protocols around death and funerals, ensuring that essential services to vulnerable clients are maintained.
- Refer families to support agencies for assistance with funeral arrangements as required.

SUPPORT WORKER

- Inform the Manager of any client deaths as soon as practical.
- Follow organisation procedure in the event of a client death.

PROCEDURES

Where a client dies whilst at the service centre or during a service visit to the client's home, the relevant staff member is to contact the Ambulance or Police in the first instance and report to the Manager as soon as practical.

Staff must not move the body of a deceased client.

In non-urgent cases the staff member should notify the Manager in the first instance. The Manager will contact the relevant emergency service, e.g. Ambulance or Police.

All Aged & Disability staff should be aware of, sensitive to and respectful of local cultural traditions surrounding death and grieving and provide support as appropriate.

NOTIFYING THE NEXT OF KIN AND OTHER RELEVANT PEOPLE

The Coordinator/Registered Nurse will notify the clients' family.

The Coordinator/Register Nurse will seek support from relevant people e.g. local staff for guidance and cultural advice on appropriate actions, like who else should be told and whose place it is to pass that news on.

The Manager will also:

- Report the death to management; stating where the death happened and any relevant details.
- Help other staff who are upset by the client's death.
- Follow community protocols regarding the death of a client.
- Make sure any paperwork is placed on the clients file.
- Complete Progress Notes entries.
- Complete an incident report form if the client passes away at the service centre.
- Assist Police by answering any questions regarding the client.

REPORTABLE DEATH

A reportable death is one that must be reported under legislation.



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If the client has died in their home and the staff member is the first one to find the body during a home visit, they should follow the procedures as above regarding advising the Manager who will contact the Ambulance and Police immediately.

UNEXPECTED DEATH / SERIOUS INCIDENT

If the death involves circumstances that are out of the ordinary, then it may constitute a serious incident, for example:

- The death occurred in unusual circumstances.
- A client dies and the standard of services provided may have been a contributing factor.
- The death has an obvious correlation to the services the person was receiving.
- The death is reportable by law.

If a serious incident does occur as a result of, or during, the delivery of services by staff or contracted provider, the service must immediately notify the relevant Commonwealth Department in writing of the incident, including any details.

REQUEST FOR CLIENT RECORD / STATEMENT TO POLICE

In the instance of a reportable death or unexpected death it is likely that material relevant to the inquiry into the death will be requested by the courts.

The Coroner or persons assisting the Coroner may access any material relevant to the enquiry.

Staff must IMMEDIATELY notify management if a request for client records by the Police or Coroner's Office has been made. A copy of the formal notice authorising such release must be placed on the relevant client record.

Prior to releasing the original record to the Police, the client file must be photocopied, and the copy retained in the service centre.

Staff who are asked to make Police statements for any reason should advise their Team Leader prior to making such a statement.

Management will arrange legal advice if required.

DOCUMENTATION OF CLIENT DEATH

The date of the client's passing and any relevant details should be noted on the client file and management informed so that relevant administrative processes can be completed.

Where a death was not expected the Manager and other relevant staff must record the facts of death in the client's record, e.g. date, time, location and action taken. The record should include details regarding any discussions with the family, Health Service and Police. The note should also state that the death has been reported: by whom, to whom and the time and date of the report.

If a staff member is the first person to discover that a client has died, they must include objective notes of the scene and circumstances surrounding the death on the client's record.



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A copy of reports and other documentation must be provided to Executive Management who will report to other agencies, and maintain the client record as per organisational documentation, information and archiving policies.

FUNERALS

- The Blackall Tambo Regional Council, Tambo Multipurpose Centre does not arrange funerals for clients but will refer family members and carers to organisations who may be able to assist where required.
- The Service will continue to function, unless it must close for cultural reasons. High care and 'at risk' clients must receive essential care where possible.
- The service cannot be closed without permission from Executive Management.

VEHICLE SUPPORT ON THE DAY OF THE FUNERAL

Any request to use organisation vehicles must be approved by Management.

Clients and family members of the deceased client may be assisted to the funeral, where held locally, with the following limitations:

- Wheelchair or frail clients who wish to attend the funeral may need to be transported to the service or funeral site and have priority over other able-bodied clients.
- Transport to funerals outside of the community area may not be supported, especially where this may impact on the delivery of core services.
- Blackall Tambo Regional Council, Tambo Multipurpose Centre vehicles cannot be used for the transportation of the body.

RELATED LINKS AND REFERENCES

What to do when someone dies Centrelink:
<https://www.humanservices.gov.au/customer/subjects/what-do-following-death>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Work Health and Safety Act 2011

Powers of Attorney Act 1998 (Queensland)

Births Deaths and Marriages Registration Act 2003 (Queensland)

Aged Care Standards, specifically **Standards 1, 2 and 8**

Duty of Care Principles

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

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Blackall-Tambo

Regional Council

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

REVIEW TRIGGERS

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VARIATIONS

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Regional Council

Tambo Multipurpose Centre Policy

Policy Number: MPC-C16	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

DISCHARGE PLANNING AND RETURN TO HOME CARE

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that where a client has been in hospital for medical treatment, or residential care on respite for an extended period of time, this may have resulted in changes in the client's level of functioning and care and support needs.

To ensure that the client receives the correct services and level of support to allow them to return home safely, the organisation will liaise with discharge planners and other health professionals on the client care needs and amendment of any existing care plans.

Blackall Tambo Regional Council, Tambo Multipurpose Centre will also make the referring agency aware of the level of care and supports that can be provided by the service and, for a Home Care Package consumer, any budgetary constraints relating to their existing package funds.

Where clients are eligible, their additional care supports may be funded by the Transition Care Program.

The organisation will liaise with identified support organisations to avoid overlap of services.

RESPONSIBILITIES

Executive Management

- Ensure relevant agencies are aware of return to home protocols for vulnerable clients.

Manager

- Liaise with relevant stakeholders to ensure a safe transition for vulnerable clients returning from hospital or extended respite.
- Amend care plans to reflect any additional assessed needs of the client on their return home.
- Provide additional monitoring and support as required once the person has returned home.

Procedures

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- A case conference is set up between discharge planners (where involved) and other stakeholders, i.e. health professionals, the client's family and the Manager.
- All identified support needs are discussed and services that the organisation and other support agencies can provide are confirmed.

The Aged Care Manager or delegated staff will:

- Assess levels of staffing and family support, prior to the client returning home.
- Inform the discharge planner of any identified limitations and the services available or not available in the community service context; and
- Raise any concerns regarding the level of support that can be provided by the organisation or the person's family, to discharge planners and other people and organisations involved in the return to home process.
- In conjunction with relevant community-based services, e.g. health clinic, allied health, respite service, the Co-ordinator/Registered nurse may need to develop an interim care plan for the client.
- The Coordinator/Registered Nurse will liaise with the Discharge Planners or respite service regarding a suitable time for the client to return home, considering the person's support needs, staff availability and family supports at the time of return.

RELATED LINKS AND REFERENCES

Transition Care <http://www.myagedcare.gov.au/after-hospital-care-transition-care>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Privacy Act 1988

Aged Care Standards, specifically **Standards 2, 3 and 4**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Blackall-Tambo **Regional Council**

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C17	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

ELIGIBILITY, ACCESS AND WAITING LISTS

POSITION STATEMENT

Access to aged care services requires all clients to undergo an **assessment of their needs**.

Eligibility to Aged and Disability services and supports is determined by the program criteria and national intake process.

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises its responsibility to manage wait lists where funding is limited to maintain financial viability.

Blackall Tambo Regional Council, Tambo Multipurpose Centre supports the provision of care and support services to the frail aged and people with a disability and their carers living in Tambo and surrounding areas recognising the need to provide access to services in a non-discriminatory manner. To achieve this, the organisation will:

- Accept referrals where we can provide adequate support and services based on the assessed need.
- Provide service and supports to clients based on assessed need.
- Allow a client who has previously declined or left a service the opportunity to reapply for services without discrimination.
- Promote the program and its services to target clientele in a culturally appropriate manner.
- Acknowledge and apply the Commonwealth Government's Aged Care Diversity Framework plan for Older Aboriginal and Torres Strait Islander people, and other diversity plans where applicable.

RESPONSIBILITIES

Executive Management

- Develop service budgets and monitor the expenditure of block funded programs.
- Monitor compliance against the organisation's Diversity Plan for Older Aboriginal and Torres Strait Islander people and other diversity plans as required.



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- Develop and disseminate promotional material to services, that describes the supports the Aged & Disability program can offer to clients.

Manager

- Accept referrals and respond to referrals within designated time frame.
- Conduct intake assessments using internal forms and protocols.
- Develop care plans and service delivery programs for clients based on assessed need.
- Review identified clients against eligibility and priority processes where a wait list is required.
- Promote the Aged & Disability Program to target clientele and their families.
- Evaluate and prioritise clients where funding shortfalls are advised.
- Maintain wait-list register as required.

PROCEDURES

Waiting Lists

Blackall Tambo Regional Council, Tambo Multi Purpose Centre recognises there may be a need to wait-list new clients who are assessed as requiring care services, or for existing clients requiring an extension to their services under the Commonwealth Home Support Programme due to funding limitations. Where this occurs, we will use the following criteria to determine the relative need of individuals:

- Risk of abuse, including neglect
- Current supports available to the person
- The risk of deterioration in their health if they are not provided with assistance
- Access to cooking and cleaning facilities
- Carer stress level.

Other considerations include:

- The difference the service will make to the client's circumstances; and
- The capacity of the organisation to provide the service.

Management of Wait-Listing

- In the event of insufficient resources being available for clients as assessed by My Aged Care (RAS assessment), a 'Wait-List' register will be instigated.
- The wait-list, and clients on the list, will be reviewed at regular intervals and clients will be re-prioritised according to their level of need and risk.
- Once resources become available clients placed on the wait-list will be offered services according to their priority listing.
- Clients placed on wait-lists will be informed of how the wait-list works. **Length of time on a wait-list does not determine priority.**



Blackall-Tambo **Regional Council**

RELATED LINKS AND REFERENCES

Aged Care Diversity Framework <https://agedcare.health.gov.au/support-services/people-from-diverse-backgrounds/aged-care-diversity-framework-resources>

NDIS - <http://www.ndis.gov.au/>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Charter of Aged Care Rights

Aged Care Standards, specifically **Standard 2**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

REVIEW TRIGGERS

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VARIATIONS

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C18	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

EMOTIONAL, SPIRITUAL AND PSYCHOLOGICAL WELLBEING

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the diversity of faiths, beliefs and traditions that people accessing supports through the Commonwealth Home Support Program and the National Disability Insurance Scheme seek to uphold the right of people to express their spirituality in a way that is meaningful for them.

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that participation by individuals in activities that provide meaning and satisfaction can affect an individual's quality of life and helps support the achievement of emotional wellbeing and health goals.

Blackall Tambo Regional Council, Tambo Multipurpose Centre acknowledges the importance of connection with culture for clients and will assist, where possible, the client to continue to participate in cultural activities. Additionally, the organisation acknowledges the need to provide supports to individuals accessing services in a culturally safe manner and will seek to uphold cultural safety as a key aspect of providing quality care and support.

In recognition of the cultural and spiritual needs of clients the organisation will:

- Employ support workers who understand the cultural and spiritual obligations of clients and, where possible, speak their language.
- Provide opportunity for non-indigenous, non-local care staff to undertake cultural awareness training.
- Provide information and local support to care staff sourced from outside the community to assist in minimising any cross-cultural misunderstandings.
- Provide activities that have cultural significance to the client, or link to external agencies who can help the client to attend cultural activities.
- Encourage clients to engage in cultural or religious activities as much as they can and wish to.
- Recognise the importance to some clients of alternative health and healing methods.
- Ensure menus take into consideration the cultural tastes and preferences of clients.

RESPONSIBILITIES

Executive Management



Blackall-Tambo **Regional Council**

- Ensure staff are aware of and trained in the delivery of care and supports in a way that supports their emotional, spiritual, and psychological wellbeing.

Manager

- During assessment and care planning ensure clients have the opportunity to discuss activities that support their personal emotional, spiritual and psychological wellbeing.
- Identify, as much as possible, a client's history and past activities to gain insight into cultural and historical impacts on the person.
- Support clients to access activities of interest including spiritual and cultural events, and document preferences in care and support plans.

Support Workers

- Assist clients to attend activities and events that support their emotional, spiritual and psychological wellbeing in a culturally safe manner.

PROCEDURES

The service will assist clients to participate in activities of choice by:

- Discussing what activities bring the client joy and give their life meaning, including things they would like to do that they can't at the moment due to some limitation and investigating ways that allow the client to participate in activities of choice.
- Encouraging family and friends to continue to involve their relative in cultural or leisure activities, providing support where resources are available.
- Planning centre-based and other activities in consultation with clients and staff members.
- Ensuring all clients are made aware of upcoming planned activities.
- Encouraging clients to participate in self-initiated interests and activities, as well as activities offered by other agencies outside of Community Services.
- Supporting clients with special needs, for example dementia, intellectual disabilities and physical limitations, to participate in areas of interest and activities.

RELATED LINKS AND REFERENCES

National Guidelines for Spiritual Care in Aged Care <https://meaningfulageing.org.au/wp-content/uploads/2016/08/National-Guidelines-for-Spiritual-Care-in-Aged-Care-DIGITAL.pdf>

Aged Care Diversity Framework Action Plans <https://agedcare.health.gov.au/support-services/people-from-diverse-backgrounds/aged-care-diversity-framework-action-plans>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Racial Discrimination Act 1975

Charter of Aged Care Rights

Aged Care Standards, specifically **Standards 1, 2, 4 and 8**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

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Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C19	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

MISSING CLIENTS AND VERIFYING ABSENCES

POSITION STATEMENT

Blackall Tambo regional Council, Tambo Multipurpose Centre whilst recognising the need for independence and participation by clients in cultural and family activities, acknowledges a **duty of care** to determine, as far as possible, the whereabouts of clients where there has been no prior information provided to the staff about their absence, and where there are reasonable grounds for concern over the client’s location, or where the client has behaviours which may place them at risk.

RESPONSIBILITIES

Executive Management

- Support community-based staff in locating absent clients, escalating to the Police where there are reasonable grounds for concern about the client’s whereabouts.

Manager

- Ensure care plans and other relevant documentation include information and alerts where clients have a diagnosis of dementia or other condition that may result in risky behaviours.
- Escalate concerns to management or the relevant authority where there are reasonable grounds for concerns about the client’s whereabouts.
- Ensure all documentation is kept up to date in individual emergency response plans.

Support Workers

- Make enquiries and ascertain the whereabouts of clients who appear to be absent from their home **and** where no prior arrangements/ advice has been provided.
- Contact family and neighbours, or other identified contact person, if an ‘at risk’ client is not home or does not turn up to a planned activity, ensuring this information is passed on to the Manager where the client cannot be located.

PROCEDURES



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Clients with Dementia or other special needs that may result in wandering or risky behaviours will have this noted in their care plan and other relevant documentation.

Where a client appears to be absent (*staff have not sighted the client for the day, the client has not responded to a planned service or activity or the meal delivery staff/volunteers or family have expressed concern about their whereabouts*) the following procedure shall be followed:

- Staff will ask relatives and neighbours, or other identified contact person, about where the person was last seen and where the person should currently be.
- Staff **MUST** also notify the relevant person in your organisation if they have concerns about the location of the client.
- If the relevant person in your organisation is **unable** to confirm the whereabouts of the client this information **MUST** be passed on to the relevant person in your organisation or their appointed delegate.
- The relevant person in your organisation will **contact the Police** if the client cannot be located and there are reasons for concern about the client.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Duty of Care principles

Aged Care Standards, specifically **Standards 2 and 8**

Charter of Aged Care Rights

Privacy Act 1988 (Cth)

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Commonwealth)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C20	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

PALLIATIVE CARE AND ADVANCED CARE PLANS

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre acknowledges the right of individuals to choose to palliate and die, in their own home.

Blackall Tambo Regional Council, Tambo Multipurpose Centre additionally recognises that clients may choose to participate in advanced care planning and/or to develop an End of Life plan. Staff from Blackall Tambo Regional Council, Tambo Multipurpose Centre will work with health professionals to support an individual and their family where resources are available and within scope.

While the Blackall Tambo Regional Council, Tambo Multipurpose Centre **does not** specifically employ qualified, palliative care nursing staff under its Community Services program, the organisation aims to provide supports at the level the client requires, within the constraints of resources including staffing.

Blackall Tambo Regional Council, Tambo Multipurpose Centre may assist with nursing care where the service has a nurse employed or brokered, to provide nursing care where funding is available, and this service is required.

RESPONSIBILITIES

Executive Management

- Liaise with hospital discharge planners and the Palliative Care team to ensure they are aware of the scope of service provision on individual communities for palliative clients returning home.
- Ensure that the service has staff with relevant qualifications and training, or brokered arrangements, in place prior to providing specific palliative care services.

Manager

- Ensure clients, their families and carers, staff and community health professionals are aware of the scope and limitations of service to a client receiving palliative care.
- Develop and/or contribute to a care plan to meet the needs of the client and their family.
- Advise the family and health professionals where a client's care needs exceed that which can be provided by the service.



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- Provide assistance to health professionals to gather information that will inform the development of an appropriate advance care/end of life plan where the need is identified.
- Provide support to staff assisting a client who is palliating during the time the client is receiving services from the organisation.
- Assist in the consultation and ongoing review of any advance care plans.
- Respond to requests for amendments and changes in the client care plan.
- Undertake any relevant training in palliative care and advance care planning.

Support Workers

- Provide home care and personal care services to an individual receiving palliative care according to the care plan and as directed by the Coordinator.
- Follow identified client advance care plans and provide regular feedback to the Coordinator regarding client status, family concerns, need for review etc.
- Attend any palliative care training as arranged by management.

NOTE: Additional services such as extended nursing care and medication management are to be provided by identified service providers and personnel qualified to perform that role.

PROCEDURES

Where an individual has been assessed by health professionals as requiring palliative care:

- A case conference is set up between discharge planners (where involved), Palliative Care team, other health professionals, Registered Nurse and the client's family. All identified service needs and concerns are discussed and services that the program can provide are confirmed.
- The Registered Nurse will assess levels of staffing and community support prior to the client moving back home where they are being discharged from hospital, nursing home or hospice and will liaise with stakeholders on logistic, transport or safety issues.
- The Registered Nurse will inform the discharge planner of limitations and related access issues in relation to other health professionals and services available or not available in the community.

Where an individual, their carer and/or family request support and/or input for development of an Advance Care Plan:

- Clients and/or their family may be directed to an external agency where appropriate.
- The level of support and services that the organisation can potentially provide are discussed with reference to the funding level currently available to the client.
- Possible options and actions such as transfer to residential aged care home, hospice or hospital facility, should the client's care needs no longer be able to be met by family, carers, local health services and the organisation, will also be discussed and documented.

RELATED LINKS AND REFERENCES

National Palliative Care Strategy 2010

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Blackall-Tambo **Regional Council**

<http://www.health.gov.au/palliativecare>

Palliative Care Australia: www.palliativecare.org.au

<http://palliativecareqld.org.au/>

PalAssist Phone: **1800 772 273**

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Aged Care Standards, specifically **Standards 1,2, 3, 4, 7 and 8**

Charter of Aged Care Rights

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C21	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

PHYSICAL AND CULTURAL ENVIRONMENT

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre seeks to ensure the physical, cultural and emotional safety of all clients accessing services and support through the Community Service programs.

All delivery sites and related assets for Community Services programs will be regularly audited, and physical safety issues identified will be addressed in a timely manner to ensure the safety of clients and staff.

Client assessment will include the identification of issues that might impact on the safety of the client or staff. This will include assessments of the physical requirements of the person such as identification of falls risks as well as assessing the impact of the service environment on the individual.

The organisation recognises the definition of cultural safety outlined by Williams (1999):

“An environment that is spiritually, socially and emotionally safe, as well as physically safe for people; where there is no assault, challenge or denial of their identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience of learning together”

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that it is the client who determines the cultural safety of a service and seeks to ensure that services are provided in a culturally appropriate manner, adequately addressing issues that support the safety and the wellbeing of clients.

To support the delivery of culturally safe services Blackall Tambo Regional Council, Tambo Multipurpose Centre will ensure externally recruited staff have undergone a community orientation and have an appropriate understanding of the cultural context the program works within.

Blackall Tambo Regional Council, Tambo Multipurpose Centre also recognises the principles under the *Aged Care Act 1997*, regarding 'Physical Environment and Safe Systems' (*Aged Care Act 1997*, schedule 3, part 3) and seeks to address these through the application of care policy and procedures.

RESPONSIBILITIES

Executive Management

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- Provide orientation and access to ongoing training programs for all staff on safe working practices, including cultural safety where indicated.
- Provide service and community context orientation for all externally recruited staff to the program/s.
- Provide policy and procedures, staff training and other resources to support a safe working environment.
- Monitor the audit of physical environment and assets used in the delivery of supports and activities.
- Escalate to the relevant department within the organisation where assets require significant or essential modifications to support a safe and accessible service.
- Ensure all buildings remain compliant against legislated standards e.g. Environmental Health standards, Fire Safety standards etc.

Manager

- Take all reasonable steps to maintain the safety and security of the service centre
- Escalate issues that impact on the safety of clients and staff to management as required.
- Ensure that rooms which clients use are appropriately furnished and arranged to minimise discomfort or risk of injury to clients.
- Comply with fire and smoke detection devices requirements for the service centre.
- Implement appropriate evacuation procedure training and ensure that staff and clients understand them.
- Promote a work environment that is physically, spiritually, socially and emotionally safe for all clients and staff.
- Ensure that the preparation, handling and storage of food are in line with current health standards and follow the organisation's Food Safety Plan.
- Contribute to continuous quality improvement activities, which enhance Policy and related service provision to clients.
- Monitor and review client assessment and care plans to ensure that plans consider environment and mobility issues for clients as part of risk assessment and related falls injury prevention.

Support Workers

- Adhere to organisational policy and respond appropriately to situations as they arise.
- Contribute to client care planning and review, providing relevant cultural insight where required.
- Contribute to a work environment that is physically, spiritually, socially and emotionally safe for all clients and other staff.
- Where an incident or event occurs, which is not adequately addressed by specified procedure, or is related to the environment - inform management so that further action can be taken, and improvements made to address the issue as part of continuous quality improvement.



PROCEDURES

- Assess, monitor and inform measures to address identified risks regarding physical environment and related systems.
- Ensure identified training and support for staff, that promotes understanding, and implementation, of core risk assessment and risk management processes related to physical environment and safe systems.
- Refer clients assessed as having a high risk falls profile to My Aged Care or appropriate Health Professional for a Falls Risk assessment.
- Complete physical and safety audits according to audit schedule and escalate any concerns in a timely manner.

RELATED LINKS AND REFERENCES

Further information on Falls Prevention: <http://www.myagedcare.gov.au/healthy-and-active-living/falls-prevention>

Williams, R. (1999). Cultural safety – what does it mean for our work practice? Australian and New Zealand Journal of Public Health, 23(2), 213-214.

Organisational Workplace Health & Safety policies and procedures

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Charter of Aged Care Rights

Aged Care Standards, **specifically 5 and 8**

Work Health and Safety Act 2011 Queensland

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Blackall-Tambo **Regional Council**

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C22	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

PRIVACY, CONFIDENTIALITY AND DIGNITY OF CARE

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the ethical principle of respect for a person's independence; and that aged, and disability staff and volunteers have an obligation to respect a person's privacy.

Blackall Tambo Regional Council, Tambo Multipurpose Centre additionally recognises the responsibility of providing care with dignity and respect. Acknowledging that to treat someone with dignity and respect includes showing consideration toward, and appreciation of, the person as an individual and recognising what is important to them.

To achieve these responsibilities, the following steps will be followed:

- Clients, or their authorised representatives, will be informed of their right to access their personal information held by the organisation.
- All assessment and information gathered for the purpose of providing a service to a client will be conducted in private as far as this is possible.
- Staff will be provided with sufficient client information to enable them to perform their duties safely and professionally; all information will be on a need-to-know basis.
- All staff will be informed of the need to maintain confidentiality in their orientation and regularly reminded of this requirement.
- Any information shared with health professionals and other organisations will be with the client's consent and on a need-to-know basis.
- All information of a confidential nature will be kept in a lockable (filing) cabinet in the relevant location in your centre.
- All computers containing sensitive client and organisational information will be password protected.
- All documents and notes containing personal or sensitive information will be shredded prior to disposal or archived appropriately.
- Staff will receive training in the rights of clients including the right to have their culture, religious practices and beliefs observed and respected at all times.



Blackall-Tambo **Regional Council**

EXEMPTIONS FROM OBLIGATIONS OF CONFIDENTIALITY

The service recognises there are instances where maintaining confidentiality may increase the risk of harm to the client or another individual who interacts with the client; or a client may be engaged in an activity that is deemed illegal by Federal or State/ Territory laws.

The service reserves the right to pass on information to a relevant person or authority in the following circumstances:

- The disclosure is compulsory under the law.
- The interests of the client require disclosure.
- There is a duty to the general public to disclose the information.
- The client consents to the information being disclosed.

Staff should exercise caution when deciding whether an issue is reportable or not and seek guidance from their supervisor as required.

RESPONSIBILITIES

Executive Management

- Ensure that service sites/staff have the tools and equipment in place to adequately protect the privacy of client information.
- Investigate and escalate any information that comes to the attention of staff where a client or other person may be at risk, to the appropriate authority.

Manager

- Gather and store client information in such a way as to protect client privacy.
- Promote an atmosphere of respect towards all clients regardless of their background or standing within the community.
- Ensure all staff understand privacy, confidentiality and dignity of care principles, and how these apply to the supports they deliver.
- Escalate to management any issues that come to the attention of staff where a client or another person may be at risk or which may be illegal.

Support Workers

- Treat all clients as individuals, providing care and support in a way that respects the privacy and dignity of a client.
- Where clients share personal information this must remain confidential, except where there is an obligation on the staff member to report to management.
- Show respect to all clients regardless of their background or standing in the community.
- Refer all requests for information, including client information, service delivery information or issues to the Manager.
- Escalate any concerns regarding the wellbeing and safety of a client or others to the Manager as soon as practical.
- Escalate any concerns regarding illegal activities to the Manager as soon as practical.



PROCEDURES

- All sensitive client information is to be stored appropriately e.g. in a locked file cabinet or password protected computer.
- Where staff work out of the service centre and carry written client information such as a daily client plan or service activity plan with them, this information must be secured appropriately.
- Any accidental loss of personal information or breach of sensitive information must be reported to management as soon as the loss or breach is known.
- Private issues should never be discussed with a client in a public place, except where they have asked you to.
- Discussions about clients in the workplace should focus on how to best meet the needs of the client.
- Independence in activities should be promoted with clients at all times, with staff facilitating clients to do things for themselves where ever possible.
- Always call out or knock before entering a client's home or room.
- Always use the client's preferred name; never use the words 'love' or 'dear' or other language that could be viewed as patronising, insulting or demeaning by the client.
- Allow the client their own personal space; don't crowd them.
- When providing personal care tasks, this should be done in private and with sensitivity towards the client.
- Provide opportunity for clients to express their cultural or spiritual beliefs without judgement.
- Help clients to maintain dignity in areas of personal care.
- Ensure security of all written or electronic information relating to a client or their carer that is in your possession.
- Escalate any concerns regarding the wellbeing and safety of a client or others to the Coordinator as soon as practical.
- Escalate any concerns regarding illegal activities that you become aware of as soon as practical.

RELATED LINKS AND REFERENCES

Client Rights

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Aged Care Standards

Charter of Aged Care Rights

Privacy Act 1988 (Cth)



Blackall-Tambo **Regional Council**

Right to Information Act 2009 Queensland

Aged Care Standards, specifically **Standards 1,4, 7 and 8**

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C23	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

REFERRAL, RESPITE AND BROKERAGE

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that community-based care services are designed to assist a person to remain living in their own home within the community. However, there are occasions when the organisation is unable to meet all the needs of a client due to lack of funding, or because the service is not provided by this organisation.

Where the organisation is unable to provide all the supports identified or requested by a client and their family, the organisation will refer the individual with their permission, to My Aged Care, another aged care provider, the health service, a care specialist, or other provider of services.

Where a **Home Care Package** client moves out of the organisation's service area but chooses to have the organisation continue to manage their Package, the organisation will negotiate services and supports on behalf of the client and establish brokerage arrangements.

Blackall Tambo Regional Council, Tambo Multipurpose Centre also recognises they may be requested to provide support to visitors to the service under a brokerage arrangement and where possible will provide requested supports.

FAMILY CARERS

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the contribution of family carers in supporting clients to continue living independently in their own homes. They recognise that carers are individuals with their own needs and that some carers have complex health issues, are elderly or are young carers with specific requirements and needs.

The organisation will assist clients and family carers to access respite services by:

- Referring carers to carer support services.
- Acting as a conduit of information between clients and their families and residential respite facilities or day centres.
- Referring clients for respite eligibility assessment and approval.

RESPONSIBILITIES



Executive Management

- Negotiate brokerage agreements with external providers and agencies on behalf of clients and visitors to the community.
- Invoice external agencies to recoup cost of delivering brokered services according to brokerage agreements.

Manager

- Consult with clients/families on referral initiation.
- Complete My Aged Care referrals for assessment and approval where required.
- Complete respite referral forms and forward to appropriate person/organisation.
- Consult with other service providers within the community who share care responsibility of the client to minimise doubling up on referrals (e.g. Clinic).
- Assist clients and carers to access residential respite where required.
- Accept and manage referrals from other organisations on behalf of incoming brokered clients, ensuring a brokerage arrangement is in place prior to commencing services.
- Forward statistics on services delivered to visitors to the relevant organisation according to brokerage arrangements.

PROCEDURES

External referral procedure

Where a client is moving temporarily to a location where there are aged care services delivered by a different provider, the following procedure shall be followed:

- The Manager should determine, as far as possible, whether the move will be short-term (less than eight weeks) or long-term (greater than 8-12 weeks).
- The Manager will contact the relevant brokerage organisation and determine servicing availability and associated costs.
- Where costs exceed the allocated funding in the client budget, the client and their family will be informed of these, and payment and services negotiated.
- Where the client has a Home Care Package, support will be negotiated according to the person's agreed care plan and budget. Information will be provided to the client where brokered costs exceed that identified in their budget.
- Where the client is on a package, adjustments may need to be made to the client's budget on return.

SHORT TERM REFERRALS

- A referral form, with sufficient and relevant information on the client and services required, will be completed and forwarded to the brokerage organisation.
- Where the move is short-term, the Service will continue to deduct client fees and reimburse the brokerage organisation for care services provided.



LONG TERM REFERRALS / CHANGE OF SERVICE PROVIDER

- Where the move or request is likely to be long-term the Manager will discuss options for a long-term referral (and related charges against their package) or transferring their package to a new provider.
- Where the client chooses to transfer to another provider the organisation will follow the relevant processes according to program requirements.
- A permanent move will trigger a reassessment of the person by My Aged Care assessors, the client can be assisted to access My Aged Care prior to their move, or this may need to be carried out by the new provider.
- Where the client does not have an existing My Aged Care profile the organisation will provide a summary of client information and support services to the new provider to help support continuity of care. The person will be referred to My Aged Care to receive services at the new location.

TAKING LEAVE FROM SERVICES

Where a client goes to Hospital, residential respite care, or temporarily leaves the service area, they have a responsibility to advise the provider of the absence to allow appropriate provisions to be made, and/or services and fees suspended.

Where a client is on leave, fees may still be charged against a client's Home Care Package where services continue in their absence e.g. package management, case management. Direct service charges may also continue where a person requires continuation of or commencement of services, e.g. yard maintenance, feeding animals etc.

REFERRAL WHERE A CLIENT REQUIRES ADDITIONAL SERVICES

- Where a CHSP client requires an additional service type e.g. they are receiving meals but now require laundry and transport, a referral must be made to My Aged Care for a Regional Assessment Service (RAS) review.
- Where a HCP client requires additional services that are unable to be supported within their current budget, a referral should be made to My Aged Care for an Aged Care Assessment Team (ACAT) review for a higher level package, or for a specialist review, e.g. gerontologist.

INCOMING REFERRALS

- All visitors seeking services from the organisation must have a referral from their home service site which outlines requested supports and agreed payments.

RESPITE

- Clients requiring respite will be referred to My Aged Care for assessment and approval for residential respite.
- The service will assist with all requests for respite which can be emergency or planned. Staff will assist family carers to access respite as required.
- Where there is capacity the service will assist clients with transport to the respite centre or assist the family to access support to transport the client.

RELATED LINKS AND REFERENCES



My Aged Care – Make a Referral <https://www.myagedcare.gov.au/service-providers>

My Aged Care - Respite <https://www.myagedcare.gov.au/respice-care>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Charter of Aged Care Client Rights

Aged Care Standards, specifically **Standards 1, 2, 3 and 4**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C24	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

SCOPE OF PRACTICE AND SUPPORT LIMITATIONS

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that it may be unable to meet the assessed needs of all clients due to resource constraints of both the service and the funding available to the client.

To meet the needs of as many clients as possible, the organisation will prioritise services that assist clients to remain living in their homes for as long as possible.

Where the organisation is unable to provide for all the assessed needs required by an individual due to lack of suitably qualified staff and/or limitations in funding, the organisation will explore the following options as relevant to the situation:

- Refer the client to other service providers who are able to provide the identified support.
- Broker required services where the client has a Home Care Package and where the individual has sufficient funds in their package to do so.
- Employ a contracted support worker or health professional with the relevant qualifications to deliver the identified service where the service has the program capacity and funds to do so.
- Arrange transport, or other supports, which allow the client to access the required support where the service has the program capacity and funds to do so.

Service delivery is based on funded program guidelines and contracts, noting that:

- Service provision will reflect an individual's assessed need and goals.
- Service provision to family members and friends is **not** an included service unless this is an assessed need to support a carer arrangement.
- Services can only be provided within the scope of practice of individual staff members.

RESPONSIBILITIES

SCOPE OF PRACTICE – ALL STAFF

- Staff must work within the defined limits of their job role to protect both themselves and their clients. Limits are defined by position description and qualifications.



Blackall-Tambo **Regional Council**

- Where staff have concerns about how they should respond in a certain situation, they are to clarify this with their Coordinator.
- There may be a risk to staff where they step outside the limits of their defined role.

PROCEDURES

- The identified care needs and support services of a client are to be clearly documented in their care plan.
- Where staff believe a client has unmet needs, or there is a change in the person's ability or supports, this must be reported, and the care plan reviewed.
- If staff have any concerns or questions about the information in the care plan, they should consult with the Coordinator.
- Staff should only complete the tasks assigned to them according to the client care plan.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Charter of Aged Care Rights

Aged Care Standards, specifically **Standards 7 and 8**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C25	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

SUPPORTING A PERSON WITH A DISABILITY

POSITION STATEMENT

The Blackall Tambo Regional Council, Tambo Multipurpose Centre acknowledges that the needs of people with a disability and their carers are different to that of aged care consumers and seeks to support people with a disability by:

- Referring, assessing and accepting people with a disability appropriately.
- Following NDIS Support Plans designed to meet the specific needs of the participant and their carer/s.
- Planning activities in consultation with the person or their carer that take into consideration their age, likes and dislikes and limiting factors.
- Encouraging and supporting the person to participate in normal community activities wherever possible.
- Training staff in specific disability support needs where required.
- Supporting the carers of a person with a disability to access respite.
- Providing coordinated supports in a timely manner where the organisation is the Coordinator of Supports for the participant.

RESPONSIBILITIES

Executive Management

- Continue to monitor changing policy and program access under the National Disability Insurance Scheme (NDIS) and noting the impact on service delivery.
- Identify and support the delivery of training opportunities for staff supporting a person with a disability.

Manager

- Encourage attendance at specific disability training by staff, alerting management where a referred service for a participant is unable to be provided due to lack of skills or training.
- Follow NDIS support plans developed for individual participants.
- Develop and offer activities that appeal and are accessible for younger people with a disability where this is a referred service.



Blackall-Tambo Regional Council

- Ensure services offered by the service support the inclusion of the client within the general community.
- Assist carers and participants with referrals for specific supports and services relevant to their needs and their NDIS support plan.
- Assist the carers of people with a disability to access respite where required.

Support Workers

- Promote independence when caring for a client with a disability.
- Support the client to complete independent activities and participate in general community activities.
- Deliver services and supports in a way that demonstrates respect to the person with a disability.

RELATED LINKS AND REFERENCES

National Disability Insurance Scheme (NDIS): <http://www.ndis.gov.au> Ph: 1800 800 110

National Carer Gateway (Carer Support) <https://www.carergateway.gov.au/disability-support-services>

RELEVANT STANDARDS AND LEGISLATION

National Standards for Disability Services <https://www.dss.gov.au/our-responsibilities/disability-and-carers/standards-and-quality-assurance/national-standards-for-disability-services>

Disability Services Commissioner 1800 677 342

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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VARIATIONS

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Blackall-Tambo **Regional Council**

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C26	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

SUPPORTING INDEPENDENCE AND ACTIVITIES

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre notes that promoting independence in clients minimises dependency on support services, strengthens family and community ties for the individual and helps create a sustainable support network for the client.

Blackall Tambo Regional Council, Tambo Multipurpose Centre also recognises that Interests and activities help to provide purpose in life. This can also enhance an individual's quality of life and assist in the achievement of health goals and maintenance of independence.

ACTIVITIES AND INDEPENDENCE

Blackall Tambo Regional Council, Tambo Multipurpose Centre will promote and encourage client activity and independence by:

- Actively involving the client in decision making processes.
- Assessing client mobility and dexterity in activities of daily living and assisting to access relevant aids and equipment that promote independence.
- Supporting clients to maintain adequate nutrition and hydration along with the ability to source and prepare food.
- Encouraging social networks including family and community links.
- Actively supporting clients to maintain activities of daily living.
- Facilitating access to allied health services such as physiotherapy, occupational therapy, and dieticians.
- Encouraging participation in health promoting and social activities.

RESPONSIBILITIES

Executive Management

- Engage appropriate staff and/or volunteers to meet client needs.
- Ensure all staff/volunteers have access to training in the awareness of supporting independence in consumers.
- Facilitate client access to identified aids and equipment that support independence.

Manager

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Blackall-Tambo **Regional Council**

- Work with allied health supports to assess and document the capacity and requirements of a client to support independence.
- Ensure clients and their family understand the benefits of maintaining independence.
- Develop clear care plans that support client goals to maximise independence.
- Monitor staff interactions to ensure that staff do not create dependencies in clients.

Support Workers

- Review care plans, noting the goals of the client and facilitate independence wherever possible.
- Staff involved in assisting clients to access interests and activities should primarily act as facilitators, supporting the client.

PROCEDURES

- All clients will undergo assessment/re-assessment to identify the capacity of the individual to complete activities of daily living.
- Assessment will include identifying aids and equipment that support the client to be independent.
- Referrals will be made to allied health professionals where required.
- Planning of centre-based activities will take into consideration the client group, ensuring accessibility requirements of individual clients are considered.
- Clients will be encouraged to participate in self-initiated interests and activities.
- Support will be provided to clients with special needs, for example dementia, intellectual disabilities and ambulation (walking) to participate in interest and activities.
- All activities will be assessed for risk and plans to mitigate risk as far as possible will be put in place.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Aged Care Standards, specifically **Standards 1, 2, 3, 4, 5 and 8**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Blackall-Tambo **Regional Council**

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Tambo Multipurpose Centre Policy

Policy Number: MPC-C27	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

WORKING WITH CARERS

POSITION STATEMENT

The Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the effort and dedication that carers provide in supporting clients to remain at home.

The Blackall Tambo Regional Council, Tambo Multipurpose Centre acknowledges the importance of supporting the role carers play in delivering quality care to the frail aged and people with a disability and will uphold the rights of carers and other people who provide unpaid support to individuals.

The Blackall Tambo Regional Council, Tambo Multipurpose Centre will assist carers and support persons to access assistance that allows them to continue in their caring role.

The Blackall Tambo Regional Council, Tambo Multipurpose Centre, while respecting the rights of carers, also requires carers to acknowledge the responsibilities they assume when becoming a carer and when receiving support from the organisation.

RESPONSIBILITIES

Executive Management

- Ensure all staff members are aware of and uphold the rights of carers.

Manager

- Recognise and acknowledge carers when assessing and developing care plans for clients, including them in care planning where relevant.
- Assist carers and support persons to access respite, carer networks, carer information and training and other supports that help them to continue in their caring role.
- Information on carers, along with any specific requirements they identify that will assist them in their caring role, will be gathered during the client assessment process.
- Carers who require regular or identified respite to maintain their caring role will be referred to Carer Respite services.
- Carers who are identified as requiring additional training to provide safe care and support to the client will be referred for relevant training.

RIGHTS

Carers will be recognised for their unique knowledge and experience, and as individuals with their own needs.

All assessment, care planning and service delivery will recognise the Rights of Carers and Support Persons noting that:

- Carers will be treated with respect and dignity and acknowledged as individuals with their own needs within and beyond the role of carer.
- The diversity of carers' individual needs will be acknowledged and identified.
- Children and young people who are carers may have additional support needs.
- The role of carers will be formally recognised by including carers in the assessment, planning, delivery and review of services that impact on them and their caring role.
- The views and needs of carers will be considered along with the views, needs and best interests of people receiving care when decisions are made that impact on carers and their caring role.
- Complaints made by carers in relation to services that impact on them will be acknowledged and responded to appropriately and in a timely manner.

RESPONSIBILITIES

- Carers and other support persons are expected to alert staff to issues relating to the care and wellbeing of the client and in particular where they require support.
- Carers in receipt of a Carer related Centrelink payment are expected to provide care and support to the individual they have claimed to be caring for.
- Carers are expected to demonstrate respect to staff who provide support to the client.
- Carers are expected to maintain a safe working environment for staff members and contractors who provide a service through the program.

RELATED LINKS AND REFERENCES

My Aged Care <https://www.myagedcare.gov.au/caring-someone>

Carer Gateway <https://www.carergateway.gov.au/>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Privacy Act 1988 (Cth)

Carers Recognition Act 2010

Charter of Aged Care Rights

Aged Care Standards, specifically **Standards 2, 6 and 8**

Commonwealth Home Support Programme Guidelines

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)



Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Tambo Multipurpose Centre Policy

Policy Number: MPC-S1	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

ACTIVITIES AND RISK MANAGEMENT

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre whilst recognising the right of clients to participate in activities that contain some inherent risks, also acknowledges its responsibility to minimise the risk to clients and staff when planning and to conduct activities. Therefore, all planned activities will:

- Include planning and risk assessment of the activity
- Identification of potential participants and possible adverse events and risks
- Incorporate planning strategies to minimise risk to clients, staff and volunteers; and
- Include instruction/procedures to direct staff should there be an adverse event during the activity.

Additionally, where activities are to be held outside or away from the service centre, planned activities will:

- Involve a minimum of two trained staff members participating in any identified external group activity (at least one staff member must hold a current first aid certificate)
- Have procedures in place to assess any risk, know where the activity is being held and expected time of arrival (ETA) home
- Make allowance for the weather conditions and may be cancelled if the assessed risk is high.

CLIENTS WITH DEMENTIA OR COGNITIVE IMPAIRMENT

Clients with dementia or cognitive impairment who may be in danger of wandering away from a group must be monitored by a designated carer at all times.

RESPONSIBILITIES

Manager

- Complete an activities risk assessment for all planned activities that carry inherent risks before the activity taking place.
- Monitor, all external activity planning with the right to veto, should conditions or circumstances warrant.



Blackall-Tambo Regional Council

- Ensure all staff are trained in the appropriate use of emergency equipment.
- Advise Head Office/Management team of planned activities.
- Complete a review of activity with staff, noting any concerns that arose during the activity and suggested amendments to future activities.

Care Staff

- Participate in planning meetings and complete any necessary documentation for external activities.
- Complete necessary checks and preparation for all external activities and report to the Manager anything that may jeopardise the health and safety of activity participants.

PROCEDURES

External Activities

Pre-trip

- Ensure that at least one person has a charged mobile or satellite phone, and the number is provided to centre-based personnel.

Carry out a vehicle check including:

- Tyres (including the spare) inflated correctly
- Carjack and tyre jack present
- Shovel and heavy-duty gloves
- Radiator full and no leaks
- Oil reservoir full and no obvious leaks
- Fuel sufficient for the trip plus enough for contingencies
- First aid kit present
- Fire extinguisher present
- Ensure sufficient water for all people travelling.

Key Safety Considerations

- All clients are to wear fitted seat belts whilst in the vehicle.
- Any changes from the trip plan are to be relayed to the centre-based staff prior to any deviation occurring; changes must be noted on the trip plan.
- Where staff believe the weather conditions may present a risk to the health of the clients, the trip should be cancelled, or an amended ETA called into the Head Office if already out.
- Where the activity includes making fires, staff must monitor the fire and clients at all times. Appropriate equipment and resources such as water containers and a shovel should also be present and within reach of the fire if it needs to be put out. **ALL** fires must be completely extinguished before leaving the area.

RELATED LINKS AND REFERENCES

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RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Work Health and Safety (National Uniform Legislation) Act 2011

Charter of Aged Care Rights

Aged Care Standards, specifically **Standard 1, 5, and 8**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Guidelines

Disability Services Act 1986 (Commonwealth)

Disability Services Act [Date (your State or Territory)]

National Disability Insurance Scheme Act 2013 (Commonwealth)

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

NDIS Practice Standards 1, 2 and 3

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Tambo Multipurpose Centre Policy

Policy Number: MPC-S2	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

CLEANING AND CHEMICAL SAFETY

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that maintaining a hygienic work or living environment is important to good health.

Blackall Tambo Regional Council, Tambo Multipurpose centre acknowledges the risk to staff involved in the practice of cleaning, particularly where chemicals are involved. The organisation notes that safe working practices can minimise risk to staff and consumers and their pets in the vicinity when cleaning chemicals are used.

The organisation will minimise risk by:

- Ensuring staff are trained in the correct use of cleaning equipment and chemicals.
- Ensuring staff are trained and follow cleaning practices that minimise the potential for cross infection.
- Ensuring that all staff wear appropriate PPE whilst cleaning and handling chemicals.
- Purchasing cleaning chemicals that carry a lower risk factor to the user.
- Ensuring all chemicals kept on site have current Safety Data Sheets (SDS).
- Ensuring all chemicals and cleaning equipment are stored and disposed of correctly and safely.

RESPONSIBILITIES

Manager

- Ensure all chemicals are stored and used correctly by staff.
- Ensure only approved cleaning chemicals are ordered and used within the Aged Care Centre.
- Ensure all chemicals and waste containers are disposed of appropriately.
- Ensure an SDS accompanies all chemicals used by the service.
- Ensure all staff receive adequate training and orientation in the use of cleaning equipment and chemical handling.



Support Worker

- Follow safety practices for cleaning, including the use of personal PPE, e.g. gloves, enclosed shoes.
- Use appropriate cleaning practices to prevent cross contamination.
- Use and store cleaning chemicals and equipment according to the manufacturers' instructions and/or organisation procedures.
- Do not use products where there are concerns about or have caused a negative health reaction previously.
- Report any negative health reactions or concerns about cleaning products or equipment to management.

PROCEDURES

General Cleaning Practices

- Do not use any electrical equipment you suspect may be faulty. Report to management.
- Always wear disposable rubber gloves when cleaning toilets and bathrooms.
- Always use correct cleaning equipment where provided, e.g. where colour-coded mops and buckets are in use, the correct mop must be used in the relevant area.
- Always use practices that minimise the risk of cross infection, such as cleaning in order from top to bottom and cleanest to dirtiest areas or rooms.
- Always clean and return cleaning equipment to its correct storage location.
- Always disinfect and rinse mops well, store dry.
- Use safety signs as appropriate.

Chemical Usage and Storage

- Do not use chemicals that are not in their original container or where the label is missing.
- All cleaning chemicals are to be stored separately to food items and must not be accessible to clients or visitors to the centre.
- Do not decant chemicals into smaller containers such as soft drink bottles.
- Smaller, daily use containers should be correctly labelled.
- Always ensure the room is well-ventilated when using chemicals.
- Ensure all chemicals in use have an up to date SDS in the location of storage.
- Staff have the right to refuse to use any product that they believe may cause harm.

RELATED LINKS AND REFERENCES

Safe Work Australia <https://www.safeworkaustralia.gov.au/chemicals>

RELEVANT STANDARDS AND LEGISLATION

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Aged Care Act 1997

Aged Care Standards, specifically **Standards 4, 5 and 8**

Medicines, Poisons and Therapeutic Goods Act 2019 Queensland

Work Health and Safety Act 2011 Queensland

NDIS Practice Standards 2 and 4

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Tambo Multipurpose Centre Policy

Policy Number: MPC-S3	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

DOGS AND COMPANION ANIMALS

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre acknowledges the relationship many elderly people have with their dog/companion animal and the benefits that pet ownership carries, such as reduced stress, anxiety, and feelings of loneliness.

Additionally, the organisation recognises there is an increasing number of people with serious illnesses or disabilities who have assistance dogs to help them in completing their ADL's or managing their health condition. The right of registered assistance dogs to enter public areas, provided to them under the legislation, will be recognised and upheld.

Blackall Tambo Regional Council, Tambo Multipurpose Centre acknowledges their duty of care to support the health and safety of other clients and staff and, in relation to this topic, to minimise the possibility of distress or animal borne illnesses or injuries being contracted in the course of their work.

Blackall Tambo Regional Council, Tambo Multipurpose Centre seeks to ensure the health, wellbeing and safety of staff and all clients who come into contact with, or support the care of, a companion animal through the following:

- All pets are the responsibility of their owners and must be controlled whilst staff are providing care.
- A staff member has the right to leave a client's premises where they feel their safety may be at risk by an aggressive animal.
- Where support is provided to a companion animal as part of the care plan, staff will follow hygiene practices, including PPE.
- Companion animals must not cause distress or interfere with the peace and comfort of other clients at the centre.
- Any damage caused to the centre by the pet is the responsibility of the owner.
- Where an animal poses an ongoing threat to staff due to inadequate control by the client (or owner), services may be suspended.

RESPONSIBILITIES



Blackall-Tambo **Regional Council**

Executive Management

- Ensure all staff are aware of the rights of Assistance Animals.

Manager

- Recognise the right of clients to keep a companion animal in their own home and of assistance animals when planning care.
- Ensure clients are aware of any requirements, obligations and limitations relating to pets and service delivery.
- Assist with referrals for veterinary services and other supports to ensure adequate care is provided to companion animals, where indicated in the client's Care Plan.
- Ensure that any risks to clients or staff are identified as part of initial client assessment and re-assessment, with notes included on the Client Care Plan as required.
- Support staff who have been adversely affected by an interaction with the companion animal belonging to a client, including referring the person for counselling and medical attention where required.

Support Worker

- Alert management of any concerns regarding aggressive behaviours observed in a client's pet.

PROCEDURES

Aggressive (Cheeky) Dog

Where a dog is physically aggressive or menacing a staff member, the staff member will:

- Remain in their vehicle or outside the client's home boundary and attract the client's attention if possible.
- Report to management if unable to attract the client's attention.
- Gain assistance from the client's family members, Animal Control Officers or Police if the client is in immediate danger from the animal.
- Stay calm when encountering an agitated dog, where appropriate, stand still and avoid eye contact with the animal until it moves away. Back slowly away from the animal if possible.
- If bitten, the staff member is to go straight to the Clinic for treatment if necessary. Contact the relevant person in your organisation as soon as possible after treatment.
- An incident form is to be completed where a staff member has sustained a bite.

Where a dog/s is usually aggressive and often present in the home when staff visit

- Services will be offered to the client at an alternate location.
- Services may be suspended where the organisation cannot guarantee the safety of staff members providing care in a client's home with an aggressive dog.



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Dog/Animal Health and Hygiene

- All food scraps are removed from the Aged Care Service premises each evening to discourage stray dogs/animals from hanging around the centre.
- Ensure bin enclosures are secure each night to deter dogs or other animals from entering the Centre grounds and accessing external bins.

RELATED LINKS AND REFERENCES

Assistance Animals <https://www.humanrights.gov.au/our-work/disability-rights/projects/assistance-animals-and-disability-discrimination-act-1992-cth>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Work Health and Safety Act 2019 Queensland

Charter of Aged Care Rights

Aged Care Standards, specifically Standards 2, 4 and 8

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Guidelines

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

NDIS Practice Standards 2 and 4

REVIEW TRIGGERS

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3. Industry, legislation or service agreement changes may necessitate modifications to policy/procedure.
4. Other circumstances as determined from time to time by a resolution of Council.

Notwithstanding the above, the organisation may review this policy/procedure annually for relevance and ensure its effectiveness.

VARIATIONS

The Management Team reserves the right to vary, replace or terminate this policy/procedure from time to time.

This policy/procedure is to remain in force until it is changed.

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Tambo Multipurpose Centre Policy

Policy Number: MPC-S4	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

EPIDEMIC / PANDEMIC RESPONSE

POSITION STATEMENT

Note: *this procedure is an addendum to the general Infection Control Policy and should be read and applied in conjunction with that policy.*

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that from time to time, diseases can escalate to a point where they become an epidemic or pandemic and place the community at higher risk of infection. During these times, there is an additional risk when delivering care services, both to the client and the care worker, due to close and often personal contact, leading to the possibility either of contracting or passing on infectious or communicable disease.

The organisation recognises an obligation to provide a safe working environment for both clients and staff involved in the Aged Care Program and aim, as far as possible, to reduce the risk and protect clients, staff and volunteers, along with the wider community from infection as a result of an epidemic or pandemic.

Additionally, the organisation will comply with all directives issued by Health and Government authorities to slow the progression of the outbreak and minimise the impact on individuals and the health system.

Where a client or staff member is suspected of having or is known to have an identified communicable disease, the organisation will work with the individual and the health authorities to minimise the risk to others.

In the instance of a pandemic being declared, Management may be required to report to authorities where a staff member who has been advised to self-isolate or goes into quarantine has not adhered to this advice. Their actions place the general public and vulnerable clients at risk.

In accordance with the organisation's Privacy Policy and outside of statutory disclosure requirements, the organisation maintains strict confidentiality on the status of staff and clients in relation to communicable infections.

The organisation will provide all direct care staff with education relating to communicable disease, including ways to minimise infection to themselves and their support.

This policy specifically refers to an infectious disease declared a pandemic (*a global outbreak of a disease*) caused by a pathogen or micro-organism such as viruses, bacteria, parasites or



fungi. It also has application in an epidemic (a more localised outbreak and spread of a disease).

RESPONSIBILITIES

Executive Management

- Uphold and implement any directives or recommendations advised by the Government or Health Authorities.
- Develop an Epidemic Management / Action Plan for the organisation.
- Minimise the impact on the day to day service delivery to clients of the service, including the maintenance of essential care and support to clients.
- Identify non-essential activities that can be suspended to reduce the potential for vulnerable clients and staff to become infected.
- Ensure that all staff have access to adequate and reliable training on the identified infectious disease to minimise confusion and unwarranted concern in the workplace.
- Provide clear communication to the workforce, contractors and clients relating to the identified issue, the organisation's response and any advice received from Government or Health Authorities.
- Ensure that staff are aware of and have access to relevant infection control policies, including any updates relating to the identified risk.
- Contractors and suppliers should also be advised of any changes to requirements such as access, delivery processes, expected hygiene practices and additional protocols.
- Encourage and support staff immunisation against the identified disease if and where available.
- Provide staff and volunteers with training, support and resources to minimise the risks of infection outbreaks, including the provision of personal protective equipment (PPE) to minimise the chances of cross infection between clients and staff.
- Provide support and advice to staff and volunteers who contract the identified disease in the course of their work/ duties.

Manager/Coordinator/Supervisor

- Support implementation of the Epidemic Management / Action Plan.
- Manage service delivery to minimise exposure to the infectious disease for vulnerable clients, staff, volunteers, and the community.
- Ensure all staff are aware of and follow infection control processes relating to the specific infectious disease, including handwashing, social distancing and other hygiene practices.
- Remind direct care staff of standard and additional precautions and provide refresher training where required.
- Ensure adequate stocks of identified PPE (gloves, soap, hand sanitiser, masks, gowns) are maintained at all times and provide training on the correct use of PPE where required.



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- Inform the relevant person in your organisation of any incidence of the identified infectious disease amongst staff, volunteers or clients.

Support Worker

- Follow directions from Management designed to protect vulnerable clients, staff, volunteers and the community at large.
- Follow infection control procedures and use standard (and additional) precautions at all times as directed.
- Seek medical advice promptly where they suspect they have been exposed to the infectious disease or show symptoms of the disease.
- Inform their supervisor if they have contracted, or suspect they have contracted, the identified infectious disease.
- Maintain personal health and hygiene standards.
- Practice social distancing where possible.
- Maintain confidentiality of clients and colleagues' personal information to gain knowledge of the person contracting an infectious disease.

Volunteers

- Regular volunteer duties will continue across the service unless volunteers are not well or not comfortable performing regular duties during the outbreak.
- Volunteers should direct any queries to their supervisor and should follow all standards and/or additional precautions as directed.

PROCEDURES

This procedure is to be read in conjunction with the organisation's Infection Control Policy.

PANDEMIC OUTBREAK PRECAUTIONS

Where a pandemic outbreak alert is issued by the World Health Organisation and the Federal Government of Australia, the organisation will follow prescribed responses.

Standard Precautions Relating to an Epidemic or Pandemic

While epidemics and pandemic outbreaks can differ due to the various causative agents, it is expected that standard precautions will always form part of the first defence, and therefore staff are directed to uphold standard precautions at all times.

All care staff/support workers should use standard precautions when delivering care to clients or their carers. Standard precautions mean treating everything and everyone as potentially infectious and, therefore, using infection control practices in daily work practice. **All staff** will practice standard precautions when providing care to clients and additional precautions as directed.

Standard Precautions include the following:

- Hand washing
- Correct use of Personal Protective Equipment (PPE)
- Correct handling and disposal of waste (e.g. paper tissues)

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- Appropriate cleaning of all equipment used in providing client care
- Maintaining a clean work environment
- Maintenance of personal hygiene practices

Additional Precautions

Additional precautions that relate to the identified infectious outbreak may include:

- Utilising additional PPE where indicated
- Social distancing, e.g. maintaining a distance of 1.5m (or other distance as prescribed) between people where possible
- Avoiding infection hotspots

Work Environment and Cleaning Practices

Maintaining the Aged Care Facility/Centre work environment is essential to infection control processes in a clean and tidy manner.

- Adequate handwashing areas, soap and hand sanitiser will be made available to all staff and visitors to the centre and visitors to the centre will be reminded to use these via posters and staff prompting.
- All surfaces such as workbenches and tables to be cleaned and sanitised at the end of each day and regularly throughout the day.
- All hard surfaces that are handled often, including taps, door handles, and phones, should be regularly cleaned and sanitised.
- Furniture such as chairs should be wiped down and sanitised at the end of each day and regularly throughout the day where possible.
- Rubbish bins will have a bin liner that is changed regularly (at least daily) and either be open or have a foot-operated pedal designed to lift the cover to minimise people touching the lid.
- Toilet lids should be closed before flushing contents to minimise droplet contamination.
- Where a shared vehicle is used, the staff member should wipe over areas of the car that they will touch before and after using.

When working in the home of clients:

- Only take into the home essential equipment used for the assigned duties to minimise cross infection.
- Where cleaning equipment is taken into the home, it must be thoroughly disinfected after use and BEFORE placing it in the vehicle using disinfectant wipes or other appropriate and/or specified products, e.g. cleaning spray and paper towel/ designated cleaning cloths.
- Clean and sanitise hands before and after the visit to the home.
- Wear disposable gloves and change these between clients and more often where necessary.



Health and Hygiene Standards

All workers are to:

- Regularly and thoroughly clean hands with soap or alcohol-based (minimum 60% Alcohol) hand sanitiser for a minimum of 20 seconds.
- Avoid touching their face, especially the eyes, mouth and nose.
- Avoid non-essential contact with others, such as shaking hands.
- Cover nose and mouth when coughing or sneezing with a tissue and disposing of the tissue immediately. Sneezing or coughing into the elbow is encouraged.
- Change out of work clothes at the end of the shift or day's work and launder clothes/uniforms between shifts.
- Meals and breaks are encouraged to be eaten in staggered timeframes and/or smaller groups with social distancing provisions actioned. Staff should refrain from sharing food and any utensils. The cleaning of personal dishes/cutlery in a common area such as a staff room kitchen should be done following appropriate hygiene practices, and items such as tea towels should be laundered regularly/daily.
- If staff are ill or showing symptoms of infection or someone close to them (in the same household) is showing symptoms or has been diagnosed with an infection, staff should remain at home and notify the office and advise their supervisor.
- Immunisation against influenza is strongly advised.

PRE-HOME VISIT SAFETY CHECK

Before entering into a client's home, staff should ensure their safety by asking specific questions relating to the infectious outbreak:

e.g. *"Is there anyone in the home who is sick with a cold or has flu like symptoms?"*

- Where the response is positive, the staff member should refrain from entering the home and alert their supervisor.
- The client should be advised that the staff member is unable to assist the person that day and that they should alert their GP or Health Clinic of their illness and follow the guidance as given by their health practitioner.

MODIFICATION TO SERVICES

Where required, individual services may be amended for clients where there are urgent needs that are unable to be met by the person or their family carer, e.g. additional shopping services to minimise the risk of infection or where the client is in quarantine.

Wellbeing phone calls may be instigated if staff are unable to visit vulnerable clients regularly.

Note: all costs for client goods remain the responsibility of the client. The organisation is unable to use grant or package funds to pay for these.

ACTIVITIES

All non-essential activities that bring groups of vulnerable people together will be suspended until the risk of infection is reduced this includes:

- Large group activities such as morning teas, social meet ups and exercise programs.



- Bus outings and excursions.

Small group activities may be considered where clients will not be placed at risk as this also helps to reduce social isolation and maintain wellbeing. Keeping safe distances from a high-risk infection demographic such as young children will also be considered in activity planning.

Standard precautions *and where identified, additional precautions* must be adhered to, and clients supported to follow applicable hygiene practices, e.g. handwashing facilities are available, and environmental hygiene is maintained to an appropriate standard.

SUSPECTED INFECTIOUS / COMMUNICABLE DISEASE

Staff will follow standard procedures for infection control. Where the client has a known, or suspected, the communicable disease they:

- Shall be attended to by support workers who have been immunised or are known to be immune from the suspected disease.
- Additional precautions identified as necessary and relevant for the safety of staff and other clients will be enacted.
- Will not be permitted to attend large gatherings of susceptible clients organised by the service prior to receiving medical clearance.

STAFF WHO CONTRACT AN INFECTIOUS / COMMUNICABLE DISEASE WILL:

- Seek advice from their GP or other relevant health professional regarding exclusion timeframes.
- Inform their Manager/Supervisor of the infection and the exclusion time.
- Refrain from attending work for the period of the recommended exclusion.
- Gain a medical clearance from their GP or other relevant health professional prior to returning to work.

STAFF LEAVE ALLOWANCES

The organisation recognises that staff may need to take time off to self-isolate due to infection, potential infection, are identified as 'at risk' if they become infected or are at risk of infecting others. To support staff through this period, the organisation will support staff to:

- Take any leave they currently have, including sick leave, holidays, time in lieu, long service leave, and/or any other leave relevant to the relevant workplace agreement or industry standard.
- Where a staff member can continue their work remotely, the organisation may, at its discretion, arrange for the staff member to be equipped and facilitated to complete their work off-site.
- The organisation will reimburse any reasonable costs incurred by direct care staff related to testing and medical clearance.

CONFERENCES AND MEETINGS

- Attendance at all face to face, non-essential business meetings and conferences will be suspended for the duration of the epidemic/pandemic.



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- Where possible, site visits by non-essential staff to areas/communities where vulnerable clients will be limited and/or restricted.

CULTURAL PRACTICES

Community Elders, clients, and other relevant stakeholders will be consulted where cultural practices may impact individuals' health and wellbeing due to the infectious outbreak. Changes to practices and activities will be considered to protect both clients and staff.

RELATED LINKS AND REFERENCES

Australian Health Management Plan for Pandemic Influenza
<https://www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-ahmppi.htm>
Coronavirus (COVID-19) Alerts 2020 <https://www.health.gov.au/>

Infectious Diseases www.healthinsite.gov.au/topics/Infectious_Diseases

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Work Health and Safety (National Uniform Legislation) Act 2011

Charter of Aged Care Rights

Aged Care Standards, specifically Standard 2, 3, 4, 5, 7 and 8

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Guidelines 2020

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

NDIS Practice Standards 2, 3 and 4

REVIEW TRIGGERS

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The Management team reserves the right to vary, replace or terminate this policy/procedure from time to time.

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This policy/procedure is to remain in force until it is changed.



Tambo Multipurpose Centre Policy

Policy Number: MPC-S5	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

FIRE SAFETY AND EMERGENCY EVACUATION

POSITION STATEMENT

Fire safety practices are designed to minimise the potential damage that can be caused by fire. Fire safety procedures include those intended to prevent the ignition of an uncontrolled fire and those used to minimise the development and effects of a fire after it starts.

Fire safety equipment and appropriate evacuation procedures support appropriate response in a fire or other adverse event that requires evacuation of the service centre.

Blackall Tambo Regional Council, Tambo Multipurpose Centre aims to provide a safe service environment minimising the risk to the health and safety of staff, clients and visitors. This includes having:

- Fire safety equipment that is regularly checked and maintained according to recommended schedules.
- An evacuation plan in place that is clearly labelled and accessible to clients, staff and visitors.
- A clearly designated meeting/muster point for evacuation purposes.
- Staff who are trained in the use of fire management equipment and evacuation procedures.

Blackall Tambo Regional Council, Tambo Multipurpose Centre and staff will act on recommendations made by relevant authorities regarding fire safety and evacuation plans.

ACTIVITIES THAT INCLUDE THE USE OF FIRE

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that many older Aboriginal people like to have a fire for warmth or as a cultural connection. Fire is also a traditional source of cooking for some clients.

We seek to uphold the traditional customs that are important to individuals receiving care services whilst ensuring the safety of clients, carers, staff and visitors.

Blackall Tambo Regional Council, Tambo Multipurpose Centre aims to assist clients to safely maintain cultural practices and customs associated with fire through:



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- Providing an opportunity for clients to access fires during bush activities or at the service centre in either a contained environment or under supervision.
- Training staff in fire safety procedures, including fire response, drills and evacuation related to open fires.

Note: the organisation is not responsible for monitoring or managing the use of fire on private property, e.g. the client's home. This is the responsibility of the individual and their family.

RESPONSIBILITIES

Executive Management

- Ensure annual fire safety training is provided to all Aged and Disability Care staff.
- Ensure adequate fire and smoke detection devices are installed and working in the service centre.
- Ensure annual servicing of firefighting and smoke detection equipment and safety devices, such as exit lighting, in all Aged Care buildings.
- Ensure Aged Care staff have access to appropriate firefighting equipment, including access to a fire suppression blanket or other equipment when supporting clients away from the service centre.
- Ensure that staff receive training in emergency evacuation procedures, and that fire and emergency evacuation drills are conducted regularly.

Manager

- Ensure that all staff are aware of safety procedures when responding to a fire.
- Ensure emergency exits in the service centre remain accessible at all times.
- Ensure all areas of the service centre are kept free of unnecessary combustible materials.
- Advise Management of any potential fire hazard or risk, e.g. faulty equipment, air conditioners, appliances etc.

In the event of an emergency, the Manager will:

- Assume, or assign, the role of 'fire warden'.
- Notify relevant authorities of the fire or other emergency as soon as practical.

Support Worker

- Attend fire safety training when offered and participate in drills.
- Follow fire safety precautions, policy and procedures at all times.
- Alert the Manager of any fire hazards at the service centre.
- Alert the Manager where a fire hazard is identified in a client's home.



NOTE: Where a community-wide Fire and Emergency Plan is developed, the Aged Care Service will apply relevant measures as identified, e.g. local Fire and Emergency contact procedures and key personnel.

Where phones or other communication devices (UHF or SAT Phones) are to be used, the Coordinator will respond and participate accordingly in drills, checking equipment, and ensuring emergency communications radios/phones are charged and working.

PROCEDURES

In the event of a fire:

- The Fire Warden is responsible for the decision to evacuate.
- Assist clients to evacuate the building, however, staff should not place themselves in danger and enter or re-enter a burning building to rescue a client who is trapped.
- During room evacuations, close all doors behind you as you go.
- All staff, clients and visitors should relocate to the assembly point and report to the Fire Warden.
- Await the 'all clear' before returning to the building.
- Assembly points may vary depending on the location of the fire.
- Staff to monitor and advise any client movements to the Manager, e.g. if a family carer takes the older person home/ away from the assembly point.

FIRE SAFETY

Outdoor Fires

- Are only permitted in designated areas within the boundaries of the service centre.
- All fires at the centre, and related activities, are to be supervised by staff.
- All fires are to be extinguished at the end of the day.

Kitchen Fire Safety

- Clean up all oil spills and do not leave food cooking on a stove unattended to avoid stove top fires.
- Ensure that electric cords, curtains, tea towels, and oven cloths are safe from the stove.
- Use aprons and other protective clothing in the kitchen and cooking areas. Long, flowing sleeves are to be avoided.
- If cooking oil catches fire, **DO NOT** use water. Turn off the heating source and place a lid or fire blanket on the pot.
- Where a fire cannot immediately be extinguished, evacuate the room/building, alerting other staff and clients, following the fire evacuation plan.

Person on Fire

- In the case of a clothing fire, the victim should be wrapped in a fire blanket and rolled on the ground to smother the fire (ensure personal safety at all times).



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- Seek **IMMEDIATE** medical assistance.

Fire Drill Practice

- Will occur, at a minimum, every six months.
- The need for more frequent fire drills will be reviewed where circumstances change, e.g. more clients, new staff, new buildings etc.

Electricity and Appliances

- All equipment and major appliances will be checked during an annual test and tag.
- An electrician will check wiring and install safety switches as required.
- Old electrical appliances, those that fail a test and tag check, or appliances with worn or frayed cords, should be disposed of after cutting the electrical cord.
- If any appliance gives off smoke or a burning smell, switch it off immediately at the plug and dispose of it after cutting the electrical cord.
- If you have any doubts about an appliance, **DO NOT** use it until a qualified tradesperson checks it.
- Any faulty items are to be reported to the Manager to submit a maintenance request.

RELATED LINKS AND REFERENCES

Fire Protection Association of Australia: www.fpaa.com.au

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Aged Care Standards, specifically Standards 5 and 8

Work Health and Safety (National Uniform Legislation) Act 2012 (NT)

National Safe Work Australia legislation:
<http://www.safeworkaustralia.gov.au/sites/SWA/Pages/default.aspx>

NDIS Practice Standard 2

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VARIATIONS

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Tambo Multipurpose Centre Policy

Policy Number: MPC-S6	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

FOOD HYGIENE AND PEST CONTROL

POLICY STATEMENT

The National Food Safety Standard requires people working with food to have relevant skills and knowledge of food hygiene, and food premises must be appropriately maintained and safe.

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises it has an obligation under legislation to ensure a safe and hygienic food preparation area, including the safe storage and delivery of food.

Blackall Tambo Regional Council, Tambo Multipurpose Centre will ensure that clients are protected from potential food borne illnesses arising from meals prepared and/or delivered by staff by ensuring that food handlers are trained in and aware of the need for:

- maintaining good personal hygiene
- using correct food handling and storage techniques
- undertaking effective cleaning methods
- ensuring pest control measures are undertaken
- following safe meal delivery processes.

RESPONSIBILITIES

Executive Management

- Ensure all food handlers have access to appropriate food safety training.
- Ensure that premises where meals are prepared to meet environmental health standards.
- Ensure that all premises where meals are prepared and/or ingredients are stored undergo an annual pest inspection, and any relevant control practices are followed.
- Ensure a Food Safety Plan is in place.

Manager

- Follow processes and practices set out in the organisation's Food Safety Plan.



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- Ensure temperature recording is completed daily and address or escalate any identified issues to Management.
- Ensure all food items are stored appropriately.
- Train and monitor food handlers' adherence to food handling regulations.
- Ensure all food handlers have access to appropriate equipment and materials to meet food-handling regulations.

Cook/Support Worker

- Practice personal hygiene consistent with maintaining a 'food safe' environment.
- Notify Management if they are suffering from:
 - diarrhoea (unless a diagnosed bowel condition)
 - vomiting (unless due to pregnancy)
 - sore throat with fever
 - fever
 - jaundice
 - infected skin lesions
 - discharges from ear, nose or eye; or any other illness, injury or infection.
- Follow organisational procedures for maintaining a 'food safe' environment and participate in food handling training.

PROCEDURES

PERSONAL HYGIENE

- All food handlers will follow standard procedures for hand washing.
- All wounds must be covered, and disposable gloves must be worn over a food-safe adhesive bandage.
- Where disposable gloves are worn, these must be changed as often as hands would be washed.
- Hair must be kept short or tied back. Where caps or hairnets (or a suitable alternative) are provided, these should be worn.
- Jewellery must be covered or removed to ensure it is not a source of contamination.
- Food handlers should present to work in clean attire. Where aprons are provided, these should be used and washed daily.
- No food may be consumed in the food preparation area whilst meals are being prepared.

FOOD HANDLING AND STORAGE

- Refer to Food Safety Plan for food handling and storage requirements.
- Ensure that food items are checked on arrival for freshness, correct temperature and with undamaged packaging. Any food items that have deteriorated in transport will be rejected, and Management informed.



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- Complete all relevant documentation according to Food Safety Plan.

SAFE MEAL DELIVERY PROCESSES

- All delivered meals will be served in covered, food standard containers.
- All delivered meals will be distributed to clients within two hours of being placed in containers.
- Meals will be transported in containers (e.g. Eskies or Chilly Bins) that maintain the temperature of the food whilst it is being delivered to a client's home.
- Where the client is not at home at the time of delivery and no safe storage arrangement has been made previously, the meal shall be returned to the kitchen and disposed of.
- Meal delivery vehicles shall be maintained in a clean and tidy state at all times and must be cleaned inside and out weekly.

EFFECTIVE CLEANING METHODS

- Refer to Food Safety Plan for cleaning schedule and intervals.
- Daily, monthly and weekly cleaning charts are to be marked off when completed.

PEST CONTROL

- Refer to Food Safety Plan for Pest Control schedule and intervals.
- Pest Control activities must be logged in the relevant Register.

RELATED LINKS AND REFERENCES

Environmental Health Australia: <http://www.eh.org.au/resources/foodsafes>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Aged Care Standards, specifically Standards 4, 5, 7 and 8

National Food Safety Standards

NDIS Practice Standards 2, 4 and 5

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Blackall-Tambo **Regional Council**

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Tambo Multipurpose Centre Policy

Policy Number: MPC-S7	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

INCIDENT REPORTING AND MANAGEMENT

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises an **incident** as any serious or potentially serious event that impacts the safety of a client, carer, visitor or staff member.

This includes but is not limited to:

- The unexpected death of a client, staff member, subcontractor or volunteer.
- A serious injury to a client, staff member, subcontractor or volunteer.
- Allegations of conduct that may result in death, harm or injury, made in relation to the service provider's organisation, staff, subcontractors or volunteers.
- Allegations of unlawful or criminal activity, made in relation to a service provider's organisation, staff, subcontractors or volunteers.
- A serious fire, natural disaster, accident, or other incident that will or is likely to prevent service provision, or which results in closure or significant damage to premises or property, poses a significant threat to the health and safety of clients and staff subcontractors or volunteers.

All incidents will be appropriately documented and responded to according to the type and seriousness of the event.

Incidents relate specifically to the hours at work or when directly travelling to or from work, excluding any incidents that fall outside of normal work duties.

RESPONSIBILITIES

Executive Management

- Respond to concerns raised by the Manager regarding the safety of staff members and clients when dealing with incidents.
- Ensure the staff have access to relevant training and support, e.g. WH&S, incident response procedures etc.
- Ensure that staff are able to access appropriate services and support after an incident, where this is indicated.



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- Review incident reports regularly and make amendments to policies and practices as required.

Manager

- Assist clients to access relevant support(s) where affected by an incident.
- Support staff members who are involved or affected by incidents.
- Train staff or facilitate the training of staff in incident response and reporting.
- Report to Management all incidents (moderate and major) that result in hospitalisation or death of a staff member, client, visitor or member of the public where the organisation is involved.

Support Worker

- Complete training when provided.
- Complete and/or assist in completing an incident form where involved, affected or witness an incident.
- Whilst still adhering to privacy policies, staff have an obligation to make known to the Manager any concerns or knowledge they have of a client or client's family member who displays aggression and any known triggers for aggressive behaviour.

PROCEDURES

- Address the incident, e.g. provide aid, remove the person from harm/potential harm, and contact local emergency number (usually Police) or **000** as relevant.
- Identify the incident and gather details required to complete an Incident Report Form.
- Determine the level of the incident and act accordingly.

Minor Incident

- Manager to forward the Incident Form to the CEO or delegate within 24-48 hours.
- Coordinator review and discuss a response the incident and advise Executive Management of related actions, i.e. equipment request, strategies and actions taken by staff and other stakeholders to reduce future risk.
- Where the incident has involved/affected a client, a copy of the Incident Report Form will be placed on the relevant client file.

Moderate or Major Incident

- Manager to report the incident to the CEO or delegate immediately providing a completed Incident Report Form as soon as practical.
- Where relevant, the Manager will contact Executive Management, and a risk management plan relating to the incident will be developed.
- Suppose the incident involves criminal behaviour or results in an injury requiring medical attention. In that case, the relevant person in your organisation is to notify relevant authorities/ services immediately, i.e. Clinic and Police.
- All major incidents must be advised to the relevant Departmental contacts by the Executive Management or other relevant person in writing as soon as practical.



Blackall-Tambo **Regional Council**

- Where the incident has involved/affected a client, a copy of the Incident Report Form must be placed on the relevant client file.

Reporting:

- The organisation's Incident Report Form must be **completed** as soon as is practical for all incidents.
- The Manager will **forward** information related to the incident, along with strategies or action taken, to the relevant person or department in your organisation within 24 hours of the incident occurring or as soon as practical.
- The Manager will provide a follow up progress report to Management where required.
- Management to liaise with other organisational staff and relevant Government departments as appropriate.
- If a serious (major) incident does occur, the department may request documentation from the service provider to show evidence of how it has or will manage the serious incident.

INCIDENT REPORTING

Incident reports are completed as soon as possible after a serious incident as a record of what occurred and the organisation's response. Reports should be reviewed regularly as a part of Continuous Quality Improvement processes.

RELATED LINKS AND REFERENCES

Incident Reporting <https://www.safeworkaustralia.gov.au/incident-reporting>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Aged Care Standards, specifically Standard 5, 7 and 8

Regulations under the *Work Health and Safety (National Uniform Legislation) Act 2012*

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Guidelines

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

NDIS Practice Standards 1,2, 4, 5, 7 and 9

REVIEW TRIGGERS

This policy/procedure is reviewed internally for applicability, continuing effect and consistency with related documents and other legislative provisions when any of the following occurs:

1. The related documents are amended.
2. The related documents are replaced by new documents.

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3. Industry, legislation or service agreement changes may necessitate modifications to policy/procedure.
4. Other circumstances as determined from time to time by a resolution of Council.

Notwithstanding the above, the organisation may review this policy/procedure annually for relevance and ensure its effectiveness.

VARIATIONS

The Management Team reserves the right to vary, replace or terminate this policy/procedure from time to time.

This policy/procedure is to remain in force until it is changed.



Tambo Multipurpose Centre Policy

Policy Number: MPC-S8	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

INFECTION CONTROL AND ANTIMICROBIAL STEWARDSHIP

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises an inherent risk when delivering care services, both to the client and the care worker, with the possibility either of contracting or passing on a communicable or infectious disease.

The organisation notes an obligation to provide a safe working environment for both clients and staff involved in the Aged Care Program.

The organisation will endeavour to protect staff and clients of Aged Care Services from contracting, or being adversely affected by, communicable diseases during service delivery through adhering to appropriate work health and safety procedures and training and by:

Upholding infection control processes

Providing appropriate personal protective equipment

Invoking additional precautions where necessary

Supporting and practising Antimicrobial Stewardship by:

- Promoting appropriate antibiotic use (*and prescribing practices where relevant*) to reduce the risk of increasing resistance to antibiotics; and
- Adhering to Industry principles of prudent antibiotic use that reduce antimicrobial drug resistance and improve client care outcomes.

Where a client is known to have an infectious disease or communicable disease, the organisation aims to work to prevent discrimination and/or harassment of the person.

In accordance with the organisation's Privacy Policy and outside of statutory disclosure requirements, the organisation maintains strict confidentiality on the status of staff and clients in relation to communicable infections.

The organisation will provide all direct care staff with education relating to communicable diseases, including influenza and the risks and benefits of influenza immunisations. All direct care staff will be offered the opportunity to receive an annual influenza immunisation at no cost to the staff member.

Aged Care workers have the right to decline an influenza immunisation and will not be discriminated against; however, an unimmunised staff member may have their duties and shift



times modified where there is an identified risk of contracting and passing on infections to vulnerable clients.

When a client is prescribed antibiotics, this will be recorded on their medication management plan, along with any instructions for monitoring, support or assistance where the service has an agreed responsibility in these areas.

RESPONSIBILITIES

Executive Management

Ensure that all staff have access to adequate training, including annual updating of skills in managing infection control.

Encourage and support staff immunisation against common infectious diseases.

Ensure all direct care staff participate in annual influenza awareness training, which includes the benefits of immunisation and is offered the opportunity to access annual influenza immunisation.

Provide staff with support and resources to minimise the risks of infection outbreaks.

Provide personal protective equipment (PPE) to minimise the chances of cross infection between clients and staff.

Provide support to staff that contract a communicable/infectious disease in the course of their work.

Uphold privacy legislation relating to personal information of persons with a communicable disease.

Provide resources to clinicians, management and care staff, clients and families about antibiotic use and evidence based guidelines.

Manager

Ensure all staff are aware of and follow infection control processes.

Ensure adequate stocks of PPE are maintained at all times.

Provide day to day training and support to direct care staff on Standard precautions.

Monitor the use of Standard precautions by support workers and provide assistance to comply with the organisation's Infection Control policy.

Inform the relevant person in your organisation of any infectious or communicable disease incidence, ensuring the privacy of individuals is maintained.

Facilitate training and information on antimicrobial stewardship and evidence based guidelines for all care staff; and

Ensure processes and practices are in place to monitor antibiotic use and provide feedback to prescribing clinicians, nursing or other relevant personnel on use, compliance and outcomes.

Support Worker

Follow infection control procedures and use standard precautions at all times.

Inform their Coordinator if they have contracted an infectious or communicable disease.



Maintain their health and hygiene standards.

Maintain confidentiality of clients and colleagues' personal information to gain knowledge of the person contracting an infectious or communicable disease, except where withholding this information from their Coordinator leads to a potential infectious outbreak.

Follow instructions on antibiotic use and management, where this is part of their role, and alert supervising staff/management to any concerns relating to the client and their condition and medication use.

PROCEDURES

STANDARD PRECAUTIONS

All support workers should use standard precautions when delivering care to clients or their carers. Standard precautions means treating everything and everyone as potentially infectious and, therefore, using infection control practices in daily work practice. All staff will practice standard precautions when providing care to clients.

Standard Precautions include the following:

Hand washing

Use of Personal Protective Equipment (PPE)

Correct handling and disposal of waste (e.g. sharps or continence aids)

Appropriate cleaning of all equipment used in providing client care

Maintaining a clean work environment

Standard precautions are to be used where the support worker comes in contact with the following body matter:

Blood, including dried blood

Mucous membranes

All bodily secretions and excretions including, but not limited to, faeces, urine and nasal discharge

Broken or non-intact skin

NOTE: Any support worker who has direct contact with blood or body fluids in the course of their work should consider being immunised against Hepatitis A and B.

ADDITIONAL PRECAUTIONS

Additional precautions are to be used where clients are known or suspected to be infected with diseases that can transmit/cause infection by the following means:

Airborne transmission (e.g. pulmonary tuberculosis, chickenpox, measles, corona viruses)

Droplet transmission of respiratory secretions – sneezing or coughing (e.g. rubella, influenza)

Contact transmission (direct or indirect)

Inherent resistance to standard sterilisation procedures or other disease-specific means of transmission, where standard precautions are not sufficient



PANDEMIC OUTBREAK PRECAUTIONS

Where a pandemic outbreak alert is issued by the World Health Organisation and the Federal Government of Australia, the organisation will follow prescribed responses.

ANTIMICROBIAL STEWARDSHIP

Infection control and antimicrobial stewardship (AMS) overlap. Key procedures include:

Recognising and referring illness in a timely way.

Stopping transmission through vaccination, hand hygiene and appropriate cleaning practices.

Supporting appropriate client use (completion of courses) to treat infection and monitoring outcomes, alerting prescribing and/or relevant health staff to any incidents, i.e. adverse reactions, non-compliance with medication, or ineffective result from the prescribed treatment.

Documenting appropriately, e.g. on the client medication plan, having relevant information such as:

- Drug name
- Dose, frequency, route
- Indication/Condition (what it's being used to treat)
- Date commenced
- Timeframe for use, e.g. '5 days' and date to be ceased on.

Review of any longer term antimicrobial prescriptions on a minimum monthly basis.

NB. For prescriptions exceeding 6 months, specialist/expert advice should be sought, and a formal medication review conducted.

SHARPS MANAGEMENT

Some clients require injections of insulin or other substances to manage and maintain health conditions.

Staff shall not handle sharps (e.g. used razors or needles) at any time in the course of their work. Contaminated sharps carry a high risk of blood-borne disease.

Staff are not permitted to handle used needles, and if needles are found to be incorrectly disposed of and pose a potential danger to the staff member, they have the right to delay or withhold service provision until these have been disposed of correctly.

Staff must note on a hazard form any safety issues or injury arising from handling sharps and are required to notify the Manager and seeking medical treatment immediately. An incident form is to be completed as soon as possible.

Where staff identify that a client or their family member continues to place the staff member at risk by incorrectly disposing of used needles, the Manager must be notified, and action such as suspension of service may ensue until the home is made safe.

HAND WASHING

Washing hands is the single most effective method to remove potentially harmful microorganisms. Hand washing should be practised:

- After contact with a client
- After exposure to body matter



- After removing gloves (Gloves are not an alternative to hand washing)
- After touching inanimate sources likely to be contaminated, e.g. beds, shower chairs, client clothing
- After using the toilet
- After handling animals
- Before eating
- In between tasks
- Before handling foods
- After handling refuse
- After handling soiled linen

Waterless, alcohol-based hand wash may only be used where the hands are unsoiled.

HAND CARE

Intact skin is a natural defence against infection.

Cuts and abrasions must be covered with a waterproof dressing whilst carrying out duties.

Support workers with any form of skin infection or dermatitis on their hands must seek medical advice and may need to show evidence of medical clearance for working with vulnerable clients.

PERSONAL PROTECTIVE EQUIPMENT (PPE)

Personal protective equipment for infection control includes, but is not limited to, disposable gloves, non-disposable gloves, hats, safety glasses and disposable aprons. They protect both the support worker and the client from possible cross infection or other hazards in the environment.

PPE must be used where it is provided

Disposable PPE must be disposed of correctly after use

Disposable PPE may not be reused

PPE should fit correctly and comfortably

All support workers shall receive training on the correct use and disposal of PPE

The Manager should regularly check Non-disposable PPE to ensure integrity is maintained

Disposable gloves will be worn when:

- Providing personal care to a client

Handling blankets, bedding or any personal clothing belonging to clients

General cleaning of bathrooms and laundry (although non-disposable may also be used)

WASTE HANDLING AND DISPOSAL

All waste material should be considered potentially infectious and dealt with accordingly.



All spills must be cleaned up prior to general cleaning using a designated mop and bucket if available, or if not, clean the spill up, decontaminate using bleach and then mop again, always use gloves.

Solid waste material spills should be cleaned up using appropriate equipment, e.g. scraper and pan, decontaminated using a bleach solution.

If required, eye protection, disposable apron, rubber boots and a face mask may also be required.

Solid waste materials will be contained in an appropriate leak proof bag or container and disposed of appropriately. Bodily fluid/excrement can be disposed of safely into a sewage system.

All used continence aids should be placed into a plastic bag and disposed of in the exterior rubbish bin.

Food delivery containers must be kept separate from other materials such as dirty linen when delivering meals.

Soiled blankets and bedding are to be placed in an appropriate bag before being transported in an enclosed vehicle. If a ute is used - the tray should be hosed out and cleaned with disinfectant wash at the end of the day.

Clean blankets and bedding are to be returned in a suitable (clean) container and/ or bag, so they do not become soiled when being returned to the client.

CLIENT CARE EQUIPMENT

All equipment used in the delivery of care services to clients should be considered a potential infection site.

All personal care equipment such as shower chairs and commodes shall be cleaned using a disinfectant after each use.

WORK ENVIRONMENT

Maintaining the Aged Care Centre work environment clean and tidy is essential to infection control processes.

All kitchen surfaces, including benches and floors, shall be cleaned at the close of business each day.

All internal rubbish bins are to be lined with a bin liner.

All internal rubbish bins are to be emptied and rubbish removed from the building daily.

HEALTH AND HYGIENE STANDARDS

Support workers are to present to work:

In clean attire and in uniform, where supplied

Clean and tidy in appearance

Fingernails trimmed and clean

Wearing covered shoes



SUSPECTED COMMUNICABLE DISEASE

Staff will follow standard procedures for infection control. Where the client lives in the community and has a known, or suspected, a communicable disease they:

Shall be attended to by support workers who have been immunised or are known to be immune from the suspected disease.

May not attend large gatherings of susceptible clients organised by the service before receiving medical clearance.

STAFF WHO CONTRACT A COMMUNICABLE OR INFECTIOUS DISEASE WILL:

Seek advice from their GP or other relevant health professional regarding exclusion timeframes

Inform the Manager of the infection and the exclusion time

Refrain from attending work for the period of the recommended exclusion

Gain a clearance from their GP or other relevant health professional before returning to work

RELATED LINKS AND REFERENCES

Infectious Diseases www.healthinsite.gov.au/topics/Infectious_Diseases

The Australian Antimicrobial Resistance Strategy www.amr.gov.au

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Work Health and Safety (National Uniform Legislation) Act 2011

Aged Care Standards, specifically Standard 2, 3, 4, 5, 7 and 8

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Guidelines

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

NDIS Practice Standards 2 and 4

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Notwithstanding the above, the organisation may review this policy/procedure annually for relevance and ensure its effectiveness.

QUESTIONS

If a workplace participant is unsure about any matter covered by this policy/procedure, they should seek their Manager's assistance.

VARIATIONS

The Management Team reserves the right to vary, replace or terminate this policy/procedure from time to time.

This policy/procedure is to remain in force until it is changed.



Tambo Multipurpose Centre Policy

Policy Number: MPC-S9	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

MANUAL HANDLING

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that Aged Care workers are at risk of sustaining a manual handling injury in the course of their work. The organisation seeks to reduce the risk of employees sustaining a workplace injury.

Blackall Tambo Regional Council, Tambo Multipurpose Centre seek to minimise the chances of manual handling injuries to staff and volunteers when carrying out their duties, as well as any potential risk posed to clients, by implementing the following:

- The identification of suitable lifting or moving equipment will form part of assessment and care planning, with referral and advice sought from appropriately trained professionals where required.
- All staff will be required to use any designated lifting devices or other mechanical aids prescribed for the safe care and support of an individual client and moving supplies.
- All staff will be trained in manual handling techniques and are required to participate in refresher courses when offered.
- Staff should lift according to their capacity, but **not** exceeding 16kg. *(Lifting any weight between 16 and 55 kg is potentially hazardous. No one should lift anything heavier than 55 kg without a mechanical aid – National Code of Practice for Manual Handling)*
- Mechanisms for the identification of hazards associated with manual handling, including risk assessment systems, are to be used and reassessed annually.

RESPONSIBILITIES

Executive Management

- Ensure all staff have access to manual handling training.
- Provide sufficient resources to ensure safe working practices.

Manager

- Ensure work supports safe manual handling practices.
- Ensure client needs are appropriately identified during assessment and care planning, referring to the relevant health professional.



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- Ensure staff participate in manual handling training when offered.
- Ensure that bulk purchases of items do not exceed the safe lifting capacity of staff members or if they do, there is an alternate lifting/transport device present.

Support Worker

- Use safe manual handling practices and provided equipment.
- Participate in any manual handling training provided.
- Comply with any instruction given regarding manual handling tasks undertaken in the workplace.
- Notify the Coordinator of any faulty lifting equipment or fixtures or fittings that increase the risk of manual handling practices.

PROCEDURES

Lifting General

- Use equipment, e.g. hoists or trolleys where present and identified.
- Lift only as a last resort, preferably using a two person (team) lift where staff have been trained in the correct technique.
- Test the weight of the object to be lifted by raising up one corner.
- Adopt a wide base, bend your knees and brace your abdominal muscles.
- Keep the object close to your body.
- Rise in stages, e.g. from the floor, to chair, to table.
- Gain assistance from another worker.
- Do not attempt to lift any item over 16kg weight; heavier than 16kg items should be broken down into smaller components where possible.

Lifting a Person

- All people are to be lifted using an appropriate hoist where available.
- Encourage clients to kneel and push themselves up off the ground.
- Never pull an elderly client up from the ground using their arms.
- Where a hoist is inappropriate or unavailable, and the client requires support to rise from the ground, the support worker may assist by moving the aid (wheelchair, walker or vehicle) closer to the client to lift themselves.

Bending

- Bend your knees, not your back.
- Use equipment, e.g. long handled mop.
- Alternate activities to limit the risk of injuries due to repetitive tasks.
- Encourage the client to participate to limit the amount of bending over that a staff member needs to do.



Pushing and Pulling Tasks

- Push rather than pull.
- Stand up straight; don't bend over the load.
- Hold onto the trolley/wheelchair with both hands.
- Ensure the weight of the load is safe for you to push.
- Break up a larger package into several loads of lighter weights.

Manual Handling Injury

Early reporting allows the workplace to respond and prevent further injuries, reducing the likelihood of long-term disability for the individual worker.

- Where a staff member sustains a back injury or suffers from symptoms of back injury, they are to seek medical treatment immediately and inform their supervisor as soon as possible.

Documentation

- Where a manual handling injury has occurred, this must be documented as a workplace incident.

Equipment

- All manual handling equipment, including wheelchairs and hoists, must be checked regularly and serviced annually.
- Any equipment found to be faulty should be clearly labelled as faulty and removed from use for repair or replacement.
- All client equipment must be purchased in consultation with a relevant professional to ensure the correct equipment is identified.
- Where the organisation supplies equipment as part of a service, the care plan will identify who is responsible for repair and maintenance.

RELATED LINKS AND REFERENCES

Manual handling: www.safeworkaustralia.gov.au

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Work Health and Safety (National Uniform Legislation) Act 2011

Charter of Aged Care Rights

Aged Care Standards, specifically Standard 1, 2, 3, 4, 5, 7 and 8

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Guidelines

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland



REVIEW TRIGGERS

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VARIATIONS

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This policy/procedure is to remain in force until it is changed.



Tambo Multipurpose Centre Policy

Policy Number: MPC-S10	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

PHYSICAL ASSETS AND EQUIPMENT

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the importance of proper asset identification, correct operation or use of assets, as well as regular, planned maintenance and repair as a means of ensuring efficient operation and safe work practices.

- All plant and equipment will be maintained according to the organisation's asset management practices and schedules.
- Plant and equipment are to be used and maintained according to manufacturers' specifications and/ or recommendations.
- Identified assets may require the user to hold a licence or to have undertaken training in operation; only staff holding relevant licences or training may operate these assets. A register of licences and training will be maintained in this instance.
- New assets and equipment over the value of \$1000 are recorded in the organisation's asset register, and appropriate depreciation is applied to their values.
- Small value assets under \$1000 in value that are important to the operation and delivery of services, such as microwave ovens, printers or electronic tablets, should be listed under the aged care asset and equipment register.
- Any personal client equipment can only be purchased where the cost of the item is within the client's package budget, and the item must be assessed and approved by the appropriate Allied Health professional.

Where an asset has been purchased through an aged care specific grant, the asset must be utilised primarily for the purpose of service delivery or according to the purpose for which the grant was approved.

Aged Care assets may be shared with other departments within the organisation as a cost management strategy. Where different departments share an asset, the costs of purchase and maintenance should be shared.

RESPONSIBILITIES

Executive Management

- Oversee purchasing process of equipment, maintenance and repair services for Aged Care.



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- Oversee and review service Maintenance Plan/s and maintain associated registers.
- Approve relevant training related to equipment use associated with service delivery objectives.
- Ensure staff hold relevant qualifications, licences and/or have undertaken relevant training to use identified assets where applicable and manage associated registers.

Manager

- Alert the relevant department or position in your organisation of urgent repairs and maintenance as required. e.g. toilet blockages or electrical faults.
- Complete maintenance requests on time and log with the relevant department or position in your organisation.
- Purchase equipment, maintenance and repair services for Aged Care up to the delegated limit.
- Purchase personal equipment for Home Care Package clients according to the care plan, individual budget and recommendations from Allied Health professionals.
- Review the centre Maintenance Plan and associated registers on an annual basis, alerting Management to any issues.
- Inform Management of training required related to the safe and effective use of equipment.

Care Staff

- Use and maintain all plant and equipment, including vehicles, according to the manufacturer's directions.
- Only use plant and equipment where appropriate licences and training are held.
- Advise the Manager of equipment issues, e.g. broken washing machine or blocked sink.
- Advise the Manager of any client equipment needs or repairs.

PROCEDURES

All requests for personal aids and equipment for clients must follow the organisational purchasing policy.

Use of Equipment

The following protocols apply to all staff required to use equipment in the course of their duties:

The Workplace Health & Safety Policy must be followed.

- If the staff member is **inexperienced** in using equipment, appropriate training must be provided first.
- Any hazards/faults must be reported to the Manager. The Manager will then report to the organisation's WH&S Officer / delegated safety representative or address as appropriate.
- Equipment belonging to the Aged Care Service is not to be loaned or removed from the Centre unless it is used for organisational work-related purposes without the permission of Management.



- All electrical equipment is to be tested and tagged according to legislation.
- All equipment is to be used and maintained in accordance with manufacturers' specifications and/or recommendations.

RELATED LINKS AND REFERENCES

Guide to Depreciation ATO <http://bit.ly/2E9VIm0>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Work Health and Safety (National Uniform Legislation) Act 2011

Charter of Aged Care Rights

Aged Care Standards, specifically Standard 5 and 8

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Guidelines

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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VERSION AND REVISION INFORMATION

Authorised by: [The position responsible for authorising this policy/procedure]	Original version #1: [August 2019]
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Blackall-Tambo **Regional Council**

Policies and Procedure maintained by: [the position responsible for maintaining policy/procedures]	
Review date: [Date]	This version: [#1]



Tambo Multipurpose Centre Policy

Policy Number: MPC-S11	Effective Date: 16 February 2021
Version Number: One	Review Date: 16 February 2022
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

SERVICE ENVIRONMENT SAFETY AND SECURITY

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre acknowledges that effective Management of the physical service environment is important in supporting the safe delivery of aged care services and providing a welcoming space for clients that is culturally safe.

To do this, the organisation will:

- Maintain a clean and tidy service environment
- Have documentation and practices in place to support the maintenance of a safe and secure service environment
- Conduct regular audits on the service environment
- Monitor relevant regulations and legislation
- Ensure regular completion of mandatory testing, e.g. test and tag, fire safety
- Have a maintenance schedule in place that is regularly monitored and actioned
- Ensure that building planning and modifications consider the needs of clients, staff and visitors
- Take a pro-active approach to monitoring and addressing hazards
- Have systems that support building security.

Premises used to prepare meals under a commercial arrangement, including delivered meals, must meet the National Food Safety Standards.

Blackall-Tambo Regional Council, Tambo Multipurpose Centre will adequately maintain buildings used to provide aged care services, including food preparation areas, to the required standard.

RESPONSIBILITIES

Executive Management

- Ensure processes for monitoring and managing the physical environment are in place and identified hazards and risks are addressed in a timely manner.
- Monitor compliance of buildings against legislated Standards.
- Ensure maintenance schedules and mandatory testing relating to Aged Care buildings and facilities are completed in a timely manner.
- Ensure the service centre has a valid Food Premises certificate in place.



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- Maintain a register of keys for all Aged Care buildings.
- Consult with clients and key stakeholders when planning new Aged Care infrastructure or building modifications.

Manager

- Monitor the service environment, addressing or escalating any identified issues in a timely manner.
- Conduct a regular risk assessment of the service environment.
- Undertake maintenance activities within the scope of the role, delegating to Support Workers where appropriate.
- Provide access to contractors engaged to complete scheduled or emergency maintenance tasks.
- Maintain security of Service Centre keys.
- Ensure staff are informed of and can follow any Centre opening and closing procedures.
- Report any security breaches to Management and contact the Police where relevant.
- Implement contingency plans as identified by Management in the event of damage and/or risk to security.

Support Worker

- Maintain a clean and tidy service environment, ensuring that identified hazards are addressed and/or reported in a timely manner.
- Undertake maintenance activities as directed by the Manager or within the job role.
- Take responsibility for any keys/entry passes issued, reporting any loss or theft as soon as practical.
- Report any threat or potential threat towards the building or assets to Management.
- Comply with the organisation's policy regarding security and maintenance of the property.

Note: Blackall-Tambo Regional Council, Tambo Multipurpose Centre is not responsible for staff belongings left or stored at the Centre.

PROCEDURES

Maintenance of Service Environment

- The service area is to be left clean and tidy at the end of the day.
- All hazards, e.g. spills, are to be addressed as soon as practical, safety signage is to be used where appropriate.
- The service environment accessed by clients and visitors is to be kept free from clutter and emergency exit points clear of obstruction.
- Weekly and monthly audits and maintenance activities are to be undertaken and relevant documentation completed and placed on file as evidence.



Blackall-Tambo **Regional Council**

- Mandatory testing of equipment will be planned and occur according to the written maintenance schedule. Any failure in safety or security equipment must be reported to Management as soon as practical.

Staffing levels

- The Aged Care centre will be staffed by a minimum of two staff wherever possible during operational hours.
- Where only one staff member is available, and they need to leave the Aged Care Centre, the building must be secured.
- Contractors engaged to complete regular, or emergency maintenance tasks must be supervised where there are clients on site or when working in an area where there are sensitive documents.

Keys

- A key register will be maintained to monitor keys.
- The position responsible in your organisation is responsible for ensuring the key register is up to date.
- Duplication of keys is not allowed. The Executive Manager must authorise any key cut.
- The Manager is responsible for ensuring the security of the building on a day-to-day basis.
- No after-hours access to the Centre is permitted except where there is express permission from Executive Management.

Filing Cabinet and Storage Area Keys

- The Manager holds the keys to filing cabinets and storage areas.
- The cabinet/s and storage areas must be kept locked at all times when the Service is unattended.
- The cabinet/s and storage areas are secured when visitors to the Centre and staff are not actively using the areas where the file cabinet/s or storage areas are located.

RELATED LINKS AND REFERENCES

Food Standards Australia and New Zealand
<http://www.foodstandards.gov.au/Pages/default.aspx>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Privacy Act 1988 (Cth)

Aged Care Standards, specifically Standards 5, 7 and 8

National Food Safety Standards

NDIS Practice Standards 2 and 4

REVIEW TRIGGERS

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Blackall-Tambo **Regional Council**

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VARIATIONS

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Tambo Multipurpose Centre Policy

Policy Number: MPC-S12	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

SMOKING AND TOBACCO USE

POSITION STATEMENT

Our position statement outlines our rules regarding smoking in the workplace, it applies to staff, clients, visitors, and sub-contractors, which is consistent with State/ Territory legislation. In particular, we seek to:

- Protect non-smokers from second-hand smoke
- Uphold a clean and tidy workplace
- Avoid setting off smoke detectors and other alarms
- Avoid the risk of fires from discarded or unattended cigarettes
- Minimise the risk of burns to clients or staff
- Promote a smoke free work environment and encourage a smoke free workplace.

The organisation must abide by WH&S legislation, and therefore smoking of tobacco/cigarettes* is not permitted in any organisation building or vehicle. Staff, clients, visitors and sub-contractors may only smoke in designated smoking areas. Where possible, a designated, signed outdoor area will be identified where clients and their carers can smoke. Staff who smoke may use this area.

The organisation enforces a 'No Smoking' Policy in all its buildings and vehicles.

- No smoking within 5 metres of Aged Care buildings, client homes, vehicles, and food preparation areas.
- Clients are asked to refrain from smoking whilst staff are present.
- Staff will not smoke tobacco* while they are on duty.

** This includes all tobacco products and tobacco substitutes, including e-cigarettes (vapes)*

ANY DESIGNATED SMOKING AREAS MUST:

- Be located outdoors and be well ventilated to ensure no smoke will drift indoors
- Be located away from public areas, so there is no impact on either the service or visitors
- Designated smoking areas must be out of view of the group and social areas.



WILD TOBACCO/ CHEWING TOBACCO

Pituri (also known as Mingkulpa) is derived from a wild tobacco plant, and the leaves are dried and mixed with burnt ash from specific trees. The mixture is then chewed and held in the mouth for long periods of time. It has high levels of nicotine and has similar addictive properties as tobacco, and may also cause health problems.

The organisation recognises the right of clients and staff to use Pituri or chewing tobacco, however:

- Staff are not permitted to use or retain chewing tobacco against their skin while on duty.
- Clients must dispose of used Pituri/ Chewing tobacco appropriately, i.e. not spit out on the service centre floor, vehicles, or other internal or external areas associated with the service environment.

RESPONSIBILITIES

Executive Management

- Ensure designated smoking areas are identified or highlighted to relevant staff and clients.
- Monitor and promote the 'No Smoking' policy at all service sites.
- Ensure all staff have access to training on the smoking policy and use of tobacco in the workplace.
- Promote a smoke free environment and provide relevant information and resources to support this.

All Staff

- Abide by and uphold the organisation's 'No Smoking' Policy.
- Smokers are only permitted to smoke tobacco during normal identified break times.
- Smokers must wash their hands thoroughly after taking a smoke break and ensure that their clothing and breath do not adversely impact clients.

Manager

- Uphold the 'No Smoking' policy within the workplace at all times; and
- Promote a smoke free environment and provide relevant information and resources to support this.

Support Worker

- Ensure clients using the centre are aware of the no-smoking policy for organisation buildings and vehicles and that smokers are aware of designated smoking areas.
- Ensure all cigarette butts are placed in fireproof containers, and designated smoking areas used by clients are clean and tidy and do not negatively impact other clients or staff.

PROCEDURES



Smoking breaks

- Staff who choose to smoke must do so during their own time or within paid break periods.

Smoking with service users

Staff have a duty of care to safeguard the health and safety of clients. Staff should:

- Not smoke in the presence of clients
- Refrain from using tobacco as a means of engaging with clients
- Not purchase tobacco products for clients or supply tobacco products to them.

Home visits and other settings

To support staff, this organisation will:

- Inform clients of their responsibility to provide a safe working environment for support workers
- Request that clients do not smoke during home visits or other meetings
- Provide management support in the event that clients do not cooperate with the policy/procedure
- Negotiate arrangements for smokers participating in social group activities and excursions.

RELATED LINKS AND REFERENCES

Tobacco in Australia, Legislation to ban smoking in public spaces
<https://www.tobaccoaustralia.org.au/chapter-15-smokefree-environment/15-7-legislation>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Work Health and Safety (National Uniform Legislation) Act 2011

Charter of Aged Care Rights

Aged Care Standards, specifically Standard 1, 2, 5, 6, 7 and 8

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Guidelines

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

NDIS Practice Standards 1, 2 and 4

REVIEW TRIGGERS

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Tambo Multipurpose Centre Policy

Policy Number: MPC-S13	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

VEHICLE USE AND VEHICLE ACCIDENT

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that vehicles that are purchased and used for the delivery of aged care services must be fit for purpose and available for the delivery of services at the time they are required.

Fit for purpose includes an acceptable state of cleanliness for the delivery of meals, the ability to safely transport clients with specific mobility needs and good accessibility for all aged care consumers. It also recognises that vehicles will be suitable for the climate and client group, and the organisation will ensure that vehicles will be able to address extremes in ambient temperature to support client comfort at the time of service delivery

The organisation has a comprehensive Vehicle Policy. Staff should access the full policy document for more information or contact Management for clarification.

- Staff must hold an appropriate licence for the vehicle they are driving.
- Where vehicles are shared between departments, a vehicle must be available to the aged care services at key service delivery times.
- A daily vehicle pre-start shall be undertaken daily, noting any maintenance/repairs where required.
- The vehicle log book must be completed by the user each time the vehicle is used.
- A vehicle checklist and pre-start should be completed before any trips away from the community. A copy of this checklist should be kept in the service centre, with a copy given to Management.
- All vehicle users will ensure that the vehicle is left clean and maintained to the appropriate standard.
- Vehicles are not to chase bush tucker or carry large animals such as kangaroos inside the vehicle.
- The vehicle is never to be used as a tow vehicle.
- Camping in the vehicle is not permitted.
- Any damage to the vehicle must be reported to Management as soon as possible.
- A vehicle that does not meet Roadworthy Standards or health standards for the transportation of food (where applicable) shall not be used by the service workers.



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- When travelling away from immediate service area/community, e.g. driving to remote locations, the driver must notify the intended time of arrival at alternative location or expected return time. It is the responsibility of the driver to advise if there are any changes.
- Fuel is available from Ampol and payment for fuel is via fuel card
- Only persons employed by the organisation and on duty are to drive the vehicles.
- The vehicle must be returned to the designated area after the completion of each shift.

Executive

- Management to ensure the procurement of suitable vehicles for the delivery of aged care services.
- Asset management related duties regarding any vehicle purchase.
- Advise family members/ next of kin where staff or clients have been involved in a vehicle accident that requires medical attendance.
- Provide access to counselling services where staff or clients have been involved in a vehicle accident.

Manager

All day to day aspects of maintaining and operating Aged Care vehicles are the responsibility of the Manager.

The Manager must ensure:

- Fleet Manager is kept informed of service requirements regarding vehicles and their use.
- Report any accidents or incidents involving vehicles to the relevant person in your organisation, completing any required documentation.
- Repairs and maintenance issues are reported in a timely manner.
- Vehicles are maintained in a clean and tidy state.
- All staff using the vehicles are aware of and adhere to the organisation's policy.
- Submit vehicle checklists as per organisation policy to the relevant area, e.g. fleet management.
- Ensure all staff that drive the vehicle/s have current, valid driving licences.

Support Worker

- Abide by all vehicle checklists and procedures.
- Check the vehicle before and after use and report any problems and/or damage to the Manager.
- Advise the Manager where a driving disqualification has been incurred.

PROCEDURES



Vehicle Use - Activities

If staff are going to take a vehicle outside of the community **for any reason**, they need to let the Manager know.

If an activity using the vehicle is taking place away from the immediate service site or community, e.g. a trip to another community, to town or a bush trip, ensure that:

- Permission is sought and obtained from the Manager for all offsite trips.
- The vehicle has a roadworthy spare tyre.
- The spare tyre has air in it.
- The jack is in the vehicle, and staff using the vehicle understand how to use this.
- Check the oil and water in the vehicle.
- There is a first aid kit in the vehicle.
- There is enough fuel to get where they need to go.
- There is sufficient drinking water (minimum two (2) litres/person).
- A satellite phone or radio, if available, is taken, and staff are trained in how to use it, where the vehicle is likely to be travelling in areas where there is no mobile phone reception.

Motor Vehicle Accident

If staff have a motor vehicle accident or come across an accident or traffic hazard, the following procedure is to be followed:

- Stop the vehicle.
- Where possible, ensure the vehicle is not going to be a traffic hazard.
- Where possible, remove or direct any people to move away from danger.
- Report the accident to the relevant authority, e.g. Police.
- NOTE: Call 000 or 112 (from a mobile phone) if an accident is serious.
- Report the accident to the Manager (via phone if accessible/ within range).
- Instruct a passenger to redirect traffic (if possible and safe to do so).
- Offer assistance to anyone who may be injured.
- Record the names and addresses of anyone who might witness the accident or other driver if applicable.
- If staff or clients are involved in a vehicle accident whilst using or travelling in an aged care vehicle, their family/ next of kin will be advised.

Any accident involving staff or clients must be recorded on an incident/accident form and reported to Management.

RELEVANT STANDARDS AND LEGISLATION

Work Health and Safety Act 2011 (Commonwealth)

Aged Care Standards, specifically Standards 4, 5, 7 and 8

NDIS Practice Standards 2 and 4



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Tambo Multipurpose Centre Policy

Policy Number: MPC-S14	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2023
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

VIOLENCE TOWARDS EMPLOYEES AND LOCKDOWN PROCEDURES

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that any of its employees in the course of their duties may, at some stage, potentially face violent situations. Whilst many incidents are relatively minor, involving only threats of abuse, some incidents are more serious. Blackall Tambo Regional Council, Tambo Multipurpose Centre will ensure that everything possible is done to reduce the risk.

Blackall Tambo Regional Council, Tambo Multipurpose Centre aims to mitigate the physical and psychological impact of aggressive behaviour to its staff through:

- Risk assessment practices
- Identifying high risk individuals
- Developing strategies for aggression minimisation, diversion and prevention
- Dealing with the consequences of aggressive incidents in a timely and appropriate manner.

Blackall Tambo Regional Council, Tambo Multipurpose Centre has a 'Zero Tolerance' policy on aggressive behaviour towards its staff and will endeavour, as far as is reasonably practicable, to reduce the risk of violence, aggressive, or threatening behaviour towards its employees during the course of their work by:

- Conducting an induction process that includes cultural awareness training for staff
- Being aware of and sensitive to inter-family, community tensions
- Improving employee interpersonal skills through training
- Implementing work safe methods.

Blackall Tambo Regional Council, Tambo Multipurpose Centre will not discriminate against supporting clients with a history of aggressive behaviour or where their family member/s may have a history of aggressive behaviour; however, the service upholds the right to suspend or modify services where there is the possibility of or injury to a staff member.

The organisation will seek to reduce aggressive incidents by:

- Employing local, language speaking staff; and
- Providing relevant guidance and training to employees.



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Blackall Tambo will support employees who have become victims of violence and aggression during their work by:

- Assisting with the identification of the assailant(s) or aggressor(s).
- Allowing paid time off to both victims and witnesses to assist Police investigations and court appearances.
- Assisting employees to obtain confidential counselling and support services.

LOCKDOWN

A lockdown is an emergency protocol initiated when staff believe that there is a credible threat to client and staff safety. Lock downs are used to protect clients, visitors and staff from immediate threats such as violent people, bomb threats, and other forms of violence.

Blackall Tambo Regional Council, Tambo Multipurpose Centre will ensure that the service centre can initiate a lockdown procedure should this be required and that all staff are aware of the lockdown procedure to support client, visitor and staff safety.

RESPONSIBILITIES

Executive Management

- Conduct a general risk assessment for all duties carried out by care staff, assess the risk level, and make recommendations for safe work practices.
- Ensure that the service centre can initiate lockdown processes.
- Respond to concerns raised by the Manager about the safety of staff members dealing with aggressive incidents.
- Support staff members who have become victims or witnesses of an aggressive incident.
- Ensure all staff have access to aggression minimisation training.

Manager

- Ascertain potential risk to staff from clients or family members during assessment and care planning.
- Support all direct support workers who have become victims of or witnessed an aggressive incident.
- Train staff or support the training of staff in aggression minimisation.
- Report to the Executive Management all aggressive incidents, even where there has been no direct physical injury.
- Whilst still adhering to privacy policies, the Manager has an obligation to make known to support workers any concerns or knowledge they have of a client or client's family member who displays aggression, including any known triggers for aggressive behaviour.
- Assist clients in accessing relevant support(s) affected by an incident, e.g. medical attention, psychological support, removal from potential threat/ situation that places clients 'at risk'.
- Assist clients to access support services to help them with anger management issues.



Support Worker

- Complete aggression minimisation or challenging behaviours training when offered.
- Act reasonably with clients, their families and other staff members at all times, leaving aside all personal prejudices.
- Show respect to all clients, family members and other staff members in the course of your duties.
- Complete an incident form in the instance of an aggressive incident involving a client, family member or other staff member.

PROCEDURES

Aggressive Behaviour/Threat

- Where a client or family member has a known history of violence or aggression, two staff members are to attend to the client or be present when the client is receiving a service.
- All direct care work should be carried out within daylight hours as far as practical.
- Where possible, staff must ensure management is aware of their location and carry either a mobile phone or other communication device when working away from the service centre or are working separately from other staff members.
- Should a client or their family member behave in an inappropriate manner or become aggressive, staff must leave the client's home/room immediately.
- Where there has been a serious physical assault (any injury resulting in cuts, multiple bruising or any trauma to the head area), the staff member must attend the health centre for a check up and clearance to return to work.
- All aggressive incidents should be documented on the appropriate incident form and any witness testimonies as soon after the incident as possible.
- Where the organisation cannot guarantee the safety of its staff due to aggressive incidents within the community or individual's household, the organisation may suspend services on the grounds of staff safety.

Lockdown

In the event of an incident, e.g. an aggressive trespasser or serious incident outside the service centre that can place staff or clients at risk, the lockdown procedure should be followed.

- The staff member who is the first to identify an issue or potential issue must attempt to alert management, or the most senior staff member on site at the time, to the incident.
- Where required, call 000 or the local police, fire or ambulance as soon as possible.
- Move all clients away from potential harm or aggressors where possible and assist them to a safe location where they can sit and wait quietly.
- Close and lock all doors and windows, turn off lights where necessary.
- Calm any clients who are or become agitated.
- Alert management if not already contacted and advise what has happened, your response and the current situation.



- Staff are to remain in contact with and take advice from emergency services personnel where present, or senior management, before cancelling the lockdown procedure.

Relevant Standards and Legislation

Aged Care Standards, specifically Standards 5, 7 and 8

Work Health and Safety Act 2011 Queensland

NDIS Practice Standards 2, 4 and 7

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Tambo Multipurpose Centre Policy

Policy Number: MPC-S15	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

WORK HEALTH AND SAFETY POLICY

RATIONALE AND DEFINITIONS

Blackall Tambo Regional Council, Tambo Multipurpose Centre has a responsibility under the Work Health and Safety Act 2011 to uphold the principle that workers and other persons (e.g. clients, visitors, contractors etc.) should be given the highest level of protection against harm to their health, safety and welfare from hazards and risks arising from work as is reasonably practicable.

The *WHS Act* promotes protecting staff and others from harm by eliminating or minimising risk and encouraging consultation and cooperation when resolving issues, taking a constructive approach to continuous improvement in health and wellbeing in the workplace, and supporting education and training in maintaining a safe workplace.

REASONABLY PRACTICABLE

In this Act, ***reasonably practicable***, in relation to a duty to ensure health and safety, means that which is, or was at a particular time, reasonably able to be done in relation to ensuring health and safety, taking into account and weighing up all relevant matters including:

- a. the likelihood of the hazard or the risk concerned occurring;
- b. the degree of harm that might result from the hazard or the risk;
- c. what the person concerned knows, or ought reasonably to know, about:
 - i. the hazard or the risk; and
 - ii. ways of eliminating or minimising the risk.
- d. the availability and suitability of ways to eliminate or minimise the risk; and
- e. after assessing the extent of the risk and the available ways of eliminating or minimising the risk, the cost associated with available ways of eliminating or minimising the risk, including whether the cost is grossly disproportionate to the risk.

DUTY OF CARE

Everyone has a 'Duty of Care'. It is broadly described as 'Doing the right thing'. This means:

- **The employer** shall do everything reasonably practical to protect the health and safety of all people working in the workplace. This includes employees, contractors, visitors and clients.
- **The employee** shall take care to look after their health and safety and the health and safety of all people who may be affected by their actions in the work environment.



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- **Duty of Care** is a moral or legal obligation to ensure the safety or wellbeing of others. All people in society have the right to safety, protection and quality standards of care. As a paid worker or volunteer, you are employed in a professional capacity, therefore, you owe a duty of care to the client while working with them.

Any act that has reasonably foreseeable consequences indicates a breach of duty of care and could constitute legal action for negligence.

DIGNITY OF RISK

is a term used to describe the right of individuals to choose to take some risk in engaging in life experiences. It may also be referred to as '**respecting client choice**'.

CLIENT

The term '*client*' infers any aged care client, resident, consumer or disability participant.

MANAGEMENT

In all policies and related procedures, the term 'Management' refers to the Aged Care Manager and may also include other personnel from the Executive and/or Management Team.

ORGANISATION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre aims to ensure that staff, clients and others who interact with the aged care service do not suffer harm to their health, safety and welfare due to any action or inaction by the organisation and its staff. The organisation will consider and weigh up all relevant matters and ensure that all reasonably practicable actions are taken to ensure the safety of those who interact with or work in our aged care service.

While the organisation recognises the right of a client to take on risks, the organisation will promote duty of care amongst staff by enacting the following:

- Educating staff to provide due care and consideration to clients of the service to avoid any physical, financial, sexual or psychological harm or loss may be considered negligence.
- Staff will not provide financial, dietary or legal advice to clients.
- Staff will not recommend any service without consultation with the Aged Care Manager.
- Where staff encounter difficult decisions about the duty of care and/or dignity of risk, they will consult the Aged Care Manager.
- Workers have an absolute duty to take reasonable care that their acts or omissions do not adversely affect the health and safety of other persons.

RESPONSIBILITIES

Executive

- Provide direction and support to staff, including arranging relevant education sessions on the practical aspects of upholding the *Work Health and Safety Act 2011* in their role.

All Staff

- Carry out work in such a way as to uphold the principles of the *Work Health and Safety Act 2011*, including recognition of their personal 'duty of care' and following identified policies and procedures.

Coordinator

- Uphold organisational policy and procedures relating to supporting the *Work Health and Safety Act 2011*, ensuring that staff are aware of and assisted to follow identified policies and procedures.

Support Worker

- Take reasonable care for the worker's health and safety and the health and safety of others while at work.
- Follow reasonable directions given by, or on behalf of, the employer on issues related to health or safety.
- Use relevant safety equipment provided for the worker's use.
- Report a workplace accident to the employer as soon as practicable after it occurs.

A worker must not:

- Intentionally or recklessly interfere with or misuse safety equipment provided by the worker's employer.
- Intentionally create a risk to the health or safety of another in the workplace.

APPROACH

- Potential risks and hazards are reported and managed as per the organisation's policies and procedures.
- At the time of orientation, new staff are provided information on relevant Work Health and Safety principles, including duty of care, the law relating to negligence and how to deal with situations where a client is at risk of exploitation, abuse or personal loss.
- Staff will assist clients in making an informed choice by providing them with information about the benefits and risks involved in activities and completing relevant documentation.
- Where a client chooses to undertake an activity that could harm them and understands the risks involved, this should be discussed with family members (where relevant) and noted in the client's file notes.
- Clients are provided service/s only by staff that have sufficient knowledge and training to undertake the duties required.
- Where clients have intellectual difficulties, including dementia, memory loss and similar disorders, staff will take advice from family and health professionals on client participation in risk taking activities.
- Staff are to ensure their health does not place clients at risk by observing universal precautions.



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- Staff must use relevant safety equipment that has been supplied. Where they are unfamiliar with the use of any equipment, they need to identify this with the Coordinator and gain training.
- Staff must report any concerns about a client to the Manager.

RELATED LINKS AND REFERENCES

Work Health and Safety <https://www.worksafe.qld.gov.au/laws-and-compliance/workplace-health-and-safety-laws/laws-and-legislation/work-health-and-safety-act-2011>

Worker Rights and Responsibilities <https://worksafe.nt.gov.au/laws-and-compliance/worker-rights-and-responsibilities>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Work Health and Safety Act 2011 (Commonwealth)

Charter of Aged Care Rights

Aged Care Standards (All)

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Guidelines

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

NDIS Practice Standards 1, 2, 3, 4, 5, 6, 7 and 9

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Tambo Multipurpose Centre Policy

Policy Number: MPC-HR1	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

BULLYING, HARASSMENT AND DISCRIMINATION

ORGANISATION STATEMENT

Blackall Tambo Regional Council Tambo Multipurpose Centre believes that all people should work in an environment free from harassment and bullying and understands that workplace bullying is a threat to the health and wellbeing of its staff, volunteers and residents.

Accordingly, the organisation is committed to eliminating, so far as is reasonably practicable, all forms of workplace bullying and harassment by maintaining a culture of openness, support, and accountability.

Blackall Tambo Regional Council Tambo Multipurpose Centre has a duty of care to provide a safe workplace and ensure, so far as is reasonably practicable, that workers and other people are not exposed to health and safety risks, including those that impact a person's mental wellbeing. Any reported allegations of workplace bullying or harassment will be promptly, thoroughly, and fairly investigated.

Any complaints relating to bullying and/or harassment will be handled in a confidential and procedurally fair manner. Where confidentiality cannot be guaranteed, this will be clearly communicated to the relevant parties. All parties will be treated with respect.

The person against whom the allegation is made has the right to natural justice (the right to know what is alleged against them, the right to put their case in reply, and the right for any decision to be made by an impartial decision-maker).

DEFINITIONS

Harassment is defined as any type of behaviour that:

- The other person does not want and does not return
- Offends, embarrasses, or scares them, and is either:
 - Sexual, or
 - Targets them because of their race, sex, pregnancy, or other protected attributes.

Examples of harassment includes:



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- Telling insulting jokes about particular racial groups
- Sending explicit or sexually suggestive emails or text messages
- Displaying racially offensive or pornographic posters or screen savers
- Asking intrusive questions about a person's personal life including their sex life

Bullying, as defined by the *Fair Work Amendment Act 2013*, is repeated and unreasonable behaviour directed towards a worker which creates a risk to health and safety. It includes behaviour that could be expected to intimidate, offend, degrade, humiliate, undermine or threaten.

Examples of behaviour, whether intentional or unintentional that may be considered to be workplace bullying if they are repeated, unreasonable and create a risk to health and safety include but are not limited to:

- behaving aggressively towards others
- teasing or playing practical jokes that demean another person
- deliberately excluding someone from work-related events
- withholding information or resources that is vital for effective work performance
- setting unreasonable timelines or constantly changing deadlines
- spreading misinformation or malicious rumours

Workplace bullying can be carried out in various ways, including through email, text, or social media channels.

Workplace bullying can occur between workers, from managers to workers or workers towards supervisors/managers. Workplace bullying can also be directed at staff by clients and/or their carers or family members.

Discrimination happens when a person, or a group are treated less favourably than another person or group because of their background or certain personal characteristics.

Indirect discrimination occurs when an unreasonable rule or policy applies to everyone but has the effect of disadvantaging some people because of a personal characteristic they share.

"**Unreasonable behaviour**" is behaviour that a reasonable person, having considered the circumstances, would see as unreasonable, including behaviour that is victimising, humiliating, intimidating or threatening.

What is not bullying

Differences of opinion, performance management, conflicts and personality clashes can happen in any workplace, but usually they are not considered as, or result in, bullying.

Reasonable performance or management actions are not considered workplace bullying if they are carried out in a reasonable manner.

Examples include but are not limited to:

- setting reasonable performance goals, standards and deadlines
- deciding not to select a worker for promotion where a reasonable process is followed



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- informing a worker about unsatisfactory work performance in an honest, fair and constructive way
- taking disciplinary action, including suspension or terminating employment if relevant.

Bullying that directly inflicts physical pain, harm or induces fear in an individual amounts to assault and should be dealt with as a police matter.

RESPONSIBILITIES

All Staff

It is the obligation and responsibility of every person to ensure that the workplace is free from harassment and bullying and does not occur in the workplace.

All staff have:

- the right to work in a safe and healthy workplace and to be treated with dignity and respect
- the right to make a complaint against harassment or bullying behaviour
- the responsibility to not promote or engage in harassment or bullying, taking reasonable care to ensure their acts or omissions do not adversely affect the wellbeing of other people

Management

It is the responsibility of Management to ensure that:

- They understand and are committed to the right of all staff, including volunteers, to a workplace that is free from bullying, harassment or discrimination
- They provide an environment that discourages harassment, bullying and discrimination, setting an example by their behaviour
- All reasonable steps to eliminate harassment and bullying are made
- All applicable occupational health and safety legislation is observed
- Staff, including volunteers, receive training and are made aware of their obligations and responsibilities to supporting a workplace that is free from harassment, bullying and discrimination
- All complaints are treated seriously and confidentially and allegations of workplace bullying, harassment or discrimination are investigated and addressed appropriately
- They monitor and respond to behaviours and trends that may indicate harassment, bullying or discrimination is occurring in the workplace, whether complaints are received or not
- They take immediate and appropriate action if they become aware of any harassment, bullying or offensive behaviour
- Ongoing support and guidance are provided to management, employees and volunteers in relation to the prevention of harassment or bullying

PROCEDURES

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The offending person (respondent) may be unaware that their actions or words are inappropriate or constitute bullying, harassment or discrimination. While this is not an excuse for accepting the behaviour, the respondent should be made aware of the issues and be provided with the opportunity to explain their viewpoint where relevant.

COMPLAINTS PROCEDURES

Where the staff member or volunteer feels comfortable in doing so, it is preferable they raise the issue with the offending person directly with the aim of resolving the issue through discussion. The employee or volunteer should identify the offensive behaviour, explain that the behaviour is unwelcome and offensive and ask that the behaviour stops.

If the behaviour continues, or if the employee or volunteer feels unable to speak to the person(s) directly, they should contact their direct supervisor or other organisation personnel with whom they feel comfortable to address the issue on their behalf.

INFORMAL INTERVENTION

The Manager/Supervisor should:

- Review the reported behaviour and determine whether the complaint appears to indicate an incident of bullying, harassment or discrimination has occurred as per this policy or legislation
- Approach the identified respondent (antagonist) to arrange a private interview to discuss the concerns raised
- Alert the respondent to the issues that have been raised and why the behaviour is inappropriate in relation to harassment, bullying or discrimination legislation and or organisation policy
- Provide the respondent with an opportunity to respond to the allegations made against them
- Work with the respondent to resolve the issue

Interventions at this stage should adopt a confidential, non-confrontational approach with a view to resolving the issue.

This procedure is complete when the alleged harasser respects the individual's request to cease unwanted and unwelcome behaviour, or when the complainant accepts that the behaviour is not properly described as bullying. If neither of these outcomes occurs, the organisation's formal procedure should be followed.

FORMAL COMPLAINTS PROCEDURE

The formal complaint procedure involves a formal investigation of the complaint. Formal investigations may be conducted internally by a relevant Human Resources professional or by an external investigator.

- Information should be collected about the complaint, including interviewing the complainant, the respondent and any witnesses
- Where relevant, the investigator may recommend that the respondent or complainant be stood down from work or provided with alternate duties (at their normal pay rate) during the investigation
- All interviews and other evidence is to be accurately and comprehensively documented including times, locations, personnel involved and recollections of specific incidents



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- The investigator will produce a written report on the findings and outcomes of the investigation including recommendations for resolution
- All parties involved in the investigation are to be kept informed about the investigation throughout the investigation process.
- On completion of the investigation all relevant parties will be informed of the outcome and any recommended actions

The findings as to whether harassment or bullying has occurred is based on evidence collected and the balance of probabilities.

As a result of the findings, possible outcomes of the investigation may include, but will not be limited to, any combination of the following:

- Counselling
- Official warning
- Disciplinary action (including an up to termination of employment)
- Request for formal apology, where appropriate, and an undertaking that the behaviour will cease
- Mediation where the parties to the complaint agree to a mutually acceptable resolution.

Following an investigation concerning a bullying, harassment or discrimination complaint (irrespective of the findings), the relevant person in your organisation will:

- Monitor the situation and wellbeing of both the complainant and the respondent; and
- Educate and remind all employees and volunteers of their obligations and responsibilities in relation to providing a workplace free from harassment, bullying and discrimination.

PROCEDURES FOR DEALING WITH CRIMINAL CONDUCT

In the case of severe bullying or harassment (including physical or sexual attack, obscene phone calls) the organisation will refer and support the complainant to seek support through the criminal justice system.

Note: It is not the obligation or duty of the organisation to report such matters to the police on behalf of the complainant.

RELATED LINKS AND REFERENCES

National Employment Standards <https://www.fairwork.gov.au/employee-entitlements/national-employment-standards>

Australian Human Rights Commission – Workplace Discrimination, Harassment and Bullying <https://humanrights.gov.au/our-work/employers/workplace-discrimination-harassment-and-bullying>

RELEVANT STANDARDS AND LEGISLATION

Age Discrimination Act 2004

Aged Care Act 1997 (Commonwealth)



Disability Discrimination Act 1992

Equal Employment Opportunity (Commonwealth Act 1987)

Fair Work Act 2009 (Commonwealth)

Privacy Act 1988 (Cth)

Racial Discrimination Act 1975

Sex Discrimination Act 1984

Blackall Tambo Regional Council Enterprise Agreement

Aged Care Standards, specifically Standards 6, 7 and 8

NDIS Practice Standards 1,2 and 3

REVIEW TRIGGERS

This procedure is reviewed internally for applicability, continuing effect and consistency with related documents and other legislative provisions when any of the following occurs:

1. The related documents are amended.
2. The related documents are replaced by new documents.
3. Industry, legislation or service agreement changes may necessitate modifications to policy and procedures.
4. Other circumstances as determined from time to time by a resolution of the Board.

Notwithstanding the above, the organisation may review this procedure annually for relevance and ensure its effectiveness.

VARIATIONS

The Management team reserves the right to vary, replace or terminate this policy/procedure from time to time.

This policy/procedure is to remain in force until it is changed.

Tambo Multipurpose Centre Policy

Policy Number: MPC-HR2	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

DISMISSAL AND EXITING STAFF

POSITION STATEMENT

While Blackall-Tambo Regional Council, Tambo Multipurpose Centre seeks to retain good quality staff, it is recognised that for a variety of reasons people will leave the organisation either through voluntary resignation, redundancy, redeployment, retirement or through a non-voluntary termination process.

It is also recognised that on occasion some individuals may abandon their job, providing no notice of an intent to return to their position to management.

Blackall-Tambo Regional Council Tambo Multipurpose Centre seeks to ensure the staff exit process is seamless, fair and follows all legislated requirements, as well as protecting the organisation and the people they support by ensuring the security of sensitive information and assets.

Blackall-Tambo Regional Council Tambo Multipurpose Centre will be fair and lawful, following due process and all actions will be in accordance with relevant Awards and Enterprise agreements.

TERMINATION OF EMPLOYMENT BY EMPLOYEE

Termination of the employment contract may be initiated by the staff member by resigning or retiring and giving due notice, by retiring, or by absenting him/herself from the workplace.

Staff are required to submit written notice of their intention to resign or retire in accordance with schedules in relevant Awards and Enterprise Agreements for "Notification of Termination by Employees".

TERMINATION OF EMPLOYMENT BY EMPLOYER

Dismissal within probationary period

Where staff are dismissed within their probationary period due to the individual not being a suitable match to the organisation or the role for which they were employed, they will be provided with a termination letter one week prior to the termination date.



Dismissal due to performance issues

Where an individual is dismissed due to performance issues, misconduct or breach of the organisation's Code of Conduct their employment may be terminated immediately. This applies to both paid employees and volunteers.

Examples of performance issues include:

- Unsatisfactorily carrying out of assigned duties
- Inefficiency or poor time management impacting on the service
- Not following procedures correctly
- Not adhering to the standards required for service delivery, or
- Deliberately or consistently breaching the rights of consumers.

REDUNDANCY/REDEPLOYMENT

If Blackall Tambo Regional Council Tambo Multipurpose Centre is required to reduce or redeploy staff numbers for operational reasons, management will consult with employees and their representatives about ways to avoid or minimise terminations and measures to minimise the impact on employees, including options for alternative employment.

NON ATTENDANCE AT WORK

Blackall Tambo Regional Council Tambo Multipurpose Centre expects employees to be ready to commence work at their rostered or agreed work timetable.

An employee who is unable to attend work at the designated time is required to notify his/her supervisor in accordance with leave policies and procedures.

Employees who fail to attend work for five consecutive days without notifying the organisation of a reason for the absence, may be considered as having abandoned their job and termination procedures commenced.

If the employee is unable to contact Management, he or she should ask a representative such as family member or friend to do so on their behalf.

If contact is not possible due to extreme circumstances such as a medical emergency or natural disaster, the employee or his/her representative must contact the organisation as soon as practicable to explain the situation. The organisation will consider explanations and their timing before determining relevant action.

The organisations policy and procedure in relation to employee resignation, misconduct, dismissal and the conduct of exit interviews are to be followed.

EXIT INTERVIEWS

An exit interview is a survey conducted with employees who have tendered a voluntary resignation, just prior leaving the organisation.

- The primary aim of the interview is to learn the reasons for the person's departure to help identify any areas of improvement required by the organisation and provides the exiting employee with the opportunity to debrief if required.
- All employees and volunteers who have tendered a voluntary resignation will be offered the opportunity to attend an exit interview.



ORGANISATIONAL ASSETS

Staff are required to return all organisation property in their possession (e.g. staff ID, keys, clothing, equipment etc.) prior to their last day of employment.

RESPONSIBILITIES

Executive Management

- When **job abandonment** occurs, the organisation's termination procedures should be followed. This will include updating the employee file with relevant documentation, such as correspondence, termination dates, payroll information etc.
- When an employee **resigns**, the organisation's policy and procedures is to be followed.
- Follow the organisations policy and procedure as relevant if the reason for the employee departing is related to **misconduct**.

Manager

- The Employee register at the Service site should be updated.
- Facilitate and/or participate in the Exit Interview process as per policy and procedure.

Support Worker

- Advise their Coordinator that they can no longer continue to work.
- Respond to any messages or letters from the organisation regarding absences.
- Participate in an exit interview as per policy and procedure.

PROCEDURE

TERMINATION OF EMPLOYMENT BY EMPLOYEE

Upon receipt of written notice of resignation or retirement from a staff member, Management in conjunction with HR will:

- Respond to the letter of resignation with a formal letter of acknowledgement within five (5) business days
- Provide a standard Notification of Resignation Form for completion to the employee
- Negotiate the actual / effective date of resignation or retirement with the staff member
- Provide an Exit Survey

EXITING AN EMPLOYEE (ALL)

- Responsible person in your organisation to ensure there is a letter of resignation from the employee if they resigned, or a signed letter of termination where the employee was dismissed.
- Responsible person in your organisation to provide advice to Payroll of employee resignation/retirement/departure
- Calculate termination pay, including any Superannuation payments due to the staff member, according to Termination Pay work instruction/procedure.
- Responsible person in your organisation to ensure any organisation assets, including keys, equipment, ID tags, clothing and any client or other sensitive documentation is



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collected from the employee on the day of termination or prior to this date where appropriate.

- Responsible person in your organisation to update applicable registers relating to assets.
- Where appropriate, the responsible person in your organisation to conduct an exit interview and place the completed record on employee file.

ON DEPARTURE (ALL)

- Provide severance payment along with any additional information according to contract and/or legislated requirement e.g. Notice of termination, Centrelink severance form, termination payslip to the exiting staff member.
- Responsible person in your organisation to review requirements for changing of passwords for computer access/email addresses etc. on departure.
- Collate the information gathered on any Exit survey completed and review information, to inform quality improvement, or other related process as relevant
- Note the date employment ceased on the employee file, along with any relevant notes.
- Manage the closure of personnel files, archive and cull in accordance with legislation.

RELATED LINKS AND REFERENCES

Fair Work <https://www.fairwork.gov.au/>

National Employment Standards <https://www.fairwork.gov.au/employee-entitlements/national-employment-standards>

Fair Work Australia – Notice of Termination and redundancy pay: <https://www.fairwork.gov.au/Notice of Termination and redundancy pay>

RELEVANT STANDARDS AND LEGISLATION

Age Discrimination Act 2004

Aged Care Act 1997

Anti-discrimination law <https://RightsAndProtections/HumanRights/Anti-Discrimination-Law.aspx>

Australian Human Rights Commission Act 1986

Disability Discrimination Act 1992

Disability Services Act 1986 (Commonwealth)

Equal Employment Opportunity (Commonwealth Act 1987) <https://Details/C2016C00775>

Fair Work Act 2009

Privacy Act 1988

Racial Discrimination Act 1975

Sex Discrimination Act 1984

Blackall-Tambo Regional Council Enterprise Agreement

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Aged Care Standards, specifically Standard 7, and 8

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

REVIEW TRIGGERS

This policy/procedure is reviewed internally for applicability, continuing effect and consistency with related documents and other legislative provisions when any of the following occurs:

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2. The related documents are replaced by new documents.
3. Industry, legislation or service agreement changes may necessitate modifications to policy/procedure.
4. Other circumstances as determined from time to time by a resolution of Council.

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VARIATIONS

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Tambo Multipurpose Centre Policy

Policy Number: MPC-HR3	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

FAMILY CARERS AND MANAGING CONFLICT OF INTEREST

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognise that family carers play an important role in the care of the elderly. While there is usually a clear divide between the work performed by a paid support or care worker and a family carer, on occasion these two roles may overlap.

It is recognised that, where a minority group, or specific cultural group within the population provides services to clients from that same group, there is likely to be some form of family relationship or, connection between the parties, within the community structure.

All employed staff are expected to abide by the employee Code of Conduct and organisation policy and procedures, regardless of their relationship to the client, during the time they are employed to provide care or support.

It is acknowledged that the Government provides financial support to family carers through a carer payment, where they are unable to work due to their caring role and the level of support required by the client. Family carers in receipt of a carer payment will not be employed by the organisation to provide care and support to the aged care client or disability client for which the carer payment is being received.

To minimise the potential for perceived or actual conflict of interest and to ensure that transparent and fair processes are followed, Blackall Tambo Regional Council, Tambo Multipurpose Centre will:

- Provide assistance with information and referral support on how to apply for Centrelink Carer Payments where a client wishes to have their family carer provide services as a carer.
- Note the contribution of the family carer in the client's Care Plan and ensure the carer is included in, or kept informed of, all care planning meetings and processes.
- Where a client refuses to accept assistance from an externally sourced support worker this shall be noted on their assessment form and relevant information included in their care plan.
- Where a family member is employed to provide essential care and support to a client and they are not in receipt of a carer payment, they are expected to follow all relevant organisational procedures, for example the wearing of personal protective equipment.



- Where a support worker is employed to provide services to a family member who is one of a number of clients who require assistance, e.g. where the support worker is assisting at a day respite centre which their relative attends, they need to avoid actions that could be construed as showing favouritism.

HOME CARE PACKAGES AND FAMILY CARERS

Where family members are employed to provide care and support, they cannot be paid for the work they do for the consumer outside of the care plan and agreed services.

For example, a family carer cannot be paid a sum of money (wages, or in-kind wages) to accompany their relative to town to attend a medical appointment if this is not a service funded through their package and included in the rostered duties of the staff (family) member.

RESPONSIBILITIES

Manager

- Negotiate boundaries and agreed responsibilities for both aged care staff and the family carer ensuring these are clearly documented.
- Provide orientation and clear expectations on behaviours and duties where a family member is employed to provide care to an individual.
- Ensure support workers are reminded and assisted to avoid showing favouritism towards family members when working in a group setting.
- Where a client wishes to have their family carer provide services, assist with referral and information on how to gain access to Centrelink Carer Payments.

Support Worker

- Carry out all duties as described in the client's Care Plan at a professional level and with reference to the organisation's policy and procedures.
- Attend all training as arranged by the service.
- Maintain currency of their Police check and/or other required clearances and licences.

PROCEDURES

WORKING WITH A FAMILY CARER

Where the Manager needs to approach the family carer over concerns or issues relating to the care of the client. The Manager will:

- Visit the carer to identify a mutually agreeable time and place to discuss client care.
- Tactfully raise and discuss the issue identified with the plan to move towards a resolution that provides the best outcome for the client.
- Where the issue can be easily remedied, note the discussion and the outcome on the client's file and any follow up action required.
- Where the issue is serious or there is no resolution to the issue, the Manager may need to organise and facilitate a family meeting, or involve an external aged care advocate.
- When organising a family meeting, ensure invitations are extended to the appropriate family members and there is appropriate consideration of any consent provisions of



the consumer. Where applicable, Health staff, the person's Doctor or relevant Allied Health professionals should be invited.

NOTE: If the carer is an Aged Care employee and a suspension of the employee (carer) will potentially disadvantage the client, the Manager is required to arrange an alternative Support Worker until the issue is resolved.

RELATED LINKS AND REFERENCES

Department of Human Services: <https://www.humanservices.gov.au/customer/themes/carers>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Aged Care Standards, specifically Standards 6, 7 and 8

Duty of Care Principles

Charter of Aged Care Rights

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

REVIEW TRIGGERS

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4. Other circumstances as determined from time to time by a resolution of Council.

Notwithstanding the above, the organisation may review this policy/procedure annually for relevance and to ensure that its effectiveness is maintained.

VARIATIONS

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This policy/procedure is to remain in force until it is changed.



Tambo Multipurpose Centre Policy

Policy Number: MPC-HR4	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

HUMAN RESOURCES POLICY

RATIONALE AND DEFINITION

Effective Human Resource Management for the organisation is essential in supporting organisation capability to deliver safe, respectful and quality care.

Sufficient skilled and qualified personnel, who are well supported through appropriate induction, training, development and performance management processes is also essential in having a well-run organisation.

There is an expectation that the workforce, both paid and voluntary staff, have the right skills, experience, qualifications and knowledge to do their job effectively, and are able to communicate and build positive relationships with consumers.

CLIENT

The term '*client*' infers any aged care client, resident, consumer or disability participant.

MANAGEMENT

In all policies and related procedures, the term 'Management' refers to the [Aged Care Manager and may also include other personnel from the Executive and/or Management Team]

ORGANISATION STATEMENT

Blackall Tambo Regional Council Tambo Multipurpose Centre recognises that to provide quality care and services to clients, staff and volunteers need to be knowledgeable, capable and caring.

Blackall Tambo Regional Council Tambo Multipurpose Centre will manage human resources to ensure adequate numbers of appropriately skilled and trained staff and volunteers are available for the safe delivery of care and support to clients.

Blackall Tambo Regional Council Tambo Multipurpose Centre will access external expert advice and information on human resource management as/if required.

There will be adequate staff and volunteers to provide quality support that meets the assessed needs of clients. Staffing levels will be reviewed regularly, and planning undertaken to maintain capacity of the organisation to deliver quality services.



Appropriate succession and contingency planning will also be in place to support continuity and consistency of quality care.

Staff and volunteers with the appropriate skills, competence and attitude will be recruited, orientated and supported through relevant award conditions. Appropriate recruitment, selection and promotion processes will be used when appointing and managing staff; they will be fair and be seen to be fair.

Ongoing supervision and support, including ongoing training, and professional supervision where required, will be provided to staff and volunteers.

Regular Performance reviews against industry and organisation requirements will inform skills and professional development planning, to maintain appropriate competency for staff.

Human resource management processes will be regularly reviewed and improved to ensure an enabled, equipped and supported workforce.

RESPONSIBILITIES

Executive and Management

Blackall Tambo Regional Council Tambo Multi Purpose Centre will maintain an up-to-date organisational chart that clearly outlines the structure and lines of responsibility within the organisation; and

Maintain the following human resource management principles:

- Blackall Tambo Regional Council Tambo Multi Purpose Centre is an Equal Employer Opportunity employer and is committed to working in accordance with relevant State and Federal legislation e.g. anti-discrimination legislation. People will be employed on their merits and in accordance with the level of skills and expertise required for the position.
- Blackall Tambo Regional Council Tambo Multi Purpose Centre encourages a positive workplace environment and values the participation of staff and volunteers in all areas of the organisation.
- Blackall Tambo Regional Council Tambo Multipurpose Centre] will support a positive staff culture, fostering standards of ethical behaviour and conduct that contributes to a productive and valued workforce and a workplace that is free of bullying and harassment.

APPROACH

Executive and Management

Blackall Tambo Regional Council Tambo Multipurpose Centre Executive and Management team will access expert information and advice; and ensure effective management of human resources by accessing support and information from the following agencies:

- Fair Work Australia
- Australian Taxation Office
- Superannuation body
- Chamber of Commerce



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- Peak Agencies e.g. ACSA / LASA
- Commonwealth Department of Health
- Commonwealth Department of Home Affairs (for sponsored employees)
- Human resource management consultants if required.

In line with the Aged Care Standards – the following requirements will be met:

- The workforce will be planned to enable, and the number and mix of members of the workforce enables, the delivery and management of safe and quality care and services.
- Workforce interactions with consumers will be kind, caring and respectful of each consumer's identity, culture and diversity.
- The workforce will be competent, and members of the workforce will have the qualifications and knowledge to effectively perform their roles.
- The workforce will be recruited, trained, equipped and supported to deliver the outcomes required by the Aged Care standards.
- Regular assessment, monitoring and review of the performance of each member of the workforce will occur.

RELATED LINKS AND REFERENCES

Related documents: Equal Employment Opportunity (Commonwealth Act 1987)

<https://www.legislation.gov.au/Details/C2016C00775>

Anti-discrimination law

<https://www.ag.gov.au/RightsAndProtections/HumanRights/Pages/Australias-Anti-Discrimination-Law.aspx>

Fair Work and National Employment Standards

<https://www.fairwork.gov.au/employee-entitlements/national-employment-standards>

Police Check Guidelines 2019

https://agedcare.health.gov.au/sites/default/files/documents/07_2019/police-certificate-guidelines-for-aged-care-providers.pdf

Working with Children Checks in Australia

https://www.nationalcrimecheck.com.au/resources/working_with_children_checks_in_australia

PROCEDURES:

Anti-Bullying and Harassment

Exiting Staff

Family Carers and Managing Conflict of Interest

Police and Other Background Checks

Staff Communication and Meetings



Staff Conduct and Work Standards
Staff Misconduct, Grievance and Dismissal
Staff Orientation
Staff Recruitment
Staff Training, Performance review and Professional Development
Student Placements
Timesheets and Payroll

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997 (Cth)
Accountability Principles 2014
Australian Human Rights Commission Act 1986
Age Discrimination Act 2004
Disability Discrimination Act 1992
Fair Work Act 2009
Privacy Act 1988 (Cth)
Racial Discrimination Act 1975
Sex Discrimination Act 1984
Queensland Anti-Discrimination legislation
Charter of Aged Care Rights
Aged Care Standards, specifically Standards 7 and 8
Disability Services Act 1986 (Commonwealth)

REVIEW TRIGGERS

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4. Other circumstances as determined from time to time by a resolution of Council.

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VARIATIONS

The Management Team reserves the right to vary, replace or terminate this policy from time to time.

This policy is to remain in force until it is changed.



Tambo Multipurpose Centre Policy

Policy Number: MPC-HR5	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

POLICE AND OTHER BACKGROUND CHECKS

POSITION STATEMENT

Approved providers of Commonwealth funded Aged Care and Disability services are required to ensure that staff, volunteers and contractors who have, or are likely to have, unsupervised access to care recipients undergo a National Criminal History Record Check.

A police check (national criminal history record check) is a check by state or territory police services or the Australian Federal Police for any offences committed within Australia and discloses evidence of whether a person:

- Has been convicted of an offence.
- Has been charged with, and found guilty of, an offence but discharged without conviction.
- Is the subject of any criminal charge still pending before a court.

PRECLUDING OFFENCES

Any person employed to work for Blackall Tambo Regional Council Tambo Multipurpose Centre whose Police Certificate records a 'precluding offence' cannot be employed as per the Aged Care Act 1997.

Offences which preclude a person from being employed in such roles where the person is likely to have unsupervised access to a care recipient are:

- A conviction for murder or sexual assault.
- A conviction and sentence to imprisonment for any other form of assault.

AGREEMENT TO OBTAIN A NATIONAL CRIMINAL HISTORY CHECK

Blackall Tambo Regional Council Tambo Multipurpose Centre will ensure all staff and volunteers employed to deliver aged and disability care support will undergo a Police Check prior to commencing work with the organisation.

- New staff and/or volunteers must not start work on the same day they apply for a Police Check unless they have also completed a Statutory Declaration stating they do not been convicted of a 'precluding offence'.
- It is the responsibility of the Support Worker to agree to obtain a National Criminal History Check application.



- All continuing staff and volunteers will agree to the organisation obtaining an updated National Criminal History check on a tri-annual (every three years) basis.

STAFF AND VOLUNTEERS WHO HAVE RESIDED OVERSEAS

Staff members and volunteers who have been citizens or permanent residents of a country other than Australia at any time **after turning 16** must make a statutory declaration before starting work in any aged care service, stating that they have never:

- a) been convicted of murder or sexual assault; or
- b) been convicted of, and sentenced to imprisonment for, any other form of assault.

This statutory declaration **is in addition to a current national police certificate**, as this reports only those convictions recorded in Australian jurisdictions. (*Refer to the Department of Health Police Certificate Guidelines 2019*) for more information.

COMMUNITY VISITORS SCHEME (CVS) VOLUNTEERS

CVS volunteers are required to undergo a police check and these are undertaken and assessed by the CVS auspices prior to a volunteer commencing with the program. Further information is available in the Department of Health Police Check Guidelines.

WORKING WITH CHILDREN CHECKS

Where staff interact with and support younger people with a disability or in care, who are under the age of 18 Blackall Tambo Regional Council Tambo Multipurpose Centre requires the staff member to obtain a clear Working with Children card relevant for Queensland.

HEALTH CHECKS

Blackall Tambo Regional Council Tambo Multipurpose Centre may request that a person undergo a pre-employment medical assessment to ensure you are not at increased risk of injury to yourself or other employees in this position, to protect clients and manage any identified risks.

RESPONSIBILITIES

Executive Management

- Ensure key senior staff and key decision makers have a satisfactory Police Check.
- Ensure the all staff, including the Manager, have been cleared for working within the aged care industry, prior to commencing work for the organisation.
- Ensure all staff members undergo a National Criminal History check every three years.
- Ensure, where it is required, a working with children check is completed, approved and renewed thereafter every two (2) years for each relevant staff member.
- Ensure all new staff have an appropriate police clearance (and Working with Children Check, where applicable), or have completed and signed a Statutory Declaration to the effect they have not been convicted of a precluding offence, prior to commencing work within the service.
- Secure information relating to the information contained in the checks and any outcomes, including disposing of National Criminal History checks once reviewed appropriately.

Note: State and territory privacy laws can also impact on the handling of personal



information such as a police certificate. Further information about privacy is available from the [Office of the Australian Information Commissioner](#)

- Ensure effective processes are in place to support review and risk assessment of background checks.
- Ensure that identified risks to staff and clients are managed appropriately.

Manager, Support Worker and other staff

- Provide relevant information to allow a National Criminal History check to be conducted in a timely manner, including at reassessment times.
- Inform Management when a conviction for or potential conviction for a precluded offence is in place.

PROCEDURES

National Criminal History Check (Police Check)

- All new staff members or volunteers are required to provide a current Police Check or agree to the organisation arranging to obtain a Police Check.
- The organisation will pay for and assist with the application.
- The person responsible in your organisation will assess Police Check Certificates using a risk assessment approach.
- All Police Check assessments will be documented as part of the selection process for employing new staff.
- The outcome of the assessment will be placed on the relevant staff Register.

Note: Where copies of Police Check certificates are kept by the organisation, they must be maintained in accordance with national Privacy Principles, as set out in the *Privacy Act 1988*.

- A reminder to submit a Police Check application will be provided to staff three months prior to their current Police Check expiring with a further reminder at six weeks.
- Where a staff member has received adequate warning and they have not supplied a updated Police Check, the staff member will be taken off direct care work until a new Police Check is supplied.
- Additionally, all continuing staff will undergo a Police Check on a tri-annual basis. The Manager will monitor this and record on the Employee (checks) register, advising Management as necessary where renewals are not actioned/ and or a check identifies non-compliance or a risk of non-compliance with the requirement under the Aged Care Act and department guidelines.

Working with Children Check

It is mandatory for people who have contact or potential contact with children in specified areas of employment to hold a Working with Children Check. This may apply to some staff where the service also supports clients with a disability under the age of 18.

- The organisation will pay for and assist with the application.



- Where an applicant fails a Working with Children Check, the assessment can be appealed and reviewed. If, however, the applicant fails the check or any subsequent review, they must not be engaged in a position which requires them to be near children as part of their daily duties, and their overall suitability for a role as Support Worker will also be evaluated.

Health Checks

At the time of recruitment, applicants may be asked if they have any medical or physical conditions, or are taking medications that will prevent or impact on their ability to perform duties associated with the role. Pre-employment medical checks may be conducted to allow Management to manage any identified risks.

RELATED LINKS AND REFERENCES

Police Checks and FAQs for Aged Care Workers <https://agedcare.health.gov.au/police-certificate-guidelines-for-aged-care-providers>

Police Check Guidelines 2019

https://agedcare.health.gov.au/sites/default/files/documents/07_2019/police-certificate-guidelines-for-aged-care-providers.pdf

Working with Children Checks in Australia
https://www.nationalcrimecheck.com.au/resources/working_with_children_checks_in_australia

OTHER RELATED AGED CARE POLICIES:

Privacy and Confidentiality

RELEVANT STANDARDS AND LEGISLATION

Privacy Act 1988 (Commonwealth)

Aged Care Act 1997

[Accountability Principles 2014](#)

Charter of Aged Care Rights

Aged Care Standards, specifically **Standard 7 and 8**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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VARIATIONS

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Tambo Multipurpose Centre Policy

Policy Number: MPC-HR6	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

STAFF COMMUNICATION AND MEETINGS

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the value of clear and timely communication between team members in the organisation. Along with well written memos and regular verbal communication, staff meetings form an important part of the communication process within an organisation. Properly conducted, these meetings allow important information to be passed from Management to ground staff, and for discussions around pertinent issues to be conducted.

A properly conducted staff meeting is one where business is dealt with efficiently and does not waste people's time. An agenda assists in keeping participants on track.

All meetings should allow issues relevant to the service to be raised and discussed. Minutes of meetings should be taken and action required noted for feedback at the next meeting.

Concise and relevant handover meetings are also recognised as important for the purpose of communicating essential information between staff shifts to ensure quality care outcomes for consumers.

Attendance at staff meetings is a requirement of the staff members' job role and staff will be paid to attend staff meetings.

To support quality outcomes for consumers and promote an environment of open and transparent communication the organisation will:

- Ensure regular staff handover and staff meetings are conducted and documented.
- Encourage culturally safe meetings that support all participants to contribute and be heard.
- Allow time and opportunity for staff to raise issues pertinent to their job and to the consumers they support.
- Utilise an agenda for staff meetings to ensure all relevant topics are discussed, limit distraction and maximise available time.

RESPONSIBILITIES

Executive Management



- Support and encourage open communication within the workplace through transparent meeting processes and the allocation of sufficient paid time to support staff meetings and handover practices.
- Facilitate regular meetings between senior staff and management either in person or via teleconferencing.

Manager

- Ensure that regular operational related staff meetings are held including daily/shift handovers.
- Conduct a monthly staff meeting/briefing.
- Prepare agendas and distribute to relevant personnel.
- Ensure minutes are recorded and communicated appropriately.
- Follow up any actions from the meeting with staff members or other stakeholders.
- Provide reports to Executive Management as required.

Support Workers

- Attend staff meetings and contribute to discussions as required.

PROCEDURES

Operational Meetings

- Regular (daily or weekly) meetings relating to the operational aspects of daily work are to be conducted to ensure smooth operation of services to clients.
- Issues or discussions arising from this meeting will be documented in a communication book.

Handover Meetings

- There is an expectation that staff arrive ready to work at the beginning of their shift and allow time to participate in handover meetings.
- All identified staff must participate in this handover meeting to discuss issues and concerns relating to individual consumers.
- The handover/communication book is to be completed by the person who is in charge of the shift.
- Where issues have been noted e.g. behaviours of concern further details will be found in relevant notes and charts and handover notes to reference these for further information.
- Every client must be commented on during the handover meeting.

Staff Meetings

- Staff meeting will be held on a regular basis to ensure issues are dealt with promptly and promote continuity and familiarity amongst staff.
- Meeting convenor to ensure that an agenda is followed and minutes are taken to assist in covering relevant information in a timely manner and that records are maintained.



- Minutes to be circulated to relevant personnel. Circulation of minutes must conform to any privacy legislation.

Suggested topics on the agenda are:

- What's working for the service / what needs work (Continuous Quality Improvement)
- Compliments, complaints and feedback (NB. This can inform case studies and CQI)
- Review of regular checks and registers as appropriate to the workplace and personnel (Incident Register should be a standing item)
- Review of Clients and needs e.g. changes to service delivery or identified issues.
- Planned absences e.g. holidays etc.
- Reports due
- Upcoming events pertinent to staff or consumers
- Other, e.g. Training; Policies; Workplace Health & Safety/ Toolbox talks.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Work Health and Safety Act 2011 (Commonwealth)

Privacy Act 1988 (Commonwealth)

Charter of Aged Care Rights

Aged Care Standards, specifically Standards 7 and 8

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Tambo Multipurpose Centre Policy

Policy Number: MPC-HR7	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

STAFF CONDUCT AND WORK STANDARDS

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the need to protect vulnerable clients and support staff. To meet these needs the organisation has developed a Code of Conduct for all staff as well as outlining expected personal and work standards.

CODE OF CONDUCT

A Code of Conduct is a statement and description of required behaviours, responsibilities, and actions expected of employees of an organisation. The Code of Conduct focuses on ethical and socially responsible issues and applies to individuals working within the organisation, providing guidance on how to act in cases of doubt or confusion.

As professionals, and as representatives of the organisation, we expect all staff to know and follow the Code of Conduct.

PERSONAL AND WORK STANDARDS

The Aged Care work environment is one that involves the interaction of many people, including clients whose health may be impaired or compromised. To help us maintain a pleasant and healthy work environment identified personal and work standards are expected to be followed.

Our standards do not attempt to repress the individuality of our staff but are in place to minimise the potential for offence or discomfort of the consumers who we support and to minimise the potential for injury to either clients or staff.

RESPONSIBILITIES

Manager

- Ensure all staff receive orientation in the organisation's Code of Conduct and expectations of personal and work standards are discussed.
- Monitor and address any breaches in Code of Conduct or standards in a timely manner.

Support Worker

- Follow the organisation's Code of Conduct and standards.

PROCEDURES

General expectations

- Treat all staff, clients and members of the community with respect.
- Be punctual. If you are running late, or are unable to attend work, contact the Manager in a timely manner.
- Present for work clean and tidy.
- Staff must not to come to work under the influence of alcohol or drugs. You may be requested to undergo a drug or alcohol test at any time.
- Arguments between staff will not be tolerated and personal grievances should not be brought into the workplace.
- Staff should use appropriate language whilst in the workplace, e.g. no swearing.
- Staff must respect the confidentiality of client information at all times.
- Staff must show respect towards clients in all their interactions.
- Gambling and / or pornographic material is not acceptable within the workplace.
- Staff must represent the organisation in a good light; denigration of the organisation to clients or others will not be tolerated.
- Inappropriate use of social media will not be tolerated. This includes sharing client or organisation images or information without proper consent, or inappropriately.
- Fulfil work duties according to your position description, the Staff Handbook and as directed by your supervisor.

Do not:

- Offer legal or financial advice to clients.
- Become involved in legal or financial matters of the client (i.e. witnessing legal documents or wills).
- Undertake formal responsibilities as executors of affairs or accept responsibilities of guardianship (formal or informal) of any client.
- Request or accept anything in return for services provided from the client or their family.
- Accept any gifts of cash or cheque.
Note: Any such offers made by clients/ family/ carers must be advised to the Manager.
- Place yourself in a position where a conflict of interest may arise. Where a conflict or potential conflict is identified you must inform the Manager.
- Under no circumstances are statements to be made by staff concerning clients or the operation of the Aged Care Service. Any requests for public statements or photographs are to be referred to Executive Management for follow up as per organisation Media Policy and/or Release of Information protocols.

Personal and Work Standards

The organisation recognises minimum standards of personal hygiene and grooming that assist to maintain a pleasant and healthy work environment.

Whilst allowing each person the freedom to express their individuality, the organisation sets the following standards for personnel working within the Aged Care program.

Personal Standards

- Perfume can set off asthma attacks. Please refrain from the use of perfumes whilst at work.
- Strong odours offend, e.g. body odour, perfume, cigarettes and stale alcohol odour. Please maintain personal hygiene.
- The long-term damage to health from passive smoking is recognised. Staff are not to smoke in Aged Care buildings, client homes, or Aged Care vehicles, and in food preparation areas whilst in the course of their duties.
- Use designated outdoor areas to smoke during allocated break times only.
- Consumption of alcohol other drugs whilst on duty, or being under the influence of alcohol or other drugs whilst working is not permitted.
- Gossip, offensive language and personal problems of the Support Worker are to be avoided; don't bring your problems to work.
- Children, pets, friends or family should not be taken to your work except where this is an arrange activity discussed and approved through Management.
- Dress sensibly. Clothes should be clean and comfortable for performing the duties outlined, wear any allocated uniforms.
- Where uniforms have been provided they should be clean, tidy and pressed where necessary.
- Covered footwear of a non-slip nature should be worn.
- Body piercings are vulnerable to injury or infection. Please consider your client's and your own health and safety around piercings.
- Many of the clients are vulnerable to infections. Please use precautions, e.g. hand washing, gloves and tissue disposal to prevent spreading illness such as colds and flu.

Work Standards

- Always act in a professional manner.
- Always knock or call prior to entering a client's home; never enter unannounced.
- Any changes to the care you give a client need to be talked about with the Manager first.
- Respect a clients' personal property, report any breakages to the Manager.
- Complete assigned duties and alert Management where you have been unable to complete set tasks.

Confidentiality

- All staff must abide by provisions within associated the Aged Care Quality Standards, the Charter of Aged Care Rights and the *Aged Care Act 1997*, including confidentiality and privacy legislation.

All Staff should:

- Respect clients' privacy. Don't pry into their personal lives.
- Do not discuss a clients' health or other problems with others.
- Refer all requests for information, including client information, service delivery information or issues to the Manager.

Maintain confidentiality of:

- Clients' name and needs.
- Sensitive organisational information including employees' names, phone numbers and personal details.

RELATED LINKS AND REFERENCES

Charter of Aged Care Rights <https://agedcare.health.gov.au/quality/single-charter-of-aged-care-rights>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Aged Care Standards, specifically Standards 6, 7 and 8

Duty of Care Principles

Charter of Aged Care Rights

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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Tambo Multipurpose Centre Policy

Policy Number: MPC-HR8	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

Staff Mental Health and Wellbeing

ORGANISATION STATEMENT

It is important that organisations endeavour to protect, support and promote the mental health and wellbeing of all staff through good workplace practices, and encourage staff to take responsibility for their own mental health and wellbeing.

Blackall Tambo Regional Council, Tambo Multipurpose Centre is committed to promoting positive mental health and wellbeing and believes that the mental health and wellbeing of our staff is key to organisational success and sustainability and recognises that there are many business advantages to supporting staff wellbeing and mental health including:

- Increased productivity
- Better staff decision making
- Reduced sick leave and absenteeism
- Reduced long-term health problems
- Reduced worker turnover
- Increased ability to attract and retain new employees/volunteers
- Improved industrial relations
- Reduced risk of accidents and health-related litigation, leading to fewer worker compensation claims.

There is also a recognition of the benefits to employees including:

- Increased morale, job satisfaction and motivation
- Improved mental alertness, concentration and energy levels
- Decreased stress and other work-related illness.

To support an environment that promotes a culture of optimal mental health and wellbeing the organisation aims to:

- Prevent discrimination (including bullying and harassment) and other activities that impact negatively on an individual's mental health and wellbeing.
- Increase employee knowledge and awareness of mental health and wellbeing issues and behaviours and know where to access support should this be needed.



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- Encourage staff to talk openly about mental health and reduce stigma around depression, anxiety and suicide.
- Support staff with a mental health condition regardless of cause.
- Actively identify, assess and minimise risks related to mental health and wellbeing for all staff.
- Facilitate and encourage employees' access and active participation in a range of initiatives that support mental health and wellbeing.
- Be responsive to specific and significant national or world-wide incidents that have the potential to impact on the mental health and wellbeing of staff, volunteers and clients.

RESPONSIBILITIES

Executive

- Actively support and contribute to the implementation activities and initiatives that support staff mental health and wellbeing.
- Provide guidance to the Management Team where necessary to effectively support good mental health and general wellbeing across the team.
- Ensure staff are aware of supports including the ability to access counselling services.

Management

- Ensure all staff are aware of this policy and the support available to them.
- Conduct and implement recommendations of risks assessments.
- Ensure good communication between management and staff, enabling staff to contribute to, or provide feedback, on the effectiveness of mental health and wellbeing initiatives.
- Provide opportunities to access relevant training that support staff understanding and competency in mental health support, e.g. Mental Health First Aid.

All staff

- Take reasonable care of their own mental health and wellbeing, including physical health.
- Take reasonable care that their actions do not affect the health and safety of other people in the workplace.
- Support colleagues in their awareness of this policy.
- Support and contribute to the organisation's aim of providing a supportive mental health environment for all staff.

PROCEDURE

On commencement with the organisation all staff will be made aware of the support available to them that relates to mental health and wellbeing.



Planning for Health and Wellbeing

Management will seek feedback from staff and volunteers on a regular basis to inform the development and/or review of the organisation's health and wellbeing program/strategy.

The planning of activities will consider the health and wellbeing of all participants including staff and volunteers.

Incidents

Where management are made aware of an incident that has impacted or has the potential to impact negatively on the mental health and/or wellbeing of an individual staff member this will be followed up in a timely manner.

Individual counselling opportunities will be offered to staff/volunteers where required.

RELATED LINKS AND REFERENCES

Beyond Blue - [Tools to support staff](#)

Department of Health – [COVID-19 aged care grief and trauma support services](#)

Department of Health – [Mental health for the health workforce during COVID-19](#)

Fair Work Ombudsman - [National Employment Standards](#)

Heads Up - [Guide to promoting health and wellbeing in the workplace](#)

Heads Up – [Guide to developing a workplace mental health strategy for health services](#)

RELEVANT STANDARDS AND LEGISLATION

Fair Work Act 2009 (Commonwealth)

National Employment Standards ([NES](#))

Aged Care Standards, specifically **Standards 7 and 8**

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Tambo Multipurpose Centre Policy

Policy Number: MPC-HR9	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

STAFF ORIENTATION

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises that an effective orientation process will assist employees settle in to their position, adapt to the culture of the organisation and interact appropriately with the people they are working with and for.

We recognise three important goals of our employee orientation which are to:

1. **Help our employees to become productive as quickly as possible**
This means ensuring they have a good understanding of their role and responsibilities, introducing them to their physical work environment, connecting them to key staff members and training them in organisational systems and processes and key documentation.
2. **Focus the energy of the new employee**
New employees or those moving into a new role are often enthusiastic with a desire to do well. They need to know where to focus their energy to gain the best outcome for all.
3. **Improve retention**
Part of retention is the sense of belonging. This includes extending a personal welcome, providing information about the organisational and community culture as well as challenges and opportunities of the work and providing a cultural advisor where appropriate.

The organisation recognises that an effective orientation process includes the delivery of information in an organised and timely manner. All induction and orientation processes will follow a standard orientation process to ensure that while information is not overlooked, the staff member does not become overwhelmed.

STAFF NEW TO THE INDUSTRY

The organisation additionally recognises that staff sourced from the local community to meet cultural safety requirements may be unaware of the complexity and responsibilities of working within the aged care or disability sector. To assist staff members who are new to the sector, the organisation will buddy with an experienced staff member where possible and provide an orientation process that introduces them to the basics of working in the aged and disability industry to enable them to carry out their duties with confidence and in a safe manner.



STAFF NEW TO THE COMMUNITY

Staff who are new to the community where they will be working may be assigned a cultural advisor or mentor who can assist orientate the staff member to cultural aspects and observances within that community and act as a local interpreter to community life.

THE AIM OF THE ORIENTATION PROGRAM WILL BE TO:

- Promote an understanding of the organisational culture and the goals of the organisation and Aged Care and Disability program.
- Promote an understanding of Aboriginal culture and traditions to staff who are sourced from outside the community to support better understanding and develop a positive working relationship.
- Assist the new employee understand their role and how they fit into the program.
- Assist the new employee to achieve objectives sooner and shorten the learning curve.

RESPONSIBILITIES

Executive Management

- Follow all relevant organisational recruitment policy and procedures relating to commencing a new staff member.
- For management level staff, including introduction to relevant people in your organisation, e.g. Directors of other areas, Finance, HR, and Board members as appropriate.
- Implement and monitor the Employee Orientation/Induction checklist for Manager level staff and those under their direct supervision, ensuring core orientation sessions are conducted for new staff in relation to their role.

Manager

- Implement and monitor the Employee Orientation/Induction checklist relevant to new staff within their responsibility.

Staff

- Participate and complete all relevant induction processes.

PROCEDURES

Pre-Commencement

Before the employee commences, the Manager with support from Human Resources will:

- Prepare an orientation/induction pack relevant to the role.
- Notify relevant internal and external stakeholders of the new appointment, date of commencement and the role, as relevant.
- Encourage existing staff members to welcome the new employee and support the orientation process.
- Arrange for any necessary ID, uniforms, keys etc. and provide a copy of the Aged Care Induction Package.
- Commence the staff induction checklist.



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On commencement

- Welcome, and seek to reduce any nervousness the new employee may feel.
- Discuss the plan for first day, e.g. general orientation and buddying up with an experienced staff member.
- Provide the new employee with information relevant to their role, discuss where required.
- Complete all the necessary personnel forms where not already in place, e.g. payroll and employment forms.
- Introduce the employee to other team members.
- Introduce the employee to other relevant personnel.
- Show the new employee around the workplace and explain where all key items and resources are located relevant to their role.
- Review telephone, fax and email procedures to the detail required for their role, as well as providing with computer access passwords and internet use guidelines where relevant.
- Provide a copy of the Staff Handbook and Daily Operations Guide or other manuals relevant to the person's role and highlight any key topics essential to the commencement of their role. Where staff require assistance due to literacy issues a time must be made to go through the Handbook with the new staff member.
- Remind the new staff member of their responsibility to read and adhere to information in the staff handbook along with the organisation's policies and procedures.
- Show the new employee the location of the Policy & Procedures and any other relevant paperwork and references, as relevant to their role.
- Complete other introductions and tasks as per the induction/orientation checklist.

Follow-up

Over the next few weeks, schedule face-to-face or phone meetings with the employee to discuss the following:

- Employee's overall impressions. If there are any problems or concerns, address them.
- Internal and external supports for the employee and the program.
- Performance appraisal process.
- Explain that you and the new employee will be developing a performance plan, discussing their progress and evaluating performance.
- Explain the timing of appraisals and the methods used to measure progress.
- Develop a schedule for any training or personal development required for their role.

RELEVANT STANDARDS AND LEGISLATION

Fair Work Act 2009 (Cth)

Racial Discrimination Act 1975 (Cth)

Information Act (Queensland)



Aged Care Act 1997

Aged Care Standards, specifically **Standards 7 and 8**

Commonwealth Home Support Programme Guidelines

Home Care Packages Program Fact Sheets

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 (Queensland)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

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Tambo Multipurpose Centre Policy

Policy Number: MPC-HR10	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

STAFF RECRUITMENT

POSITION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre seeks to ensure efficient and effective recruitment, selection and promotion practices when appointing and managing staff by following an objective process that minimises the chance of bias and or prejudice. To achieve this the organisation recognises and is responsive to Commonwealth and Queensland employment and anti-discrimination legislation.

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the following principles which provide a framework for promotion of good merit selection processes:

- Appointment to a position is based solely on the ability and qualifications of the person in relation to the position, selected in fair and open competition.
- Opportunities are offered to all staff to develop their skills and experience, supporting ongoing career development.
- All staff are to be treated fairly, equitably and without discrimination so that equal employment opportunity principles operate throughout all selection, promotion and developmental activities.
- Staff management and rostering processes are efficient and effective, supporting organisational objectives and recognising individual skills and needs.
- Personnel shall not be subject to arbitrary action, favouritism, discrimination, or harassment.

RESPONSIBILITIES

Executive Management

- Ensure that all recruitment processes recognise and respond to legislated requirements.
- Manage recruitment process in a timely and effective manner to support the needs of the organisation.
- Maintain appropriate records relating to the recruitment and selection process.

PROCEDURES

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Preparation - Pre-Recruitment

- Seek authorisation from the responsible person/entity in your organisation to fill an existing or projected vacancy, or to create additional position/positions.
- Review the Position Description to ensure that it is relevant, reflects current operational requirements and includes any necessary qualifications and/or skills along with the expected responsibilities and role to be performed.
- Advertise the position, either internally or externally, on the basis of the selection criteria. Where a position has a requirement for a specific language skill or is an indigenous identified position this must be clearly indicated on the advertisement. All advertised positions must consider Fair Work and anti-discrimination legislation.
- Applications are to be received by the relevant person in your organisation. Strict confidentiality should be maintained throughout the recruitment process.
- Late applications may be accepted up until the shortlisting but not after it. Acceptance of late applications should be consistent.
- Establish a Selection Panel relevant to the position to be filled to assess the applications/applicants and compile a shortlist. The Selection Panel should include an independent representative for senior roles.
- Appoint a convenor where indicated, e.g. where the position to be filled is a senior role in the organisation.*
- Prior to shortlisting, any member with a conflict of interest such as a close personal relationship with an applicant, should declare this and excuse themselves from the Panel. Individuals who are referees for applicants may not be on the Panel.
- During shortlisting exclude from further consideration, those whose application is incomplete, or where the applicant does not meet the Essential Selection Criteria. The use of a 'shortlist record of consideration' should be used to record the process.
- Applicants unsuccessful in proceeding to interview are to be notified in a timely manner.
- Following the shortlisting, each applicant selected for interview should be advised of the interview details including any documentation required. Applicants should be given as much notice as possible of the interview arrangements.
- Interview questions should be developed or reviewed and agreed upon by the Selection Panel.

**The Convenor's role is to direct the conduct and activities of the Selection Panel towards the objective of recommending the best applicant for the position and should:*

- *Ensure that all panel members are aware of proper conduct of a Selection Panel.*
- *Ensure all necessary information regarding the position, the qualifications of specific applicants has been obtained and is available for the Panel.*
- *Ensure the correct shortlisting procedure is followed.*
- *Ensure that all members are familiar with each applicant's application before interviewing.*



Blackall-Tambo **Regional Council**

- *Ensure that the interview is conducted in such a way that discrimination on the basis of race, marital status, sex, physical disability, sexual preference or age cannot be claimed.*
- *Develop an interview schedule allowing appropriate time for discussion between interviews.*

The Interview

The interview should take place at a time and in an environment suitable for both the applicants and Selection Panel.

The Convenor should ensure that there is no disruption to interviews by visitors, phone calls etc.

The Convener usually opens and closes the interview, and the rest of the time should be balanced so that all interviewers can make an equal contribution.

During the interview, the Convener should ensure that:

- The applicant is introduced to the members of the Selection Committee and given time to settle his/her nerves
- The recruitment process is explained e.g. following up on referees and police check clearances form part of the process and any probationary timeframes
- It is indicated to applicants that note-taking by Committee members is an integral part of the interview process
- The interview questions are covered in the agreed order and clarified where required
- Each area is thoroughly explored before the committee moves on to the next
- Irrelevant areas are not covered and applicants do not control the interview
- Applicants are not intimidated or placed under undue stress
- The conditions of employment have been discussed
- The applicant has an opportunity to seek additional information or to present information, which may not have been covered in the interview
- Advice is given to applicants of when and how they are likely to be notified about the final decision
- Start date and availability are confirmed.

Review of Applicants

At the conclusion of the interviews, the Convenor is to facilitate the determination of applicant suitability with the panel either through:

- Each member indicates their individual preference in a rating system outlining their reason, this is then compared with the rest of the panel ratings or,
- The panel as a whole may meet together to discuss each applicant individually and agree on an order of preference.

Pre-offer checks and process

- Referee's reports must be sought, as part of the decision-making process for those applicants being considered for appointment, following interview.



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- Questions asked of referees should elicit objective observations regarding applicant's skills and experience, in reference to the selection criteria rather than subjective opinion. The same questions must be asked of all referees.
- Where there are questions raised about the objectiveness or validity of a referee the interviewee may be asked to provide a further referee.
- A clear (no precluding offences) National Criminal History check is a condition of employment and will be conducted prior to an offer being made.
- No interviewee is to be informed of the outcome of the results of the selection process prior to formal approval from person/entity in your organisation.
- The panel has the right to recommend no one, or only one applicant, based on interview results and review of referee and other checks. Where more than one applicant is suitable, they should be ranked according to priority.

Offer of Employment

- A formal, written, offer of employment will be made to successful applicant/s. Where time is of the essence a verbal offer will be made, followed by a formal written offer.
- Unsuccessful applicants will be notified in writing by relevant person in your organisation on receipt of written acknowledgement of acceptance by the successful applicant. Verbal feedback is available to the unsuccessful applicant on request and should be provided by the convener or responsible person in your organisation.
- The offer of employment is to include a clear reference to the organisation's probation period.

RELATED LINKS AND REFERENCES

Anti-discrimination

<https://www.ag.gov.au/RightsAndProtections/HumanRights/Pages/Australias-Anti-Discrimination-Law.aspx>

law

Fair Work and National Employment Standards

<https://www.fairwork.gov.au/employee-entitlements/national-employment-standards>

Police and other checks

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997 (Cth)

Fair Work Act 2009 (Cth)

Racial Discrimination Act 1975 (Cth)

Privacy Act 1988 (Cth)

Aged Care Standards, specifically Standards 7 and 8

Disability Services Act 1986 (Commonwealth)

Disability Services Act 2006 Queensland

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards



REVIEW TRIGGERS

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Notwithstanding the above, the organisation may review this policy/procedure annually for relevance and to ensure that its effectiveness is maintained.

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This policy/procedure is to remain in force until it is changed.



Tambo Multipurpose Centre Policy

Policy Number: MPC-HR11	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

STAFF TRAINING, PERFORMANCE REVIEW AND PROFESSIONAL DEVELOPMENT

POSITION STATEMENT

TRAINING

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the importance of training and up skilling of staff members as a vital component of continuous improvement. The organisation will ensure staff are provided with opportunities for ongoing development through access to both compulsory and other sector related training.

Staff employed in Aged Care will complete the following compulsory training, including (but not limited to) annual updates where applicable:

- Food handling
- CPR training and basic first aid
- Fire Safety and Emergency Evacuation
- Manual handling
- Infection control
- Cultural training

The identification of training and development opportunities will form part of staff recruitment, staff performance review processes and organisational planning processes.

PERFORMANCE REVIEW AND PROFESSIONAL DEVELOPMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre also notes the value of proactively addressing performance issues and providing opportunities for professional development.

Issues related to the performance of an employee will be raised with the employee at the time the issue arises.

Where underperformance is identified management will respond proactively to address the issue.

The organisation recognises poor (under) performance may be exhibited in the following ways:

- Unsatisfactory work performance, i.e. failure to perform the duties of the position



- Non-compliance with workplace policies and procedures
- Unacceptable behaviour in the workplace
- Disruptive or negative behaviour that impacts on co-workers or clients.

Performance issues are to be addressed as they are identified and may be raised in staff performance reviews as part of the overall assessment of the employee's performance.

Performance appraisals are conducted after the initial probation period for all new staff and, thereafter, annually.

The aims of staff performance appraisal are to:

- Allow free and confidential discussions about work between the employee and their supervisor in relation to work duties, relations with other staff and job satisfaction.
- Discuss the employee's job performance, in comparison with set standards (i.e. job description, objectives of the organisation).
- Discuss any work problems and search for a solution.
- Discuss opportunities for professional development and improving work performance including identification of training and development needs.
- Provide the basis on which annual wage increment can be granted where employees are engaged on a sliding scale.
- Allow the organisation to evaluate the effectiveness of its programs.
- Identify priority tasks/ issues and concerns about the service.

RESPONSIBILITIES – TRAINING

Executive Management

- Management is responsible for budgeting for compulsory and other appropriate training.

Manager

- The Manager is responsible for assessing the training and development needs of Aged Care employees, sourcing and arranging appropriate training courses and times.
- The Manager will maintain a register of all training details on individual staff files.
- Arrange time for staff to attend organised training.
- Encourage attendance at training.
- Complete any on the job assessment requirements to enable staff to obtain competencies.
- Alert Executive Management and/or the organisation HR or Training Manager to any training needs identified in an individual or within the organisation to inform training / workforce plans, appropriate resource allocation and professional development targets.
- Report on the effectiveness of training and report on the outcomes of training in the workplace and its impact on service and quality delivery.



Support Worker

- Identify areas of training need to the Manager.
- Attend organised training and complete any on the job tasks to achieve competency.
- Identify to the Manager any areas of concern regarding training and achieving competency.
- Participate in staff training needs analyses and staff reviews.

RESPONSIBILITIES – PERFORMANCE REVIEW AND PROFESSIONAL DEVELOPMENT

Executive Management and Management

- The CEO is responsible for scheduling and conducting formal performance reviews with the Manager on an annual basis.
- Staff reviews are to be documented and copies provided to relevant departments.
- Management is responsible for sourcing and arranging appropriate performance review tools and templates and providing training to staff who have responsibility for this task.
- Management is responsible for providing constructive assessment, feedback and training plans for ongoing development, and where required disciplinary and/ or competency actions to address identified gaps and performance concerns.
- The organisation will maintain a register of all performance reviews on confidential, individual staff files.
- Participate in performance review processes and any identified training, competency or disciplinary actions which may arise from a review.
- Provide constructive feedback regarding issues or concerns which impact (positively and negatively) on work and delivery of the Aged Care and Disability service.
- Complete any on the job assessment requirements to enable staff to obtain competencies.
- The Manager will alert management to any training needs identified for an individual or within the organisation.
- The Manager is to alert executive management of any performance issues regarding staff and outcomes from ongoing staff monitoring, assessment, feedback and training.

Support Worker

- Provide ongoing feedback to the Manager regarding operational issues, training needs and any concerns related to their employment and supports, which may be necessary to enhance their performance, job satisfaction and service delivery.
- Participate in staff training needs analyses and staff and service reviews, as required.
- Alert the Manager to any training needs identified at an individual level or within the service.

PROCEDURES

- All training will be arranged in consultation with Management.



- Staff should not attend training without a contingency plan in place to ensure that staff attendance at training does not adversely impact on service delivery.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Aged Care Standards, specifically **Standard 7 and 8**

REVIEW TRIGGERS

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Tambo Multipurpose Centre Policy

Policy Number: MPC-HR12	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

TIME SHEETS AND PAYROLL

POSITION STATEMENT

The information contained within a timesheet allows the organisation to monitor hours of work and determine correct payment of wages and associated costs.

Blackall Tambo Regional Council Tambo Multipurpose Centre requires all staff submit a completed timesheet by the nominated time each week to process payments to staff. Where a staff member does not tender a completed timesheet by the designated time they may not be paid in that pay period.

- No payment will be made in advance for services.
- No payment will be made for time away from the workplace except in case of sick leave or pre-approved leave.
- Payment is weekly.

RESPONSIBILITIES

Manager

- Review timesheet submissions and manage any staff performance issues.
- Check hours and calculate total hours claimed for each staff timesheet, checking for accuracy and noting any discrepancies on the bottom of the timesheet.
- Approve timesheets and forward to the relevant department.

Support Worker

- Ensure accuracy when completing time sheets.
- Submit completed timesheet by the agreed time and day.

PROCEDURES

Timesheets

- The relevant person in your organisation reviews and collates timesheets submitted by staff, signs then forwards to payroll.
- Management completes a final check, and forwards to relevant signatory for approval.
- Once approved, timesheets are sent to payroll.

Leave

- Leave forms must accompany the timesheets.
- Leave will not be paid without a completed and lodged leave form.

Superannuation

- Superannuation is calculated automatically as part of payroll and placed in the employee's nominated fund.

PAYG Tax

- PAYG tax contributions are automatically deducted from employees' pay and an annual statement is provided as part of their group certificate. Tax deductions are also advised on the payslip.

Payroll during public holidays

- Where the pay run falls on a public holiday, specific advice will be provided via the relevant person in your organisation as to any amendment to the standard timesheet procedures.

Time Off in Lieu (TOIL)

- TOIL is available, only on approval from the relevant person in your organisation or in accordance with a written contract.

Flexible Work Practices

- If staff need to make any changes, please negotiate with the Manager as soon as possible.

Overtime

- Overtime must be negotiated and approved by senior management prior to any overtime being worked or claimed.

RELEVANT STANDARDS AND LEGISLATION

Aged Care Standards, specifically **Standard 7 and 8**

Local Government Industry Award 2017

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Blackall-Tambo Regional Council

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Tambo Multipurpose Centre Policy

Policy Number: MPC-MM1	Effective Date: 16 February 2022
Version Number: One	Review Date: 16 February 2024
Policy Compiled by: Tambo MPC Coordinator	
Policy Approved by: Director of Finance Corporate and Community Services	

MEDICATION MANAGEMENT POLICY

RATIONALE AND DEFINITION

Most people in residential aged care facilities (RACFs) need to take medicines, and many take a number of different medicines for different health conditions. RACFs must support and often manage each resident's medicines needs, while ensuring safe medication management for all residents, including those moving between the RACF and other care settings or providers.

The term 'medicine' includes prescription and non-prescription medicines, and complementary health care products.

While medicines make a significant contribution to preventing and treating disease, increasing life expectancy and improving quality of life, they also have the potential to cause harm. It has been shown that inappropriate or incorrect use of medicines can have an adverse effect on health. QUM aims to maximise the benefits and minimise the risks of harm from the use of medicines.

(Guiding principles for medication management in residential aged care facilities - Commonwealth Department of Health)

CLIENT

In all policies and related procedures, the term '*client*' infers any aged care client, resident, consumer, resident, or disability participant.

MANAGEMENT

In all policies and related procedures, the term 'Management' refers to the Aged Care Manager and may also include other personnel from the Executive and/or Management Team.

ORGANISATION STATEMENT

Blackall Tambo Regional Council, Tambo Multipurpose Centre recognises the need to ensure that medication management reflects the needs of consumers, follows best practice for clinical care and complies with relevant Commonwealth and Queensland legislation.

This purpose of the medication policy and related procedures is to protect the safety of clients and other consumers through appropriate prescription, administration, storage and disposal of drugs and to ensure that staff are given clear directions on the procedure to be followed in



accordance with Commonwealth and Queensland regulations and good care principles and practice.

Blackall Tambo Regional Council, Tambo Multipurpose Centre will ensure that all medication practices uphold consumer rights and comply with relevant Standards and legislation and will implement appropriate procedures that support expected outcomes.

RESPONSIBILITIES

Executive

- Ensure sufficient qualified and registered personnel are employed within the organisation to support appropriate clinical support to consumers.
- Support and assist in the formation and ongoing operation of the Medication Advisory Committee.

Management

- Ensure compliance with all regulatory requirements and notifications with regard to providing clinical support to consumers.
- Inform the Executive of any key regulatory changes or situations which relate to clinical care/medication management compliance; and support compliance with these.
- Provide oversight in the development and review of clinical policies and procedures that support the provision of safe and adequate care to clients.
- Facilitate the ongoing operation of the Medication Advisory Committee and ensure the implementation of recommendations.
- Ensure all staff employed in a clinical care role, or who provide medication support, have appropriate qualifications and registration and have access to appropriate ongoing training and development.
- Monitor medication incident reports and alert the relevant authority where there have been breaches of policy that have negatively impacted on consumers.
- Ensure staff are aware of legislated requirements when providing clinical care including the use of psychotropic medications for chemical restraint purposes.
- Ensure the workplace has sufficient resources to provide clinical care safely and appropriately, including the safe storage and disposal of medications.

MEDICATION ADVISORY COMMITTEE

- To provide leadership and direction in the safe use and administration of medicines to residents in accordance with best practice, legislative and statutory requirements.

STAFF

- Work within scope of practice and role description.
- Follow the service and organisation policies and procedures relating to medication administration and clinical care.
- Follow operational guidance material such as Work Instructions, Medication Plans etc.

RELATED LINKS AND REFERENCES



Guiding Principles for Medication Management in Residential Aged Care Facilities
<https://bit.ly/37qGsvS>

Aged Care Quality Standards - <https://agedcare.health.gov.au/quality/single-set-of-aged-care-quality-standards>

NDIS Provider Quality and Safeguards - <https://www.ndis.gov.au/providers/quality-and-safeguards/nt-registering-provider#terms-of-business>

RELEVANT STANDARDS AND LEGISLATION

Aged Care Act 1997

Privacy Act 1988

Australian Privacy Principles 2013

Accountability Principles 2014

Medicines, Poisons and Therapeutic Goods Act 2019 (Queensland)

Aged Care Standards (**All Standards**)

Queensland Mental Health, Guardianship and administration, enduring power of attorney and medical directive/advance care planning legislation

Disability Services Act 2006 (Queensland)

Disability Services Act 1986 (Commonwealth)

National Disability Insurance Scheme Act 2013 (Commonwealth)

Disability Standards

National Disability Insurance Scheme (NDIS) Quality and Safeguarding Framework

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3. Industry, legislation or service agreement changes may necessitate modifications to procedures.
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VARIATIONS

The Management team reserves the right to vary, replace or terminate this policy from time to time.

This policy is to remain in force until it is changed.