MINISTER’S FOREWORD

The Northern Territory Disability Service Standards have been developed through a critical evaluation of national and international best practice as well as far-reaching community consultation.

Consultation included public forums in all regional centres, written and verbal responses from individuals with disabilities, their families and support networks and service providers. Other methods for consulting included smaller meetings with these groups and a “Disability Update” newsletter distributed throughout the Northern Territory.

Feedback from this consultation provided invaluable input into the standards and I would like to take this opportunity to thank all the people and organisations who contributed their time, energy and expertise.

The Northern Territory Disability Service Standards are based on the National (Commonwealth) Disability Service Standards. Being able to build on existing standards helps to maintain continuity and consistency, however, the current standards development process has focussed on issues particularly pertinent to the Northern Territory. These include standards promoting cultural and family relationships and appropriate support and training for support workers and volunteers.

I am confident these standards will provide a benchmark for best practice in disability services in the Northern Territory.

It is therefore with great pleasure that I commend to you the Northern Territory Disability Service Standards.

Stephen Dunham MLA

Minister for Health, Family and Children’s Services
CHIEF EXECUTIVE OFFICER’S FOREWORD

Territory Health Services is pleased to have been involved in developing these Disability Service Standards for the Northern Territory as an important element of its strategic planning framework for disability services.

These standards aspire to meet principles that underpin our services in this important area of our Community Health portfolio. In particular, the standards endeavour to provide customers, service agencies and others in the disability services spectrum, with clear guidelines on the service outcomes intended.

The principles in these standards relate to the rights of people with a disability, their choices in regard to services and importantly, accountability within the family of service providers.

Although the standards are not prescriptive, they provide clear objectives regarding the quality and scope of disability services. Disability service providers in the Northern Territory are required to meet the standards within existing resources.

I am optimistic that these standards will assist us towards outcomes for people with disabilities in the Northern Territory. I therefore commend to you the Northern Territory Disability Service Standards.

Peter Plummer
Chief Executive Officer
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BACKGROUND TO DISABILITY STANDARDS IN AUSTRALIA

The Commonwealth Disability Services Act was passed in 1986. The Act marked a significant achievement in gaining recognition of the rights of people with disabilities in Australia. To assist in the implementation of the Act, national Disability Service Standards were developed and endorsed by the Commonwealth Parliament in 1992. Each state and territory then developed its own disability service legislation and standards. Historically, disability services in the Northern Territory referred to the Commonwealth Disability Service Standards.

THE NORTHERN TERRITORY RESPONSE

In October 1997, the Minister for Health, Family and Children’s Services launched the Disability Services Five Year Strategic Plan (1997-2001) for services provided and/or funded by Territory Health Services (THS). Written following Territory-wide consultation, the plan endorsed a review of the Northern Territory Disability Services Act and the development of culturally appropriate Disability Service Standards.

In April 1998, work began to draft Disability Service Standards for the Northern Territory.

PRINCIPLES UNDERLYING THE NORTHERN TERRITORY DISABILITY SERVICE STANDARDS:

(Adapted from the Northern Territory Disability Services Five Year Strategic Plan)

- That the human rights of people with disabilities be recognised, as proclaimed by the United Nations in the Universal Declaration of Human Rights (1948) and the Standard Rules on the Equalisation of Opportunities for Persons with Disabilities.

- That all people with disabilities have the right to an optimum quality of life - ‘a life, not just an existence’.

- That all people with disabilities have meaningful choices about how their individual needs are met and how they are involved in the ongoing development, delivery and evaluation of services they receive.
• That all people with disabilities have the right to services that meet their individual needs in a timely and culturally appropriate manner.

• That all services for people with disabilities be accountable to their consumers, families of consumers, support workers and funding bodies.

**FORMAT OF THE STANDARDS**

There are eight standards altogether, each with a number of supporting standards. The standards are presented in two formats. The first format is a summary booklet, the second a more detailed version, containing all supporting standards and examples of good and poor practice in service delivery. Both formats contain a summary of each standard written in Plain English.

A separate document titled Northern Territory Disability Service Standards Implementation Guide has been written with a wide variety of readers in mind. The guide is designed to support use of the standards.

**THE CONSULTATION PROCESS**

The standards were drafted following a national review of standards in a range of related fields including: all interstate disability programs; Home and Community Care (HACC); Aged Care and Supported Accommodation Assistance Program (SAAP).

The first draft of the standards was circulated throughout the Northern Territory for public comment. The consultation process targeted a wide range of groups including: Northern Territory Aboriginal health and legal organisations; remote communities; people with disabilities and their support networks; disability consumer groups; peak bodies; advocacy groups; service providers; and the wider community. Using feedback from this process, a second draft of the standards was developed, circulated for public comment and discussed in a series of public forums across the Northern Territory.

**PURPOSE OF THE STANDARDS**

The intent of the Northern Territory Disability Service Standards is to ensure the services provided to consumers are consistent with the Principles and Objectives of the Northern Territory Disability Services Act.
Additionally, the standards aim to:

- focus on the outcomes of services for consumers;
- inform people with disabilities of their rights in relation to the type and nature of services they access;
- provide a guide for people with disabilities and service providers to jointly improve the appropriateness and quality of services;
- provide a framework for the future development of assessment and monitoring tools to measure outcomes for service consumers.

The standards do not provide:

- a quick solution for everyday issues of service provision;
- a complete checklist of every issue or work practice faced by people with disabilities.

Meeting these standards is only the first part of a quality assurance process to ensure that people with disabilities have access to timely and culturally appropriate services that achieve best practice benchmarks.

APPLICABILITY OF THE STANDARDS

The standards are relevant to:

- non-government and government disability service agencies; consumers and their support networks, including families and support workers; and funding bodies.

These standards are intended to apply to all services for people with disabilities provided and/or funded by Territory Health Services (THS). Some of the standards may overlap with other standards such as: the National Standards for Mental Health Services; Home and Community Care (HACC) Standards and the Out of Home Care Standards (THS Family and Community Services Program).

The standards are not prescriptive. All users of the standards will be expected to understand the intent and underlying principle of each standard so as to best meet requirements within existing resources.

The Northern Territory Disability Service Standards Implementation Guide provides further information.
NOTES ON WORDING OF STANDARDS

1. ‘Written policies and procedures’ (marked by the symbol #)
In some cases it may not be feasible for a service to record all policies and procedures in written form - for example, where support workers and carers have limited literacy skills. In such cases, the agency providing the service needs to demonstrate that policies and procedures, although unwritten, exist and are followed.

2. ‘Support workers’ vs ‘staff’ vs ‘carers’ vs ‘volunteers’
The generic term ‘support workers’ signifies those who support people with disabilities outside their circle of family and friends, whether paid or unpaid. It replaces the term ‘staff’.

The term ‘carers’ refers to family and friends who care for and support a person with a disability, whether paid or unpaid.

The term ‘volunteers’ refers to those who, outside the family and close friends of a person with a disability, provide unpaid support.

3. ‘Support Network’
In these standards, the term ‘support network’ includes but is not restricted to: family members; friends; support workers; advocates; guardians; or anyone else a person with a disability identifies as a significant person in their life.

4. ‘Natural Support’
The term ‘natural support’ refers to those people who do not have a formal or paid position but who have a significant relationship with the person with a disability and contribute to their quality of life.

5. Examples of ‘Poor Practice’
These are provided as a contrast to supporting practices and are not intended as a checklist. In contrasting examples of ‘good’ and ‘poor’ practice, the intention is to provide clear guidelines about what does and what does not constitute best practice.

For further definitions of terms contained in these standards, refer to the Glossary in the Northern Territory Disability Service Standards Implementation Guide.
Access to Services

Each person with a disability has access to the most appropriate services for his or her assessed needs and personal preferences.

Information about the nature of the services, eligibility criteria and all related matters is readily available.

**Plain English**

People with disabilities should be able to easily find out about services and access those that best suit their needs.

**SUPPORTING STANDARDS**

**11 Consumer Entry/Exit Guidelines**

Consumers will be aware of policies and procedures for entering and leaving the agency. Related assessment processes will be transparent.

**Supporting Practices**

- Written policies and procedures describe processes for entering and leaving the agency, including criteria for service eligibility.
- Written policies and procedures describe the composition and conduct of application panels in the agency.
- Application panel membership includes: consumers and/or members of their support networks; agency management; and agency support workers.

- The person with a disability and members of their support network are offered the opportunity to be present and to speak to the application panel when their application is considered.
- Unsuccessful applicants and their referral sources are provided with written information concerning reasons for non-acceptance, alternative options and the right to appeal.
- Written policies and procedures describe processes for consumer movements within the agency.
- Policies and procedures are available to people with disabilities and members of their support networks including agency support workers.
Where other agencies provide similar services, the agency participates in cooperative planning for access to services.

**Examples of poor practice**

- People with disabilities are excluded from an agency without being given reasons and without any avenue of appeal. The agency keeps no records of applications, waiting lists, needs surveys, decisions and/or appeals.

- Application panels have no consumer representation.

**Consumer Orientation**

Each consumer accessing a service for the first time will receive thorough orientation to the agency and relevant services.

**Supporting Practices**

- Consumers and members of their support networks receive information about the agency and its services in a format they can understand.

Written policies and procedures ensure that new consumers are thoroughly orientated to the agency, including, as appropriate, visits, orientation sessions and meetings with other consumers.

The agency has written policies and procedures for assisting and supporting consumers who may have emotional or behavioural problems as a result of adjusting to new services (see supporting standard 3.3).

**Examples of Poor Practice**

- A consumer’s challenging behaviour is seen as a rejection of the service rather than as a symptom of the transition period, such as difficulty in adjusting to change.

- The orientation process is the same for everybody and takes no account of individual needs.
Each consumer will have the opportunity to be involved in all aspects of service development, planning and review.

Supporting practices

✓ Each service has goals, objectives and consumer outcomes consistent with the objectives and principles of the Northern Territory Disability Services Act.

✓ Consumers and members of their support networks, including support workers, are involved in decisions about the most appropriate methods of service delivery to meet individual needs, such as the provision of individual or group activities.

✓ Regular reviews of the service focus on consumer outcomes, methods of service delivery and consumer and family satisfaction.

✓ Consumer feedback and review outcomes are used to modify the goals, objectives and outcomes of the service.

✓ Service planning processes include networking with other service providers to ensure that the needs of consumers accessing more than one service are identified and met.

Examples of Poor Practice

✗ Changes to the way the agency is run occur in an ad hoc manner or as a knee-jerk reaction to a particular situation.

✗ Agency planning occurs in isolation from other agencies.

✗ Evaluation of services only occurs annually and practices are not reviewed as required.

✗ Consumer questioning of the service and suggestions for improvement are seen as grounds for service withdrawal.
1.4 Agency Cooperation

The agency will cooperate with other agencies that consumers access, or are likely to access, in order to provide optimum service coordination and delivery.

Supporting Practices

✔ The agency refers the consumer to other agencies where appropriate or where requested and, when doing so, develops a service coordination plan in collaboration with the consumer.

✔ There is cooperation between agencies providing, or with the potential to provide, services to the same or a similar consumer group.

✔ Roles and responsibilities are clearly negotiated among agencies and are understood by both consumers and service providers.

✔ Written # policies and procedures cover processes for resolving difficulties and disputes that may arise between agencies.

✔ A referral and follow-up process exists for consumers who use generic services. The agency works with the consumer to identify the most appropriate services.

✔ Written # policies and procedures ensure that only relevant information about consumers is transferred, with their written # consent, to another agency (see supporting standard 5.2).

✔ The agency keeps an up-to-date directory of all service delivery systems and resources available to consumers and their support networks.

Examples of Poor Practice

✗ All consumers are all sent to a generic agency because that is the easiest option.

✗ Agencies do not share their knowledge and skills.
Getting the most out of life ...

Northern Territory Disability Service Standards

Individual Needs

Each person with a disability will receive a service that meets, in the least restrictive way, his or her individual needs.

Plain English

People with disabilities will get the best support available so they can enjoy as many activities in life as possible.

Supporting Standards

2.1 Individual Planning and Review

Each consumer will receive services that take account of their individual needs and will be consulted by the agency in the development of these services.

Supporting Practices

✔ Each consumer has a written plan that details his or her individual needs and outcomes as they relate to the service.

✔ Each consumer, with appropriate support, is involved in developing their individual plan and receives a copy.

✔ Each consumer’s plan identifies the people who are responsible for working with them to achieve outcomes.

✔ The plan contains realistic time lines. The plan is reviewed at an agreed time and further reviews are incorporated in subsequent plans.

Examples of Poor Practice

✗ Individual plans are fixed for two years without review.

✗ Individual plans are kept in a locked filing cabinet and are not accessible to the consumer or members of their support network.

2.2 Least Restrictive Alternatives

Each consumer will receive services offered in a manner that reflects, as closely as possible, community norms and practices.
Supporting Practices

- The agency reflects community expectations of what people of comparable age would be doing in a similar setting at particular stages of life and times of day.
- Consumers feel comfortable about behaving in ways that are consistent with their cultural backgrounds.
- Services recognise and respect the age, sex, cultural, linguistic and religious background of each person with a disability.

Examples of Poor Practice

- When portraying people with disabilities for fund-raising purposes, the agency uses negative stereotypes.
- People with disabilities are only offered centre-based activities.

Everyday Interactions

Each consumer will receive services from support workers who use positive and valuing behaviours in their day-to-day interactions.

Supporting Practices

- Support workers are aware of goals set out in consumers’ individual plans and of their role in providing support to achieve them.
- Support workers understand the impact of their actions in increasing consumers’ independence and choice.
- Support workers have access to training that develops positive attitudes towards, and appropriate interactions with, people with disabilities.
- Support workers regularly monitor and review consumers’ progress towards their individual goals.

Examples of Poor Practice

- Consumers learn very quickly that passivity is rewarded.
- Consumers are not invited to attend meetings of support workers at which their own progress is discussed.
- Everyday tasks are not adapted to maximise opportunities for participation by consumers, and consumers are not supported to participate.
Each person with a disability will have the opportunity to develop and maintain skills and to participate in activities which allow him or her to achieve valued roles in the community. Consumers with challenging behaviour will receive timely, non-aversive* support to develop appropriate alternative behaviours.

Plain English

Each person with a disability is as important as every one else in the community. If a person might hurt themselves or someone else, they are given support so that their behaviour does not stop them from having a good life.

* ‘Non-aversive’ refers to approaches that do not physically hurt, intimidate or restrict an individual’s freedom.

SUPPORTING STANDARDS

3.1 Positive Images

Each consumer will have the opportunity to develop and maintain a positive self image.

Supporting Practices

✓ Consumers are treated in an age-appropriate manner that takes account of individual preferences, life experiences and cultural backgrounds.

✓ Agency promotional material and literature presents consumers positively as contributing and valued members of the community.

✓ Support workers interact with consumers, affirming their self-esteem and sense of worth (see supporting standard 2.3).

Examples of Poor Practice

✗ Support workers and consumers have separate areas and times for meal and tea breaks.
Consumers trail behind support workers on shopping trips, not participating in the activity.

**Participation and Integration**

Each consumer will be offered maximum opportunity for physical and social inclusion in the wider community.

**Supporting Practices**

- The agency provides support and training to assist consumers to use community facilities.
- Consumers are encouraged, where possible and appropriate, to use community facilities as individuals rather than as members of a segregated group.

**Examples of Poor Practice**

- Consumers are taken to community facilities as a ‘treat’.
- No effort is made to encourage improved access arrangements enabling people with disabilities to use community facilities.

The service fails to recognise that community facilities include pubs, cinemas, art galleries and concert venues.

A consumer attending a chosen social club with a paid support worker is seen by the agency as having achieved the end point of community integration.

**Positive Approaches to Challenging Behaviour**

Each consumer with challenging behaviour will be supported through positive non-aversive approaches that develop his or her living skills and strengthen sustainable alternative behaviours.

**Supporting Practices**

- Consumers with challenging behaviour have access to comprehensive behavioural assessment from a practitioner or team with recognised skills in functional behavioural assessment and the use of individualised, non-aversive support strategies.
Informed written # consent is gained from the person with a disability or their legal guardian before any assessment is commenced.

The person with challenging behaviour and members of their support networks are involved in all aspects of assessment and in the ongoing implementation of non-aversive support strategies.

Written # policies and procedures address duty of care and dignity of risk issues (see supporting standard 5.5).

These policies and procedures are regularly reviewed.

The agency has written # incident-reporting procedures (see supporting standard 8.7) and considers incident reports in any review of challenging behaviour policies and procedures.

Examples of Poor Practice

The agency refuses to accept a consumer because of a rumour that he or she is ‘difficult’.

Property damage is the only information recorded following incidents of challenging behaviour, omitting situational factors.

*In this context, ‘challenging behaviour’ means behaviour that, because of its frequency, duration or intensity, restricts a person’s activity choices and lifestyle.

For more information and resources relating to challenging behaviour, refer to the Northern Territory Disability Standards Implementation Guide.
Decision Making and Choice

Each person with a disability is supported to fully participate in decisions about all aspects of his or her life and the services he or she receives.

Plain English

Each person with a disability is listened to and is able to express what they want and do not want in life.

SUPPORTING STANDARDS

4.1 Consumer Empowerment

Each consumer will exercise control over her or his life to the maximum extent possible and will participate in decision-making at all planning levels.

Supporting Practices

☐ The agency has written policies and procedures for supporting consumer involvement in all aspects of agency management (see supporting standard 8.2).

☐ Consumers with limited communication skills have an individualised communication system that is familiar to and understood by their support network.

☐ Consumers’ wishes are considered in the choice of support workers, advocates and/or substitute decision makers (see supporting standard 5.6 and 7.1).

☐ Regular appraisals of support workers include examination of their role and influence in consumer decision-making.

☐ Written consent is obtained from the consumer or legal guardian for all potentially dangerous, risky or intrusive activities including medical procedures, treatments or tests.

☐ Before obtaining any written consent, the agency makes available to the consumer and/or his or her legal guardian a clear explanation of proposed procedures and treatments, including risks and alternative options.
The agency informs the consumer that he or she has the right, at any time, to withdraw consent for a previously agreed action.

The agency has written procedures for occasions when informed consent is not available.

New support workers have access to written information about each consumer’s personal preferences and routines.

**Examples of Poor Practice**

- The agency discourages consumers from making decisions, arguing that they ‘need to be protected from the consequences’.

- Consumers are not encouraged to present their views at management meetings.

- Consumers are discouraged from forming representative committees as a means of presenting their views.

**4.2 Consumer Satisfaction**

Consumers and members of their support networks will be consulted to determine their satisfaction with services. The agency will use this information to improve services.

**Supporting Practices**

- The agency has mechanisms that measure the satisfaction of consumers and members of their support networks, including support workers.

- Such mechanisms operate regularly and independently.

- In respect of such mechanisms, the agency has written policies and procedures that maintain the confidentiality of all respondents and their information (see supporting standard 5.2).

- The agency utilises feedback from such mechanisms to improve service delivery arrangements and to inform respondents of improvements.
Examples of Poor Practice

× Agency management ignores the results of consumer satisfaction surveys or suggestions for improvement.

× Consumer questionnaires are not presented in a format that is meaningful to the consumer.

Examples of Poor Practice

× Judgements are made about aspects of the consumer’s life without reference to possible options or alternatives on the basis that ‘They’re happy here’.

× The agency encourages consumer dependence.

4.3 Diversity of Options

When appropriate, each consumer will receive services and support from more than one agency.

Supporting Practices

✓ The agency has written # policies and procedures that ensure consumer involvement in all aspects of decision-making about the type and variety of services they access.

✓ The agency has written # policies and procedures concerning coordination with and referrals to any services a consumer may choose to access (see supporting standard 1.4).
Each person with a disability will receive services delivered in a manner that respects and protects their rights as outlined in the principles and objectives of the Northern Territory Disability Services Act.

**Plain English**

The law says people with a disability have a right to the same opportunities as other people and a right to be treated fairly without the threat of harm.

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**SUPPORTING STANDARDS**

5.1 **Consumer Safeguards**

Each consumer will be protected from all forms of abuse and exploitation.

**Supporting Practices**

- The agency has written policies and procedures, based on best practice, for investigating and reporting allegations of consumer abuse and exploitation.

- Such policies and procedures provide for the appointment of an independent investigator to report on allegations of consumer abuse and exploitation.

- The policies and procedures are made available to consumers and members of their support networks in an accessible format and can be readily obtained by any member of the public.

- The policies and procedures are reviewed regularly with consumer input as an integral part of the review process.

- The agency ensures that support workers receive adequate training to report incidents of abuse and to provide appropriate support to consumers.

**Examples of Poor Practice**

- Consumer allegations of abuse or maltreatment are dismissed as ‘hysterical’, ‘wishful thinking’ or ‘trouble-making’.

- Threats and/or physical force are used as a regular form of controlling people with disabilities.
A support worker against whom an allegation of abuse has been made continues to work with the consumer while the investigation is conducted.

5.2 Privacy and Confidentiality

Each consumer will have their personal privacy and confidentiality of information recognised and respected.

Supporting Practices

- The agency has written policies and procedures for obtaining consumer and/or guardian consent for the collection and release of information.
- Regular reviews of such policies and procedures are conducted with participation by consumers and members of their support networks.
- The policies and procedures are available to consumers and members of their support networks in formats they can understand.
- The agency only collects consumer information that has direct relevance to effective service delivery.
- The policies and procedures maximise personal safety while minimising intrusion, for example in matters of personal care.
- Consumers have access to their own files on request, supported by a member of their support network if required.

Examples of Poor Practice

- The agency does not give consumers or relevant members of their support networks release of information forms as a means of gaining their permission for collecting and/or sharing information.
- Consumers and members of their support networks are not involved in developing policy and procedures for confidentiality and privacy.
- Consumers and their families are not aware of what personal information the agency holds, why it is held or how it is used.
5.3 **Advocacy**

Each consumer will receive appropriate advocacy services as requested or required.

**Supporting Practices**

- The agency has written policies and procedures that support consumers to advocate on their own behalf when appropriate or to access advocacy services.

- The agency has an open working relationship with local advocacy services.

- Consumers and support workers have access to training concerning the advocacy role and the use of advocacy services.

**Examples of Poor Practice**

- Consumers are not told of services available through local disability advocacy groups.

- Consumers, their families and support workers do not receive any training concerning the purpose of advocacy groups and their availability.

5.4 **Complaints and Disputes**

Each consumer will have access to an easily understood, fair and impartial complaints and disputes process that allows grievances concerning the service to be raised and resolved.

**Supporting Practices**

- The agency has written dispute resolution policies and procedures provided and clearly explained to consumers and members of their support networks.

- Such policies and procedures are regularly reviewed by the agency, consumers and members of their support networks.

- The agency has written policies and procedures that allow an independent person or a member of the person’s support network to assist in resolving a complaint.

- The agency keeps records of disputes and progress towards resolution is reviewed within an agreed timeframe.

- The agency treats disputes positively and uses them as an opportunity to improve service standards.
Examples of Poor Practice

- Verbal or non-verbal communication from agency management and/or support workers suggests to consumers or members of their support networks that the discussion of complaints or disputes is unwelcome and may attract retribution. For example, a family is made to feel that it would be bad for the person with a disability if a complaint or dispute were pursued.

- Policies and procedures concerning complaints and disputes are written by management with no input from consumers or members of their support networks.

- Consumers and members of their support networks are not told about appeal processes available to them.

Supporting Practices

- The agency's employees are aware of the law of negligence and understand their duty of care to consumers.

- The agency has written policies and procedures to ensure that an appropriate level of care is taken to minimise the risk of harm, illness, injury or death, balanced against the rights of people with disabilities to take risks.

- The agency supports consumers, members of their support networks and support workers to attend training concerning duty of care and dignity of risk.

- The agency has written policies and procedures, based on best practice, for supporting people with challenging behaviour (see supporting standard 3.3).

Duty of Care and Dignity of Risk

Each consumer will have the right to make informed choices and to take calculated risks. The agency will define and meet its duty of care to consumers.

Examples of Poor Practice

- Although it is not legally possible for parents to sign away the rights of their children (whether or not they are adults), the agency asks consumers, family members and/or guardians to sign an indemnity form stating that no claim will be made if service users are injured.
When one service user meets with an accident while using a community facility, the agency stops all service user visits to that facility.

5.6 Substitute Decision-Makers

Each consumer who cannot make fully informed decisions will have a substitute decision-maker.

Supporting Practices

✓ The agency has written # policies and procedures concerning the appointment of substitute decision-makers such as consumers’ legal guardians or advocates.

✓ No application for a substitute decision-maker is made on behalf of a consumer without first informing the consumer, the legal guardian or advocate.

✓ When a substitute decision-maker is appointed, support workers are advised of the person’s role, name and contact information and the details of any guardianship order.

Examples of Poor Practice

✗ The agency assumes responsibility for making decisions on behalf of the consumer.

✗ Medication is prescribed and administered without the consent of the substitute decision-maker.

✗ The guardian of a person with a disability is not informed about key events in that person’s life, such as a change of residence.

5.7 Health and Well-being

Each consumer will receive appropriate and timely medical and dental treatment, including relevant nutritional and allied health assessment and intervention.

Supporting Practices

✓ The agency supports consumers to access timely and culturally sensitive health checks by appropriate practitioners such as doctors, dentists, dietitians, audiologists, psychologists, optometrists, podiatrists and other allied health professionals.
Consumers are supported, with their consent, to access appropriate sexuality and human relations education and/or counselling.

The agency maintains written records of any health checks or interventions and consumers and/or their legal guardians have reasonable access to these records.

The agency has written policies and procedures for minimising and managing infectious diseases.

Informed consent to medical or dental treatment is sought from the consumer before any assessment or intervention is carried out.

Consumers and support workers are aware of the agency’s policies and procedures for the safe handling, storage and administration of medication and specialist medical equipment and, as far as possible, are supported to understand the reasons for use of particular medications and possible side-effects.

All policies and procedures for health and well-being are developed and regularly reviewed in consultation with consumers, relevant members of their support networks and appropriate health practitioners.

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Examples of Poor Practice

- The agency refers all consumers to one general practitioner.
- Consumers are not informed of the reasons for health checks and the implications of having, or not having, such checks.
- There are no records of the individual mealtime needs of consumers who require support for eating and drinking.
- A general practitioner refuses to refer a consumer to an appropriate specialist on the basis that ‘The person has a disability so what good would it do?’
Promoting Cultural and Family Relationships

Each person with a disability will receive services that recognise and support their cultural heritage and foster links with their families.

Plain English

Each person with a disability will receive help to stay in touch with family and friends and to know his or her own language/s and stories.

SUPPORTING STANDARDS

6.1 Cultural & Language Background

The agency adopts culturally sensitive practices in all services.

Supporting Practices

✓ The agency ensures that support workers receive appropriate cultural awareness training.

✓ The agency records the number of consumers from Non-English Backgrounds (NESB) who access the service or are on the waiting list and uses this information in planning services.

✓ The agency has written procedures for accessing interpreters and translators.

✓ The agency is familiar with and sensitive to significant cultural practices of its consumers.

✓ The agency has effective working relationships with relevant cultural organisations and interpreter services.

✓ Consumers’ cultural diversity is reflected at all levels of management and decision-making in the agency.
Examples of Poor Practice

× The agency is not aware of the cultural and language backgrounds of its consumers.

× Support workers are not given the opportunity to access appropriate cross-cultural training.

Family Relationships

Consumers will receive services that recognise the importance of preserving family relationships and informal social networks.

Supporting Practices

✓ Consumers are encouraged and supported to invite family members to activities ranging from planning meetings to social events.

✓ Family wishes and needs are considered and when possible accommodated (with consumers’ agreement) in the conduct of events such as meetings and social activities.

✓ Consumers who cannot independently maintain contact with their families are supported to do so.

✓ The agency develops and implements written procedures to ensure that consumers are able to visit their family or place of origin as often as possible.

Examples of Poor Practice

× The agency does not know who consumers’ families are or how to contact them.

× Consumers only have contact with their families when their families visit them.
The agency upholds management practices that value support workers and volunteers, involve them in decision-making and provide them with thorough orientation and training for all aspects of their employment or support roles.

**Plain English**

The agency looks after support workers and volunteers so they can do their job properly.

**SUPPORTING STANDARDS**

**7.1 Selection Procedures**

The agency will develop and use support worker selection procedures in collaboration with consumers, their families and guardians.

**Supporting Practices**

- Consumers are involved in the development of the agency’s selection policies and procedures.
- Interview and selection panels include at least one appropriate person from outside the agency and wherever possible, a consumer or consumer advocate.
- In making appointments, the agency complies with merit, equal employment opportunity and non-discrimination principles.
- The agency has best-practice written # policies and procedures for advertising vacant positions and appointing support workers, including: selection criteria; assessment processes and rating formats; reference checks; police criminal history checks; and selection reports.
- The agency uses consistent best-practice procedures for handling employment inquiries and unsuccessful employment applicants.
Support workers are subject to a period of probation prior to appointment.

**Examples of Poor Practice**

× The agency overrides the selection panel without just reason.

× Vacancies are kept a close secret and only selected people are invited to apply.

**Supporting Practices**

✓ The agency has a staff disciplinary process that meets the requirements of industrial relations legislation.

✓ Breaches of policy and procedures are handled through this disciplinary process and all proceedings are documented.

✓ The agency has written procedures for terminating employees’ contracts and these cover: dismissal with notice following disciplinary action; dismissal without notice in relation to serious misconduct; and redundancy.

✓ The agency adopts peer support strategies to encourage information-sharing and best practice among support workers.

**Examples of Poor Practice**

× The agency has no relief plans if a support person cannot work.

× Support workers are discouraged from joining unions.

√ Support workers receive their conditions of employment in writing.

√ Support workers receive up-to-date duty statements on commencement of employment.

√ Support workers are aware of their entitlements (such as sick leave, recreation leave and compassionate leave) and of related application procedures.
Training and Orientation

The agency will determine the training needs of both paid and unpaid support workers, including orientation to the agency, and will provide, or provide access to, appropriate training.

Supporting Practices

✓ At least annually, the agency evaluates the training needs of paid and unpaid support workers, in consultation with support workers and consumers.

✓ The agency uses this information to develop a comprehensive training program for all support workers.

✓ This training program is regularly evaluated and, where necessary, modified to meet the changing needs of support workers and consumers.

✓ Before commencing work and at regular intervals subsequently, paid and unpaid support workers are briefed on their specific duties and responsibilities, including the duty of care owed to consumers.

✓ The agency has a comprehensive orientation program for support workers (see supporting standard 1.2).

✓ All support workers complete the orientation program before commencing work.

Examples of Poor Practice

✗ The agency has no relief arrangements to allow support workers to attend courses.

✗ Support workers are expected to attend training in their own time.

✗ Training and orientation needs of volunteer workers are ignored.

Support Worker Ratios

Agency support for support workers and consumer/support worker ratios will provide maximum quality of life and safety for consumers.

Supporting Practices

✓ The agency initiates independent surveys of consumer, family and support worker satisfaction, including satisfaction with rosters and the adequacy of support worker levels (see supporting standard 4.2).
Information from independent surveys is used to ensure that consumer needs are met through appropriate changes to rosters and ratios.

Rosters are designed to meet consumer needs and to minimise disruptions caused by changes in support worker arrangements.

The agency maintains an adequate and stable pool of trained relief support workers.

The agency collects information on the reasons for support worker resignations, turnover and absenteeism, and uses this information to improve operations.

Examples of Poor Practice

No changes are made to support worker ratios and rosters that fail to meet the needs of consumers.

Consumers have no choice in the allocation of support workers and are not informed of which support workers are rostered for particular shifts.

7.5 Volunteers/Natural Supports in the Community

The agency will value the role and contribution of volunteer workers and people who provide natural support that assists people with disabilities to enjoy fulfilling lives.

Supporting Practices

The agency has selection guidelines for the acceptance of volunteer workers.

These include:

• referee reports;

• police criminal history checks.

Volunteers are made aware that they have clearly defined responsibilities and boundaries.

Relative to their level of responsibility, volunteers receive the same quality of training as paid support workers.

Volunteers are provided with service orientation that includes an understanding that they can be asked to leave.
Volunteers are subject to the same disciplinary and dismissal processes as paid staff (see supporting standard 7.2).

Volunteers are made aware of the duty of care owed to people with disabilities.

Where possible and appropriate, the agency seeks to acknowledge and support people in the community who provide natural support to people with disabilities.

**Examples of Poor Practice**

× Volunteers are used to cover paid positions.

× Volunteers do not receive orientation to the service or training to support consumers.

**7.6 Communication and Disputes**

The agency will develop and maintain clear communication channels with all support workers. These will include processes for regular performance feedback and for resolution of complaints and disputes.

**Supporting Practices**

✓ Regular, minuted meetings take place between management and support workers.

✓ The agency has clearly documented lines of management responsibility and all support workers are made aware of them.

✓ Scheduled performance appraisals occur between supervisors and support workers.

✓ Formal complaints procedures exist for both paid and volunteer support workers.

**Examples of Poor Practice**

× Support workers do not receive timely or adequate management responses to complaints or suggestions.

× Support workers are not praised for work well done.
Agencies implement sound management practices that maximise consumers’ quality of life.

**Plain English**

Any service for people with disabilities has to be able to show how much money it gets, where the money is spent and how the money is put to work for the benefit of the people the service supports. All the houses, cars and equipment supplied by the service to people with disabilities must be safe and easy to access. Care must be taken to prevent accidents.

### SUPPORTING STANDARDS

**8.1 Consumer-Focused Policies and Procedures**

The agency will implement policies and procedures that support optimum outcomes for consumers.

**Supporting Practices**

- The agency’s policies and procedures are available in a variety of formats that make them easily accessible to all consumers.
- All policies and procedures have a review date that is adhered to.
- When consumers enter a service, the agency’s written procedures are provided and clearly explained to consumers and members of their support networks.
Examples of Poor Practice

✗ The agency adopts the policies and procedures manual of another agency without acknowledgment and with only a change of title.

✗ The agency's policies and procedures manual is kept locked in the central office.

✗ New policies are written by a subcommittee without consulting consumers.

✓ The governing body has effective consumer and support worker participation.

✓ The governing body provides new members with appropriate orientation. The governing body operates within and complies with the agency's constitution including stated objectives and written policies and procedures.

✓ The agency has clearly defined written descriptions of the roles and responsibilities of the governing body and of service management, and of the lines of communication between them.

✓ Any subcommittees have clearly identified and documented purposes and outcomes.

✓ Organisational changes are registered with funding bodies, community directories and, where necessary, are recorded in promotional material.

✓ Government services have an advisory committee whose membership includes consumers and members of their support networks.

8.2 Structure and Function of the Agency

The agency will implement procedures to maintain the accountability and credibility of its governing body and/or bodies including, for example, its board of management, committee of management and any advisory committees.

Supporting Practices

✓ The membership of the governing body has a balanced range of skills and experience.
Examples of Poor Practice

✗ The governing body meets infrequently and irregularly.

✗ A person with a disability is present at the committee meetings but does not receive appropriate support to contribute effectively.

All consumers, members of their support networks and members of governing bodies have access to funding and service agreements between the agency and its funding bodies.

Appropriate training in financial management is made available as required for members of governing bodies, agency management and consumers.

8.3 Finances

The agency will maintain financial management practices based on sound accounting principles and will ensure that funds are used for the purpose for which they are allocated.

Examples of Poor Practice

✗ To buy a carton of milk, a support worker needs an order form signed by the treasurer of the agency.

8.4 Insurance and Asset Management

The agency will have adequate levels of insurance cover and asset management practices to ensure maximum benefits for consumers.

Supporting Practices

✓ The agency develops and implements financial management practices that are based on best practice accounting principles and that focus on achieving optimum outcomes for all consumers.

✓ Agency finances are subject to an annual audit by an independent qualified accountant.

✓ The agency has appropriate and comprehensive insurance cover including public liability and professional indemnity.
The agency's written procedures for asset purchase, recording and maintenance ensure that consumers' needs and preferences are paramount.

The agency conducts annual asset stocktakes.

**Examples of Poor Practice**

- The insurance policy does not cover all eventualities.
- People who suffer a loss are discouraged from claiming for recompense.
- The agency is not aware of the impact of negligent behaviour on insurance cover.

**Access policies and procedures** are developed in collaboration with consumers, relevant members of their support networks and appropriate allied health, design and building professionals.

Policies and procedures are reviewed at least annually.

**Examples of Poor Practice**

- Ramps and doorways do not meet regulation standards for wheelchair accessibility.
- Maintenance works depend on the goodwill and availability of volunteers.
- Alternative venues are not inspected prior to their use for an activity.

**Accessibility**

The agency will follow best practice procedures concerning the accessibility of all buildings, vehicles and equipment.

**Supporting Practices**

The agency develops and implements written policies and procedures to ensure that all buildings, vehicles and equipment meet accessibility guidelines outlined in relevant building codes and the principal of Universal Design.
8.6 Safe Practices and Prevention

The agency will establish best practice policies and procedures for occupational health and safety.

Supporting Practices

- The agency has comprehensive best practice written # policies and procedures for occupational health and safety.
- The agency’s policies and procedures for occupational health and safety are developed in collaboration with consumers, relevant members of their support networks and appropriate allied health professionals.
- Policies and procedures for the prevention and control of infection are available to consumers and support workers and cover communicable diseases such as staph infections, hepatitis, rubella, tuberculosis and HIV (see supporting standard 5.7).
- Policies and procedures include regular site inspections for access and occupational health and safety compliance.
- Appropriate occupational health and safety orientation and training is provided to consumers and support workers.

Examples of Poor Practice

- Fire and other emergency services are not consulted for advice or recommendations.
- Unsafe equipment is used.

8.7 Incident Reporting

The agency will implement reporting and investigation procedures for all incidents regardless of whether such incidents result in injuries requiring medical treatment.

Supporting Practices

- The agency has written # policies and procedures for reporting and recording incidents.
- Policies and procedures are developed in collaboration with consumers, members of their support networks and support workers.
Policies and procedures include mechanisms for analysing incidents to help prevent them happening again.

**Examples of Poor Practice**

- Incidents are not analysed for learning opportunities and for modification of practices to prevent recurrence.
- Consumers and support workers do not have access to grief counselling after traumatic incidents.

**Emergencies**

The agency will establish emergency procedures for all reasonably foreseeable risks.

**Supporting Practices**

- The agency has written policies and procedures for emergencies, developed in collaboration with consumers, support workers and emergency service practitioners.
- Emergency policies and procedures are made available to all consumers and support workers.

Emergency procedures, such as three-monthly cyclone and fire evacuation drills, are regularly rehearsed in safety drills.

Emergency procedures are modified in light of any problems that occur during safety drills.

**Examples of Poor Practice**

- Fire drills are the only emergency procedure rehearsed.
- Support workers are not supported to gain first aid qualifications.
- Fire exits and evacuation routes are not assessed to determine accessibility for all consumers. For example, fire exits are too narrow for wheelchairs.
Access

Individuality

Valued Status

Decision Making

Respect for Rights

Family and Culture

Support and Training

Consumer Focus