

# **Staff Handbook**

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# **Section 1: Staffing Information**

# About Us

Welcome!

Strength In Care is a registered provider that supports people with disabilities. We are committed to, and abide by, the National Disability Insurance Scheme (NDIS) Practice Standards and the NDIS Quality and Safeguards Commission requirements.

This handbook is your guide to Strength In Care's current practices, policies and procedures and provides information regarding guidelines and rules that may affect your employment. This handbook is not a standalone document, and it should be read in conjunction with Strength In Care 's policies and procedures.

The purpose of this handbook is to:

- provide information regarding your employment
- outline the terms and conditions of your employment
- inform you of the orientation process
- provide information on Strength In Care's policies and procedures
- provide information on the NDIS Standard Practice indicators and requirements.

Strength In Care hopes your time with us is rewarding and fulfilling. We are proud to offer our employees an open and friendly work environment. We encourage employees to upskill and provide training programs to meet key competency and performance requirements. When filling vacant positions, we endeavour to promote from within our organisation.



Our managerial team follows set processes and procedures when exercising their right to change employment conditions, discipline employees, or terminate employment. In the case that your employment should be adversely affected or terminated under circumstances that you consider unfair, you may request a review of the matter with our Director or exercise your rights which are summarised in our Complaints and Feedback Policy and Procedure.

This handbook will answer most questions you have regarding your employment, but if you require further clarification on any point, please feel free to contact the Director to discuss.

Your job satisfaction, progress, and welfare are important to us. Strength In Care provides a supportive, positive and rewarding work environment that is profitable and efficient.

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# **Contact Details**

## **Orientation Process**

You will be provided with a two-week orientation period, and you will be supported through ongoing, relevant, person-centred training during this time. You will also be provided with a Staff Orientation Checklist and full access to our policies and procedures. The checklist includes key topics from our policy documents that you will be required to read, understand, and discuss with the Director.



A range of topics will be covered in the orientation period, including:

- working with participants,
- work health and safety,
- manual handling,
- fire and safety procedures,
- risk reporting,
- following support plans,
- documentation requirements,
- reporting requirements,
- listening and responding to participants,
- participant emergency procedures,
- infection control,
- mealtime management,
- medication management,
- hot water safety,
- handwashing and
- safe food handling.

Information distributed at this time will include complaints and feedback, incident management, support planning and management, and participants' rights.

You must complete the checklist within the first two weeks of your employment, ideally sooner if possible. Completing the checklist allows you to familiarise yourself with how Strength In Care operates. At the end of your orientation period, you will review your completed Staff Orientation Checklist with the Director and discuss any questions you may have.



# **Employee Rights**

Your rights as an Strength In Care employee include:

- receiving an accurate position description that outlines all responsibilities
- having concerns and complaints responded to and addressed promptly
- receiving relevant ongoing training, as required (including annual infection control refresh)
- being informed of changes to policy and procedures relating to your job role
- working in a harmonious and harassment-free work environment
- appropriate management of your personnel records to ensure privacy and confidentiality.

# **Employee Responsibilities**

As our employee, you must be reliable and responsible when undertaking all aspects of your job. Your responsibilities include, but are not limited to:

- respecting the rights of participants to make their own decisions
- treating all participants with respect and dignity
- maintaining a participant's privacy
- maintaining safe work practices
- maintaining infection control measure
- reporting to management any unsafe equipment, practices and environments
- attending mandatory training sessions
- completing the mandatory NDIS Worker Orientation Module
- complete the mandatory Federal Government's COVID-19 online training
- complete infection control refresher course
- providing and maintaining all relevant state clearance checks against current NDIS worker screening requirements
- following the NDIS Code of Conduct requirements



- asking for clarity if any aspects of the support plan and strategies are not understood
- referring to Strength In Care policies and procedures, as required
- performing duties with a consistently high standard of care and professionalism
- wearing a full uniform and identification tag when on duty (if provided)
- recording and documenting participant information, as required
- maintaining all document security outside of the office (e.g. never leave the participant's paperwork on the front seat of a car)
- acting with honesty and integrity
- complying with Strength In Care's Code of Conduct
- informing your supervisor of work absences as soon as possible
- informing your supervisor when feeling stressed
- using active listening and reporting feedback to the supervisor
- informing participants that they have a voice and can have input into policies and procedures
- reporting to management any potential or real risks of harm to participants
- maintaining currency in your work practices and knowledge of the NDIS Standards and Rules.

Your responsibility is to maintain appropriate and current professional registrations and checks, including Worker Screening, a Working with Children Check, and completion of the NDIS Worker Orientation Module, New Worker Induction Module, and the Federal Government's online COVID-19 training. You may also require a valid driving licence and car insurance (as appropriate) if this is needed to fulfil your job role.

It is your responsibility to advise management of any revisions to your contact details, e.g. name, address, emergency contact details, as soon as possible. Any changes must be reported within seven (7) days of identified adjustment.



All employees must sign our Code of Conduct and a Privacy and Confidentiality Agreement. Appropriate disciplinary action will be taken if you do not abide by these documents during your employment with Strength In Care.

# **Conflict of Interest**

Strength In Care is committed to ensuring that actions and decisions taken at all levels in our organisation are informed, objective and fair. A conflict of interest may affect the way you act, your choices, or how you vote on group decisions. Identified conflicts of interest require action to be undertaken by our organisation to ensure that personal or individual interests do not impact the organisation's services, activities or decisions.

Strength In Care expects you to declare your involvement in external work-related activities to allow for discussion and management of the potential conflicts of interest with the Director. Declaration and management of a conflict of interest are handled by the Director. You must immediately inform the Director if you undertake other (new) work outside of our organisation and complete the relevant documentation.

It is your responsibility to act in the best interest of Strength In Care and notify the Director of any potential or actual conflicts of interest immediately. You must provide formal notification of the conflict in writing to the Director by completing a Conflict of Interest Declaration Form.

All potential and actual conflicts will be recorded in the Conflict of Interest Register to provide oversight of the identified and declared conflicts.

In the event you declare or identify a conflict of interest, the Director will assess the conflict to determine if a conflict of interest exists (or there is a perception that a conflict exists). A meeting will be convened to discuss the conflict, and you may be asked to:



- contribute to the discussion, but abstain from voting or taking part in a decision on the matter
- observe but not take part in the discussion or decision-making
- leave the meeting during the discussion and before a decision has been made.

You will be informed of the outcome of the review by the Director and, if there is a conflict, advised how our organisation will manage the conflict.

#### Working Hours and Breaks

Strength In Care will provide you with specific details regarding:

- minimum shift hours, if any, e.g. paid for two hours
- start and finish times or flexible hours
- mandatory breaks after five hours
- meal breaks (these are not paid, as they are an extended period of uninterrupted rest to allow the employee time to eat a meal)
- rest breaks (provided so employees can take a short rest period during work hours) are also known as crib breaks, rest pauses or tea breaks).

Your award, enterprise agreement or other <u>registered agreement</u> will outline specific details for your paid and unpaid rest breaks and meal breaks, including:

- length of breaks
- break times
- staff payment rules.

#### **Break Between Shifts**

Awards and registered agreements may detail the minimum amount of time you may take off between the end of one shift and the commencement of the next.



# **Pay Details**

You will be provided with information regarding:

- pay frequency
- pay periods
- payday
- mandatory payroll deductions (e.g. taxation, super guarantee, garnishee order, deduction authorised by industrial instrument)
- optional payroll deductions, e.g. medical insurance, voluntary super contributions
- payslips and the information they contain (as per the *Fair Work Act 2009*)
- employee records are retained for seven years from the date an entry is changed or when employment is terminated (depending on which occurs first).

Your salary and conditions are covered in your work agreement and pay period. Pay will be processed as per your work agreement, and your wages will be deposited into your nominated bank account. Please allow for overnight processing.

You will receive a payslip after your wages are processed. As per legislative requirements, your payslip will include:

- hours worked
- pay rate
- period covered
- classification
- overtime details
- superannuation details, including the super guarantee amount
- tax deductions
- allowances or reimbursements
- leave taken.

If you have a pay query, contact the Director to discuss.



# **Applying for Leave**

Annual leave accumulates from the first day of employment, even if an employee is on probation. The leave accumulates gradually during the year, and any unused annual leave will roll over from year to year.

To apply for leave, you will be required to:

- complete a leave form
- provide the length of leave
- seek the Director 's approval.

All full-time employees are entitled to four weeks' annual leave after 12 months of continuous service. Applications must be made as early as possible, before the actual leave date, to ensure staff coverage can be arranged. For planning purposes, at least four weeks' notice should be given when applying for leave, and annual leave may be applied up to one year in advance.

Discuss your proposed leave details with the Director before completing the Leave Form. Please consider other staff and work rosters when requesting leave. School holidays are a priority leave time and, as such, require significant advanced notice. Complete the Leave Form and provide it to the Director who will notify you, in due course, if leave is approved.

Approval of annual leave is at the discretion of the Director and may not always be provided. We recommend you obtain consent for any proposed leave before arranging or booking a holiday. Annual leave may not be accepted if it falls during a busy time, if other employees already have their leave approved for the same period, or if you have insufficient days accrued. We prefer annual leave to be taken in the year it has been accrued; however, we realise that may not always be possible, and over time you may accrue many leave days. If you plan to take extended leave, we request you provide the Director with as much notice as possible so that they can prepare appropriately.

Any taken leave which has not been approved (other than personal/carer's leave) will be unpaid and, depending on the circumstances, may be considered an abandonment of your employment.

## Leave without Pay

Requests can be made for leave without pay. This type of leave is subject to staffing levels at the time of your request. Consideration will be given to the circumstances for the intended leave and your employment record. Leave without pay will be granted subject to negotiation with the Director.

## **Maternity and Parental Leave**

Parental leave is available to all employees. Leave entitlements include maternity, paternity and adoption. Parental leave can be taken when:

- an employee gives birth
- an employee's spouse or de facto partner gives birth
- an employee adopts a child under 16 years of age.

Most employees are entitled to 12 months of unpaid parental leave. Usually, parental leave is applicable after 12 months of continuous employment. Please refer to your relevant award or workplace agreement for entitlement details.



The Director should be advised at least six weeks in advance of the intended parental leave commencement date. While on parental leave, we encourage you to keep in touch with our office, especially in the weeks leading to your return to work.

#### **Long Service Leave**

Although employment law is generally regulated at a federal level, under the *Fair Work Act 2009*, long service leave is covered under state-based legislation. Long service leave will accrue and be calculated as per the appropriate legislation.

Long service leave must be agreed between yourself and Strength In Care. Initially, you should discuss your request with the Director and then put your request in writing for final consideration. Long service leave approval will be advised in due course by the Director.

#### **Bereavement Leave**

We acknowledge, at times, our employees need to take compassionate leave. Where such leave is necessary, you should contact our office as soon as possible. Leave will be granted, at the Director 's discretion, using the award or work agreement as to the basis for entitlement.

#### Superannuation

Superannuation is paid to all employees under federal government legislation governing employee superannuation. As legislated, our superannuation employee contribution will be paid at the current prescribed rate.

Superannuation will be paid on your behalf into your nominated compliant superannuation fund. The current rate is 10% and is calculated on ordinary hours worked.

Your contribution will be automatically paid into Strength In Care's nominated default superannuation fund if you do not nominate a fund.

Additional employee voluntary super contributions can also be arranged. If you choose to contribute extra, please inform us in writing and provide this information to payroll. Information can be downloaded from the Australian Government's Fair Work Australia website <u>www.fwa.gov.au</u>.

# **Emergency Contact Details**

During orientation, you will complete a form that provides details of an emergency contact.

These details are recorded, remain confidential, and are only accessed by an authorised staff member in an emergency. Information stored in your personnel file is password protected and saved on a secure server.

Please inform management of changes to your emergency contact details within five working days of changes being made.

## **First Aid**

Strength In Care will advise you if you require current first aid certification (if so, the certification record will be kept on your file).

If you are certified, in the event of an emergency, it is expected that you will undertake immediate first aid (avoid moving a participant unless they are in immediate danger). Call 000 for emergency service assistance and then contact your supervisor.



# Smoking

Strength In Care employees are not to smoke in, or around, a participant's environment, on our premises, or while wearing our uniform.

Strength In Care is committed to providing our employees with a safe workplace. The Director requests all participants who smoke to refrain from doing so when employees are performing their duties or sharing their environment.

# **Company Vehicle, Clothing and Equipment**

You may be provided with a company vehicle for work usage. Private usage of a vehicle is undertaken as per an agreement with Strength In Care. Usage conditions are recorded separately.

You will be provided with an Strength In Care uniform. We expect you to wear the uniform while performing your job, whether on or offsite. You are expected to maintain your uniform is in clean and neat order. Please discuss this with your immediate supervisor if you require a replacement uniform.

If you damage or lose equipment or property (e.g. mobile phone, iPad, vehicle, clothing, or equipment) as a result of negligence, you will be required to reimburse Strength In Care the cost incurred by the organisation to repair or replace the item.

## **Changes to Personal Information**

At the commencement of your employment, you are required to complete a form detailing your contact and medical emergency information. Your employment record is confidential and stored securely in our Employee Records.



Please notify the Director in writing if there are any changes to your details, including your name, address or information relating to any required emergency medical treatment.

# **Bullying and Harassment**

Strength In Care will not tolerate any form of bullying, harassment or any conduct that has the purpose or effect of interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

Types of harassment include sexual, racial, cultural, religious, disability or age. Please report any bullying or harassment experienced or observed immediately to the Director.

# **Access and Equity**

A central aim of the NDIS is to provide equity of access to disability support. All Australians should enjoy full services regardless of racial, religious, LGBTQI status, cultural or language backgrounds. All staff must treat people with respect and with equality.

Strength In Care is committed to applying access and equity principles and processes to our service provision according to all relevant state and national legislation. The Director is responsible for implementing appropriate policy and procedures to ensure equity of access for our participants. The Director will provide employees with policies relevant to access and equity, as necessary.



# **Complaints and Grievances**

Strength In Care complies with the principles of equal employment opportunity and equity, as defined in the *Commonwealth Sex Discrimination Act (1984)*. Strength In Care endorse these principles and are committed to the delivery of quality services that meet the needs of our participants.

We recognise differences and grievances arise from time to time. We have a fair and equitable process for dealing with employee and participant complaints and feedback. Grievances may occur internally within the organisation or externally involving our staff or third-party representatives or participants. Grievances may include issues regarding staff complaints, access to services, the conduct of others, advertising, ethical practices, or other functions of our organisation.

Strength In Care believe a fair and quick settlement of a complaint is in the best interest of all parties concerned. The principles of natural justice and procedural fairness underpin our complaints and feedback process. Our complaint mechanisms include, but are not limited to:

- verbal complaint
- written complaint
- anonymous complaint
- feedback forms/surveys.

Once a complaint has been received, Strength In Care management will:

- outline to the complainant our complaints process (including the complainant's right to have the claim reviewed by an external/individual party)
- advise receipt of the complaint in writing to the complainant
- update complainant regularly regarding complaint process progress
- inform the complainant, in writing, if a resolution is expected to take over sixty days
- record minutes of any meetings held to discuss or resolve the issue



- adopt the principles of natural justice and procedural fairness throughout all complaint proceedings
- advise staff of changes to systems or policies required to meet resolution decision/ s.

Strength In Care is bound by our Code of Practice. If there is resolution failure, the complainant has the right to representation and appeal under the relevant state or federal legislation.



# **Probation Period**

All new Strength In Care employees are provided a probationary period of three months to assess if employees are suitable for the role and our business. While on probation, you will receive the same entitlements as someone not in a probation period.

If you do not pass probation, you are still entitled to receive notice when employment ends and have your unused accumulated annual leave hours paid out.

# **Performance Appraisals**

As a new employee, your first performance appraisal will occur at the end of your threemonth probation period. You will be notified of the date of your performance appraisal and provided all relevant documentation by the Director. Performance appraisals are based on your position description and are carried out by the Director.

After your initial performance review, you will receive a minimum of one performance appraisal annually. As part of your annual performance appraisal, you will need to show current knowledge regarding our policies and procedures and any applicable NDIS legislative requirements.

Potential areas of training and education will be identified and discussed during your performance appraisal. We will be reviewing you for your capacity to work with different participants and in various service delivery models.



# **Education and Training**

It is your responsibility to maintain current practices in your field of work. We will seek feedback on your work performance from colleagues, supervisor/s and participants to identify areas you may require additional training.

At the time of your performance appraisal, the Director will discuss any additional training requirements and develop an appropriate training plan to assist support you in developing currency in skills and knowledge to meet NDIS legislative requirements including, but not limited to:

- complaints and feedback procedures
- incident management procedures
- recording and reporting procedures
- understanding and implementing the NDIS Code of Conduct
- meeting job description requirements
- infection control
- safety management (hot water safety)
- emergency and disaster management
- mealtime management.

# Section 2: NDIS Practice Standards and Quality Indicators (abbreviated version)

# Background

The NDIS Practice Standards create an essential benchmark for providers to assess their performance and demonstrate how they provide high quality and safe supports and services to NDIS participants. Together with the NDIS Code of Conduct, the NDIS Practice Standards assist participants in being aware of what quality service provision they should expect from NDIS providers.

The NDIS Practice Standards consist of a core module and several supplementary modules that apply to the types of supports and services NDIS providers deliver and the organisation's corporate structure.

These NDIS Practice Standards set out the rights of participants and the responsibilities of providers that deliver support and services to them.

## **Core Module**

# **1. Rights and Responsibilities**

The standards addressed in this division include:

- 1.1 Person-Centred Supports
- 1.2 Individual Values and Beliefs
- 1.3 Privacy and Dignity
- 1.4 Independence and Informed Choice
- 1.5 Violence, Abuse, Neglect, Exploitation and Discrimination



People with disabilities have the right to receive respect and dignity and be provided with the opportunity to participate fully in society. Our participants must be aware of and understand their rights. Our employees support and provide guidance to our participants and assist them in making quality life decisions.

It is a participant's right to try new experiences and activities, and it is Strength In Care 's role to assist them in doing this. At all times, we treat our participants fairly and independently.

Our participants have the right to talk freely and express their thoughts, opinions and choices. You are expected to listen and consider the opinions of our participants and their family and, where possible, support their choices.

Strength In Care undertake ongoing consultation with participants, their family, the advocate, and support workers to discuss the participant's support needs and how they are being met. We understand all participants communicate differently, so we provide a variety of communication methods that allow participants to communicate safely and privately.

Strength In Care identifies the culture, diversity, values and beliefs of participants and sensitively responds to their needs. We support each participant's right to practice their culture, values and beliefs. Our employees support and assist a participant's decision to be involved in the community of their choice.

We respect our participant's right to privacy and retain the confidentiality of all participant's personal information and records.



## 2. Provider Governance and Operational Management

The standards addressed in this division include:

- 2.1 Governance and Operational Management
- 2.2 Risk Management
- 2.3 Quality Management
- 2.4 Information Management
- 2.5 Feedback and Complaints Management
- 2.6 Incident Management
- 2.7 Human Resource Management
- 2.8 Continuity of Supports
- 2.9 Emergency and Disaster Management

It is essential our participants feel comfortable to tell us what they think about the services we offer. Strength In Care provides a non-discriminatory, supportive environment to any person providing either a complaint or feedback.

We welcome feedback and complaints regarding our services and make appropriate service improvements based on this information. Strength In Care will do everything possible to correct a problem a participant has reported. If a participant requires help to make a complaint or provide feedback, they can seek assistance from a support person, e.g. family member, support worker, advocate or the Ombudsman.

Strength In Care believes the elements which are vital to successful service management include high-quality ongoing staff training, continuous quality improvement of services, proper work processes and procedures, and clear and transparent communication between our staff and participants. We endeavour to meet service standards and improve our service management by working with our participants to strengthen and improve our systems by incorporating feedback throughout the organisation.



Our senior management possesses all appropriate skills and experience to monitor the effectiveness of Strength In Care 's policies and procedures and make any relevant changes identified through our continuous quality improvement system.

# **3. Provision of Supports**

The standards addressed in this division include:

- 3.1 Access to Supports
- 3.2 Support Planning
- 3.3 Service Agreements with Participants
- 3.4 Responsive Support Provision
- 3.5 Transitions to or from the Provider

Strength In Care supports participants to set goals and make choices regarding the appropriate support they require. We offer guidance and assist the participant in identifying their strengths and weaknesses to learn and develop new skills to achieve their goals.

We treat all participants fairly, irrespective of age, gender, disability, cultural background or sexuality.

Strength In Care believe all participants have the right to access support and select the service provider of their choice. We provide appropriate information, support, advice and assistance to anyone enquiring about the services we provide. We refer participants to alternative services if needed. We encourage participants to engage actively and meaningfully within the community and develop relevant connections to assist this occur.



## 4. Provision of Supports Environment

The standards addressed in this division include:

- 4.1 Safe Environment
- 4.2 Participant Money and Property
- 4.3 Management of Medication
- 4.4 Mealtime Management
- 4.5 Management of Waste

Strength In Care ensures that our participants are provided with a safe physical and emotional environment appropriate to their needs. Our staff are trained to deliver support to participants safely and identify and report any risks or potential risks.

Strength In Care works with a participant and their family or advocate regarding issuing of invoices and payment of fees. Strength In Care ensures that all payment information is precise and accurate.

Only appropriately trained staff in managing medication assist participants with their medication needs. The staff correctly administers medication and understands the steps to take in an incident. At all times, our staff follow strict medication management processes.

Mealtime support plans are developed for identified participants and must be followed by staff. Food safety and safe food storage measures must be undertaken per practice guidelines.

Strength In Care staff are trained to manage waste appropriately, to protect the participant, and any other person, from harm as a result of exposure to the waste, infectious or hazardous substances created during service delivery. Our policies, procedures, and practices comply with relevant legislation and include incident



management processes and emergency plans. We will sustainably manage paper, glass, and plastic waste in our office through recycling methods.

# Section 3: Strength In Care Policies (abbreviated)

The abbreviated policies included in this handbook are intended as a guide only and are subject to change.

# **Code of Conduct Policy**

The purpose of this policy is to apply a Code of Conduct to govern the decisions and actions of Strength In Care employees.

During your orientation, you will learn the procedure you must take when abuse allegations are made. The NDIS Quality and Safeguards Commission (2018) states: "As a worker providing supports to people with a disability, you must:

- act with respect for individual rights to freedom of expression, self-determination and decision-making, in accordance with applicable laws and conventions
- respect the privacy of people with disability
- provide supports and services safely and competently, with care and skill
- act with integrity, honesty and transparency
- promptly take steps to raise and act on concerns about matters that may impact the quality and safety of supports and services provided to people with disability
- take all reasonable steps to prevent and respond to all forms of violence, exploitation, neglect, discrimination and abuse of people with disability
- take all reasonable steps to prevent and respond to sexual misconduct."

#### Definitions

Term	Definition
Abuse	Physically hurting, hitting or saying hurtful things to another person.
Discrimination	Treating a person differently due to race, sex, age, disability or



Exploitation	Mistreating someone, usually to gain a profit or advantage.
Neglect	When someone fails to provide the support or care needed by another person, this may include not providing food or repeatedly ignoring a person.
S e x u a l misconduct	Any unlawful or unwelcome sexual conduct using force, intimidation, coercion, harassment or manipulation. It also includes inappropriate sexual relationships.

# **Advocacy Policy**

The purpose of this policy is to inform employees that every participant has the right to an advocate. An advocate is a person who will listen to a participant, help them make life decisions and set goals, and identify and implement ways to achieve a participant's goals. The advocate can also speak on the participant's behalf.

An advocate will ensure that participants feel supported and that their rights are being respected. If the participant's needs are not being met, it is the role of the advocate to speak out. Participants are encouraged to bring their advocate to their initial meeting with Strength In Care, so they can provide input into the assessment and planning processes, ensuring a person-centred support plan.

Participants may use an advocate:

- to communicate with us at anytime
- at their initial consultation
- during interviews, meetings and reviews.

#### Consent

Every participant has the right to privacy and to provide consent. Employees of Strength In Care cannot disclose any personal information regarding a participant to another party



unless the participant has provided their written consent. Our employees are provided training regarding a participant's privacy and consent requirements.

All participants are asked to sign a consent form permitting the release of their personal information. Participants can withdraw their consent at any time. Strength In Care requires a participant's consent to:

- read information about the participant, e.g. medical records, support plan, etc.
- provide information to another service provider, their family or advocate
- collect data for funding bodies
- ask support people to attend a person-centred planning meeting
- undertake training or behaviour change programs specific to their support plan
- provide information to a doctor or a dentist
- review the participant's medication records to provide medication support.

Effective communication between Strength In Care staff, the participant and all other stakeholders is pivotal to providing person-centred and informed support. Our Director is the key contact for frontline staff queries regarding work-related tasks or issues.

Strength In Care 's Director will provide all correct and relevant information regarding employment details, e.g. wages, leave, performance appraisals, etc.

At times, the nature of fulfilling a support role may mean you feel isolated, it is important to understand Strength In Care provides support and guidance to all employees, and we appreciate the invaluable work you are performing. Strength In Care communicates with our employees in various ways, including:

- staff meetings
- emails
- newsletters
- supervisor site visits.



# Communication

Always check the support plan to determine the communication methods and strategies. These strategies are requested by the participant and must be used.

Strength In Care encourages and supports the family to maintain involvement with the participant. A participant's consent is required for a family member to contact Strength In Care and request information and support to be provided. The family, or an advocate, can be involved in planning services that a participant will receive via our person-centred planning meeting.

Strength In Care supports the participant and their family by:

- communicating using methods they understand
- providing information on all available services, including other support services/ agencies
- helping build trust and respect between our employees, the family and the participant
- providing them with the opportunity to take part in service delivery planning
- creating opportunities to develop links with other supports and the community
- assisting them to access counselling, advocacy and support services
- providing access to informative feedback and complaint procedure.

#### **Interpreter Services**

If a participant is from a non-English speaking background, Strength In Care attempts to assign them a staff member who speaks their language. Participant consent is required to access an interpreter, and an interpreter must document any meetings they attended with the participant and staff/workers in the participant's notes. A telephone interpreter service



is used only in a crisis or an emergency. Read the support plan to identify if this service is required.

## **Privacy and Confidentiality Policy and Procedure**

Strength In Care is committed to protecting and upholding the right to privacy for our participants, employees and senior management. Strength In Care protects the privacy of individuals by using appropriate processes to collect, store and use information.

Employees and management, consistently and carefully, manage what is written and said about individuals and the process taken to decide who can hear or view this information.

# Management of Participant's Information

Participant records are confidential and are only available to the participant and employees directly engaged in delivering service to the participant. Information regarding participants is only made available to other parties with the participant's consent. All participant records are kept on a secure password-protected server, and they are restricted to employees directly engaged in the delivery of service to a participant. Participant paper records are kept securely in a locked filing cabinet in the Director 's office.

A participant can ask you about their support plan. You can inform them of what is identified on the plan, but refer to your supervisor if unsure about any aspect and do not give false information.

## Management of Your Personnel File

Your employee record is confidential and can only be viewed by senior management and yourself. You can request access to your file by contacting the Director. All your records are kept on a secure password-protected server or in a securely locked filing cabinet in the Director 's office.

# Equal Employment Opportunity Policy

Strength In Care commits to providing equal employment opportunities to all prospective and current employees, promoting a fair and equal workplace. Strength In Care selects the most suitable candidate for a role, regardless of race, disability, gender, age, sexual orientation, marital status, family responsibility and religious or political beliefs.

# **Risk Management Policy and Procedure**

Strength In Care has established and maintained a Risk Management Plan. This plan identifies and addresses risks associated with key stakeholders identified below:

Stakeholder	Risks identified and addressed
Staff	Lack of suitably qualified staff
	Extended staff illness
	Staff injury due to work health and safety issue
	Pandemic management
	Risk assessed role



Participant	<ul> <li>Environmental</li> <li>Disaster</li> <li>Emergency</li> <li>Infection</li> <li>Hot water</li> <li>Transport</li> <li>Transition to an from temporary support</li> <li>Working in the participant's home</li> <li>Services provided outside the home environment</li> <li>Service delivery interruption</li> </ul>
Strength In Care	<ul> <li>Loss of funding</li> <li>Inability to deliver funded outcomes within budget</li> <li>Lack of suitably qualified staff</li> <li>Extended staff illness</li> <li>Damage to reputation and relationships</li> <li>Emergency and disasters</li> </ul>

## **Risk Management Procedure**

Our aim is for participants and staff safety, health and wellbeing to be managed and prioritised. A risk to a participant and yourself may have long-term consequences; our team would prefer to eliminate and reduce the risk to ensure all persons' safety. Risk management relates to your working with participants and includes any risks to the participant. Any identified risk or hazard must be communicated to your supervisor for actioning

- 1. Identify the hazard and risk.
  - a. Inform relevant staff member
- 2. Assess the hazard and risk.
- 3. Risk strategy implementation
- 4. Report the hazard and risk.
- 5. Monitor and maintain participant/staff safety.
- 6. Document circumstance of hazard and risk.
- 7. Evaluate the resolution of hazard incidents
- 8. Management review of risks for future planning and practice development.



## **Continuous Improvement Policy and Procedure**

Staff and participants are encouraged to provide feedback or make a complaint. Our collaborative and person-centred approach means that Strength In Care will respond to information received to improve the services we provide.

The purpose of the Continuous Improvement Policy and Procedure is to seek feedback from participants and employees, as this often drives changes to our procedures and processes, enabling us to provide a high-quality service that continually meets the needs of our participants.

We consider our employees an integral part of our continuous improvement system. We welcome your feedback and, in turn, provide you with feedback to guide and improve your work practices.

## Gifts

The Director recognises that participants, on occasion, like to give gifts to our employees. Our policy is that employees may only accept a gift that could be shared with other staff members, e.g. a cake or chocolates. Money is NEVER to be accepted by an employee under any circumstances.

## **Complaints and Feedback Policy and Procedure**

Strength In Care welcome complaints and feedback from employees, participants, family and visitors. A Feedback and Complaint Form can be submitted to the Director or anonymously. A complaint can be made without fear of reprisal as we have a resolutionfocused culture that respects the right to privacy and confidentiality.



Your responsibility is to document a participant's complaint (if required) and refer the matter immediately to the Director. Participants are advised of their right to take their complaint to whomever they feel comfortable with and are offered an independent advocate (if required).



## **Complaint Handling Within Strength In Care**

- 1. If a complaint is regarding **support or service**, management will deal with it.
- 2. If the complaint is about a **staff member**, management will deal with it.
- 3. An external person or body may be approached (see our Complaints Policy and Procedure for detailed information).

Employees should not discuss a complaint with anyone other than the Director.

Complaint contact details

Complaints Manager	Olivier Vles
Contact number	430055145
Email	ollie@strengthincare.com.au
Address	3J/19 Bruce Street, Mornington VIC 3931

# Reportable Incident, Accident and Emergency Policy and Procedure

This policy minimises risk and prevents incidents by implementing appropriate participant care plans, assessments, and reviews.

During orientation, you will be advised of all procedures involved in the event of an incident occurring. Employee compliance is monitored, and ongoing training is provided by Strength In Care.

Reportable incidents are incidents or allegations that result in serious harm to an NDIS participant. These incidents must be notified **immediately** to the Director for recording and reporting.



The NDIS Commissioner must be notified within 24 hours in the event of:

- the death of an NDIS participant
- serious injury of an NDIS participant
- abuse or neglect of an NDIS participant
- unlawful sexual or physical contact with or assault of an NDIS participant
- sexual misconduct committed against or in the presence of an NDIS participant, including grooming of a participant for sexual activity
- the unauthorised use of the restrictive practice to an NDIS participant.

### What is Restrictive Practice?

A restrictive practice is a practice or intervention that restricts the rights or freedom of movement of a person with a disability. Restrictive practices include seclusion and chemical, mechanical, physical and environmental restraints. Note: these are all reportable incidents

### Timeframes for notifying the NDIS Commission about reportable incidents

When a reportable incident occurs or is alleged in connection with the NDIS supports or services you deliver, you must notify us using the <u>NDIS Commission Portal</u> within the required timeframes (set out below). The timeframes are calculated from when a registered NDIS provider became aware that the incident occurred or was alleged to have occurred.

Reportable incident	R e q u i r e d timeframe
death of a person with disability	24 hours
serious injury of a person with disability	24 hours
abuse or neglect of a person with disability	24 hours



unlawful sexual or physical contact with, or assault of, a person with disability	24 hours
sexual misconduct committed against, or in the presence of, a person with disability, including grooming of the person for sexual activity	24 hours
the use of a restrictive practice to a person with disability if the use is not following a required state or territory authorisation and/or not follow a behaviour support plan.	Five business days

## Working with Children Policy and Procedure

Strength In Care believes all participants have the right to feel safe and live in an environment that protects them from assault, neglect, exploitation or abuse, particularly children.

Strength In Care recognises that prevention is the best protection from abuse and neglect. Our employees have a duty of care to implement our prevention strategies. Staff who work in a risk-assessed role require current clearances and criminal record checks.

Strength In Care staff (as a mandatory reporter) are required to report any indicators of assault, neglect, exploitation or abuse to the Director, who will follow the required state reporting processes. Failure to report an abusive situation may result in a criminal offence.

## **Assistance with Medication**

Strength In Care 's Director will speak with the participant and their family/advocate to complete an assessment regarding medication needs. When we have concerns regarding a participant's ability to manage their medication safely, a Self-Administration of Medication Assessment will be completed. Staff members with relevant qualifications deliver medication to our participants.



Check medication delivery and strategies to ensure participants with dysphagia can swallow their medication.

## **Emergency and Disaster Management**

All participants must have an emergency preparation plan. You may need to complete a planned trial with the participant and provide feedback to update the plan.

All staff must read and understand each participant's support and emergency preparation plans.

## **Infection Management**

All staff must undertake infection management training upon induction and at least annually.

You need to make yourself available for refresher courses. Staff are required to arrive for work with clean clothing and wash their hands before working with each participant. You must all clean all surfaces where contamination may occur.

## **Mealtime Management**

Participants may have specific mealtime requirements such as foods, sitting positions and other specific strategies. Staff must follow the instructions in the mealtime management plan and respond to emergencies as per plan.

## **Hot Water Safety**

All staff must monitor all hot water to eliminate the risk of burns and scalding. Staff must:



- run the cold water at the beginning and end of each bath and check the temperature
- monitor the shower's heat to prevent scalding
- monitor heat substances and surfaces
- undertake first aid and call an ambulance as per policy requirements

# Work Health Safety and Environmental Management Policy and Procedure

Strength In Care has established and maintained an effective work health and safety (WHS) process, so our employees can contribute to any decisions Strength In Care make which affect their health, safety and welfare at work.

The intended outcomes of this policy include:

- prevention of risk or injury to workers and others
- ongoing consultation with staff regarding the risk management process
- establishment and maintenance of safe work systems
- appropriate employee training available (and updated according to current regulations).

Employees are required to follow WHS policy procedures, including:

- using personal protective equipment, e.g. gloves, masks and enclosed shoes
- using only approved chemicals and products
- using approved equipment in the method required
- informing management when a doctor has diagnosed a short-term, infectious illness
- completing a Hazard Report Form, as required.

## Support Planning Policy and Procedure

This policy focuses on successful participant outcomes and how we undertake a collaborative approach to achieve this.

The participant is the focus of a support plan, and all aspects are designed with the participant's needs, interests and aspirations as the focus. The following processes will be undertaken:

- Assessments are conducted before commencement.
- The Director will conduct all assessments face-to-face with the participant and/or their representative/advocate.
- Assessment interview time/s are arranged by telephone. The participant is informed that they can have their representative present if required or desired.
- An interpreter and information in the participant's language will be sourced if their background and language require these services.
- During the assessment process, the Director will explain to the participant information regarding:
  - collection and use of the participant's personal information
  - privacy and confidentiality
  - advocacy.
- The Director then reviewed the completed assessments; areas of independence and identified needs would form the basis of support discussions.
- Developing a support plan is a consultative process between all relevant parties.
   Once the support plan has been finalised and the participant is happy, they must sign off on the plan. A copy of the plan is then issued to the participant.
- A staff member will record the participant's goals and aspirations, focusing on the participant as an individual. Goals are flexible and subject to change depending on progress or other factors. Records will also include the participant's unique skills and strengths to promote independence.



- A staff member will collect information during their work with participants. This evidence-based information is recorded to ensure service delivery meets a participant's current needs, interests and aspirations.
- Assessments are conducted regularly to ensure the participant's needs continue to be met.
- Support plans are reviewed regularly to ensure that the participant receives relevant support. If it becomes evident that supports should be adjusted, then Strength In Care will consult with participants and their families or advocate. Reviews will occur as required.
- Support plans will include requirements and strategies related to lifestyle, health, community links, vaccination, oral health, comprehensive assessment, emergency and disaster planning, mealtime planning and risks related to the participant and their service environments.

## **Participant Money Handling**

Staff cannot use the participant's bank cards to access Automated Teller Machines (ATM) or Electronic Funds Transfer Point of Sale (EFTPOS). Staff must never know their Personal Identification Number (PIN).

## **Continuity of Support Policy and Procedure**

The purpose of this policy is to manage the ongoing provision of continuous support to participants. Where possible, a staff member is paired with a participant who requires their skills and knowledge. The Director will arrange schedules to suit the staff member's availability.

If a staff member has a second language or can relate to a cultural group, then our Director may link them to a participant who is seeking a worker with these attributes.



Consideration is also given to the employee's home location during the work allocation process and will always endeavour to place employees close to their home if possible.

Staff are allocated to a participant on an ongoing basis to create predictability and provide continuous support. All supports are linked to the participant's plan and will demonstrate consistency to their preferences and needs.

In the event a participant's staff member is absent, Strength In Care will:

- contact a staff member with appropriate qualifications, as a suitable replacement
- provide a staff member who has worked previously with the participant and who is aware of the participant's requirements (where possible)
- advise the participant details of the replacement worker and then gather participant feedback on the replacement service
- ensure replacement staff are sensitive to the participant's needs and ensure that care is consistent with their expressed preferences.

## **Networking and Community Engagement**

Strength In Care will engage with networks and local communities to ensure that our participants are provided opportunities to be involved in activities and areas of interest. We will access networks such as religious groups, local ethnic communities or other groups, as requested by the participant. We believe that it is essential for participants to be part of their community.

We encourage our employees who have links to various networks or communities to advise our Director of this.

## **Employee Training and Personal Development**



Each employee must maintain current knowledge and skills relating to their job role, which will require maintaining currency and registration in relevant professional bodies for some employees.

All employees undergo an annual performance appraisal. This process allows us to match your performance to your job description, feedback from participants, services delivered, and your work quality. You will have the opportunity to be involved and provide feedback during this appraisal. This process may lead to:

- additional training
- promotion
- increased wages
- increased hours
- improvement in our policies and practices.

If you wish to increase your knowledge and undertake a professional training course, please contact the Director to discuss your training options.

First aid qualifications are part of your job specifications. Training in work health and safety areas, such as disaster management and manual handling, may be undertaken annually by some employees. An annual infection control refresher must be completed.



## Section 4: Additional Standards

## **Child Safe Standards**

# Standard 1. Child safety is embedded in our organisational leadership, governance and culture

- Commitment to safety.
- Staff are trained in:
  - o child safety
  - Codes of Conduct
  - behavioural standards when interacting with children
  - reporting obligations and record keeping.
- Risk management plans are undertaken for each child.
- Comply with NDIS Code of Conduct, our organisation's Code of Conduct and the Statement of Commitment to Safety.

## Standard 2. Children participate in decisions affecting them and are taken

#### seriously

- Children can express their views and are provided opportunities to participate in decisions that affect their lives:
  - upon commencement with our organisation
  - on an ongoing basis (they are asked regularly for their thoughts and ideas)
  - at the review of their plan.
- The importance of friendships is recognised, and support from peers is encouraged, helping children feel safe and be less isolated.
- Work with the child and the family to determine how best to assist with these linkages.
- Children can access abuse prevention programs and information.



- We provide links to relevant organisations such as Kids Helpline, as needed.
- Age-appropriate information that describes how adults should behave towards the child is provided.
- Staff are attuned to signs of harm and facilitate child-friendly ways for children to communicate and raise their concerns:
  - staff trained to work with each child
  - knowledge and skills are assessed to determine training to ensure skills and knowledge are evident.

### Standard 3. Families and communities are informed and involved

- All levels of our organisation encourage families to take an active role in keeping children safe.
- Our policies and procedures (including the Code of Conduct) are communicated to parents and carers (e.g. Welcome Pack including Participant Handbook)
- Families and community members are encouraged to provide feedback on how well the organisation keeps children safe, and this information is acted upon where necessary: Feedback can be provided via:
  - a Complaint and Feedback Form
  - meetings are held about a child.

### Standard 4. Equity is upheld, and diverse needs are considered

- The Director and our staff understand the type of barriers that prevent children from disclosing abuse or adults from recognising a child's disclosure.
- The Director and our staff identify and respect the diverse needs, abilities and backgrounds of children and understand the value of treating them fairly.
- Our organisation reviews each child's cultural needs at intake.
- We provide relevant, culturally sensitive, age-appropriate activities to children.
- All staff are trained and provided information about the factors that may increase a child's vulnerability to harm.



- The Director ensures that our workforce reflects the diversity of the children we provide services to, where possible.
- The Director and staff adapt activities and services to ensure all children feel included, and we undertake the following for each child:
  - risk management plan
  - strategy planning.

### Standard 5. People working with children are suitable and supported

- When recruiting, Strength In Care does not solely rely on the Working with Children Check. We also provide ongoing staff training opportunities for all staff, including:
  - induction
  - annual training
- When recruiting, Strength In Care is aware of and implements child safe recruitment practices.
- All vacant position advertisements identify that we value child safety.
- Recruitment processes involve a range of interview questions to establish staff suitability.
- Background and reference checks are carried out and recorded (see Human Resource Management Policy and Procedure).
- Supervision includes regular reviews to check whether staff follow Codes of Conduct and other child-safe policies.
- The Director monitors all aspects of supervision and undertakes employee supervision at least quarterly.

# Standard 6. Processes when responding to complaints of child abuse (or other concerns) are child-focused.

• The Director builds a culture where complaints are taken seriously, and all employees take responsibility for the safety of children using our induction process and cultural staff training.



- During a new employee's induction, the Director clearly explains that the Code of Conduct breaches will result in disciplinary action. Staff are also informed of this ongoing through internal training sessions.
- Staff are given support and information on what and how to report, including external bodies.
- Accessible procedures enable children, staff and others to make complaints. These procedures include potential time frames, review processes and potential outcomes of complaints.
- Complaints are handled confidentially (see Complaints and Feedback Policy and Procedure).
- Processes are reviewed at regular intervals and after a complaint is received by Strength In Care.
- Documents are treated confidentially, as required.

# Standard 7. Staff are equipped with knowledge, skills and awareness to keep children safe through continual education and training

- The Director provides ongoing education and training opportunities for all staff, including:
  - knowledge, skills and confidence to prevent and identify abuse
  - how to respond to and report complaints.
- Additional training is provided when higher risks towards a child or young person are involved, e.g. behaviour management.
- The Director is responsible for all staff training.
- Training is regularly reviewed in response to emerging best practices.

# Standard 8. Physical and online environments minimise the opportunity for abuse or other kinds of harm to occur

• The Director sets expectations regarding behavioural standards for staff when interacting with children in physical and online environments.



- Risk assessments identify areas where staff have opportunities to interact with children unsupervised, including one-off events and overnight accommodation.
- Physical environments are altered to increase natural sight-lines while respecting a child's privacy rights.
- Higher-risk areas such as cars, boarding facilities and offsite locations are managed using specific safety measures, such as spot checks.
- Children are provided information regarding online safety and are regularly encouraged to tell staff about negative experiences.
- Staff and parents are provided information about risks in the online environment (e.g. online grooming, cyberbullying and sexting).

# Standard 9. Implementation of Child Safety Standards are continually reviewed and improved

- The Director maintains a culture of continuous improvement to ensure that policies and procedures are implemented and routinely reviewed even though staffing may change.
- The Director understands the value of continuous monitoring, open conversations and exploring new ways to keep children safe.
- Our child-safe policies and practices are reviewed annually.
- Staff refer to the Child Safe Standards when creating, reviewing or evaluating child-safe policies and procedures.
- Critical incidents are used to identify the root cause of a problem, identify risks to children's safety, and make improvements (e.g. Incident Report and Incident Investigation Form and Continuous Improvement Register).
- Children are supported to provide feedback which we will act on if required.

# Standard 10 Policies and procedures document how the organisation is child safe

- The Director will ensure that policies and procedures and reviewed and compliant.
- Strength In Care acknowledges that we will be held accountable against our policies and procedures.



- Staff are trained and knowledgeable about organisation procedures, especially how they relate to child safety
- Staff, parents and carers are informed and have access to Strength In Care child safe policies and procedures and complaint policy and procedure.



## **Additional Frameworks**

### NDIS Workforce Capability Framework

The Framework translates the NDIS Commission's principles, Practice Standards and Code of Conduct into clear and observable behaviours that service providers and workers should demonstrate when delivering services to people with disability.

It is written from the participant's perspective and describes the core capabilities that workers need to deliver services and supports. It also describes a range of additional capabilities required when working with participants who have support needs requiring specialised knowledge and/or skills.

NDIS Psychosocial Disability Recovery-Orientated Framework

The Psychosocial Disability Recovery-Oriented Framework (Recovery Framework) has been developed to ensure that the NDIS is more responsive to participants living with psychosocial disability, their families and carers.

#### Positive Behaviour Support Capability Framework

The Positive Behaviour Support Capability Framework focuses on the knowledge and skills that underpin contemporary evidence-based practice. It reflects the diversity and variation of the sector's capability in delivering behaviour support and provides a pathway for recognition and professional progression for behaviour support practitioners.

The Positive Behaviour Support Capability Framework aims to strengthen the safeguards for people receiving behaviour support and demonstrate a commitment to reducing and eliminating restrictive practices. It establishes clear expectations for behaviour support practitioners and assists them in moving towards a higher standard of practice. The Framework has four practitioner levels - core, proficient, advanced and specialist.



Staff Handbook Strength In Care

Assessment against the Positive Behaviour Support Capability Framework will form the basis for determining suitability as an NDIS behaviour support practitioner. Behaviour support practitioners who have been considered 'provisionally suitable' as NDIS behaviour support practitioners to deliver behaviour support services will notify the NDIS Commission when they are required to go through the assessment process.