

North West Residential Support Services Inc.
CLIENT/FAMILY INFORMATION PACK



Supported by the Crown through the Department of Health and Human Services

Direct contact can be made in the following ways:

ADDRESS: North West Residential
Support Services Inc.
PO Box 254, Wynyard, TAS, 7325.

PHONE: 0418 140 000

FAX: [03] 64422920

PHONE/TEXT/EMAIL: Neal Rodwell -- 0418 140 000
General Manager – nrodwell@nwrss.org.au

Lee-Anne Aulich – 0437 971 729
Direct Service Manager – laulich@nwrss.org.au

Alarna Moles – 0429 414 160
Direct Service Coordinator - amoles@nwrss.org.au

Teresa Inkson – 0428 351 967
Operations Manager – tinkson@nwrss.org.au

Roster Coordination – 0437 836 677

If you reach voicemail please leave a message and your call will be returned.

Please let us know what your preferred method of communication is when we are finalizing your Service Provision Agreement.

www.nwrss.org.au

CONTENTS

Page

- 3 Service Profile**
Who we are and what we do
- 4 Employee Confidentiality Declaration**
All staff must sign and work to these conditions
- 5 Travel Cost Table**
The travel rates we have to pay staff and subsequently charge clients
- 6-7 Orientation-Induction-Performance Checklist**
All staff are inducted through this checklist and have their performance periodically checked against it
- 8 Incident/Accident/Near Miss Report Form**
Used to alert the service to problems and improvements
- 9-10 Compliments & Complaints**
Used to alert the service to problems and improvements
- 11 Important Policies:**
- Consumer Records -- Confidentiality and Access
 - Managing a Client's Finances
 - Advocacy
- 12 National Disability Insurance Scheme Log**
Log sheet used by NDIS clients/families to confirm the provision of service

SERVICE PROFILE

NWRSS is a not-for-profit organization that provides disability support in the North West Region of Tasmania.

We take up contracts from government agencies such as Disability Services, Child Protection Services, Motor Accident Insurance Board and the Public Trustee. Private citizens can also purchase support services from us.

The range of support that we cover includes:

- Shared homes for people with high support needs
- Visiting support for people living in their own homes
- Support to help people pursue daily activities in their communities
- Complex and intensive support for changing and managing behaviour
- In-hospital support
- Transport including wheelchair accessible vehicles
- Respite
- Holiday support
- A summer camping program

NWRSS is registered to provide the following NDIS services:

- Assist Access/Maintain Employment
- Personal Activities High
- Assist-Life Stage, Transition
- Assist Personal Activities
- Assist-Travel/Transport
- Daily Tasks/Shared Living
- Development-Life Skills
- Participate Community
- Group/Centre Activities

NWRSS is happy to negotiate on all aspects of support, particularly the client/support worker match.

EMPLOYEE CONFIDENTIALITY DECLARATION

All staff sign the following declaration as a condition for working with NWRSS

NWRSS respects the need to keep information related to clients and families in the utmost confidence.

All employees are expected to respect all boundaries of confidentiality as a condition of continuing employment with NWRSS. Whilst employees have access to client information, it is given in trust, and client confidentiality is never to be breached.

Employees must not:

- Discuss client information in a trivial manner
- Discuss information about clients with their own circle of friends, families or other people not professionally associated with NWRSS
- Pass on information or discuss information with another affiliated service provider that is not factual or relevant
- Divulge information over the telephone, or to visitors, about a client or their family's whereabouts
- Discuss behavioural information about a client with family members of another client
- Give out telephone numbers or addresses of client's homes to members of the public
- Leave any client information in unsecured public places
- Breach their obligation of confidentiality towards the client group and their families. This does not cease at the end of employment

Proven breach of confidentiality will result in disciplinary procedures being enacted and can result in termination of employment.

Due to the nature of your work in the community while supporting a participant, NWRSS requires you to access confidential information relating to the participant you support. The information supplied to you needs to be kept in a safe secure place.

By signing this declaration you acknowledge your responsibility in keeping all information provided to you confidential.

TRAVEL COST TABLE

The Social and Community Services Award that covers NWRSS employees dictates the payment rate for kilometres. If this rate is changed at any time NWRSS will inform clients.

This table makes clear the cost that will be incurred if travelling in a NWRSS employee's vehicle.

Number of kilometres travelled	Cost to the Client
1 km	.78c
2 km	\$1.56
3 km	\$2.34
4 km	\$3.12
5 km	\$3.90
10 km	\$7.80
20 km	\$15.60
30 km	\$23.40
40 km	\$31.20
50 km	\$39.00

Example:

If a client is supported for 5 days per week and is transported from Ulverstone to Devonport each day, the total cost of the travel will be approximately \$156.00.

To keep these costs down consideration should be given to:

- Sharing travel
- Using a private vehicle
- Community transport services
- Drop off and pick up by family
- Taxi with taxi vouchers
- Public transport

ORIENTATION – INDUCTION – PERFORMANCE CHECKLIST

This checklist is used to induct new employees and regularly assess their performance

Support Workers Name:		Orientation Date:/...../.....
Shared Home/Individual Contract:		
Protocols:		
<ul style="list-style-type: none"> • All items must be explained in detail by the person doing the orientation • New support workers must be supervised throughout the orientation process • The person being orientated will be coupled with an experienced support worker • The orientation process will take place over a period of • A Direct Service Coordinator or Manager is available by phone or in person to answer questions • Once the orientation process is completed the support worker will be expected to work unsupervised within the parameters of the job description they have been provided with • If at any time the new support worker does not feel confident to take on full responsibilities they are to contact the Direct Service Coordinator immediately for directions • Signing off on this orientation process means that the support worker has completed and understands all aspects of the orientation 		
Orientation	✓	Comment/Action
Policies & Procedures on the website read and understood		
Operational Handbook has been read and understood		
Website browsed and content acknowledged		
Introduced to clients		
Introduced to support team members		
Given a tour of the home or introduced to the contract location		
Vehicle: <ul style="list-style-type: none"> • Passenger Behaviour Management Plan (.....) • Emergency Management Procedure (.....) • Vehicle Log Sheet (.....) • Keys/Spare key (.....) • Fuel (.....) • Roadside Assistance (.....) • The use of personal vehicles explained (.....) • Proof of private vehicle registration – Website check (.....) • Private vehicle travel claim process explained (.....) 		
Work Place: <ul style="list-style-type: none"> • Operational Handbook read and understood (.....) • Folders and manuals read and understood (.....) • Incident/Accident/Near Miss Report Form explained (.....) • Body Map explained (.....) • Compliment/Complaint/Risk Observation Form explained (.....) • Fire Safety – Emergency Evacuation Plan sighted and explained including Warden’s responsibilities (.....) • Manual Handling DVD has been viewed (.....) • Specific manual handling protocols have been explained (.....) 		
Time Sheets: <ul style="list-style-type: none"> • Shared Home/Waking Hours/NDIS/ISP/Lifestyle Support (.....) • Receipts Explanation Sheet (.....) • Filling and filing explanation (.....) 		
Individual Life Enrichment Journals and Individual Plans read and understood		
Personal care routines and assistance strategies observed for all residents		

Personal care delivery observed for all residents		
Procedures for the Administration of Medication in Shared Homes read and understood including all recording sheets		
Medication administration observed		
Administration of medication carried out under the observation of an experienced support worker		
Personal Health Diaries explained		
Household routines explained: <ul style="list-style-type: none"> • Cleaning routine (.....) • Shopping routine (.....) • Banking routine (.....) • House finance management routine (.....) 		
Residents personal finances explained: <ul style="list-style-type: none"> • As per the policy document – Managing a Client’s Finances 		
House Diary explained		
Shift Check List explained		
Location and use of: <ul style="list-style-type: none"> • Personal Diaries (.....) • Daily Journals (.....) • Photo Albums (.....) • Treasured Items Boxes (.....) • Travel Diaries (.....) • Lifestyle Calendars (.....) • Communication Boards (.....) • Support Plan (.....) • Progress Report (.....) • Support Log (.....) 		
Doctor’s appointment process and documents explained		
<p>Date Orientation Satisfactorily Completed:/...../.....</p> <p>Person Responsible For Orientation:</p> <p>Position Held:</p> <p>Signature:</p> <p>Support Worker’s Signature:</p>		

QUESTIONS FOR PERFORMANCE APPRAISAL

1. When did you last read and update yourself on the Policies & Procedures?
2. Do you access NWRSS’ website for information?
3. What is a restrictive practice?
4. If you see something happening and you think it is restrictive what should you do?
5. If you find someone you support unconscious, what should you do?
6. What type of incidents should you report and to whom?
7. Do you attend team meetings regularly? If so, are they relevant? If not, why? Please comment
8. Would you like to meet with the Direct Service Manager, Lee-Anne Aulich or General Manager, Neal Rodwell to discuss any aspects of your role as a support worker?
9. What do you feel NWRSS could do to improve your role as a support worker?
10. What suggestions do you have which may improve the lives of the people you support?

INCIDENT/ACCIDENT/NEAR MISS REPORT FORM

Name of person completing this report: _____

Incident date: _____ Time: _____ Location: _____

Did the reporter witness this incident: yes no (please circle)

Was anyone injured: yes no (please circle)

Was an ambulance required: yes no (please circle)

List the names of people involved and any witnesses of the incident:

Was the Coordinator, Direct Service Manager or General Manager notified:

yes no (please circle)

What was happening before the incident. (Consider people & environment):

What happened during the incident:

What action was taken after the incident:

Name: _____

Position: _____

Signature: _____ Date: _____

COMPLIMENTS & COMPLAINTS

This policy covers the people supported by the organization, their families and advocates, staff and the general public.

If you wish, you may use the form in this document.

Please lodge compliments or complaints with:

- The Direct Service Coordinator
- The Direct Service Manager
- The General Manager
- The President of the Board of Management or a Board member of your choice.

The organization's postal address, PO Box 254, Wynyard TAS 7325 can be used. Address it to the person of your choice.

All compliments and complaints are registered with the full Board of Management including all reports and documents that are generated by an investigation into a complaint.

All complaints will be thoroughly investigated by the General Manager unless the person making the complaint requests otherwise or the Board deems that someone else should conduct the investigation. The investigation process will give full consideration to privacy, confidentiality and natural justice. Natural justice includes a free exchange of all information between all parties formally involved in the complaint. The person making the complaint will receive a written response outlining the investigation process within two full weeks.

In the case of abuse the process will follow the steps outlined in Disability Services – Preventing and Responding to Abuse in Services Procedures

If the person making the complaint is not happy to lodge it with the organization or not happy with the response or outcome the General Manager will, without question, supply contact details for:

- Disability Services
- A list of advocacy services
- The Ombudsman
- The Police

When making a complaint please ensure that you cover the following:

- Outline clearly and precisely what the complaint is
- Are there any witnesses or other people that should be consulted in the process of investigating this complaint?
- Is there a person you would like to be present during any discussions with you in the investigation process?
- What resolution are you hoping for if the complaint is substantiated?

For people being supported by the organisation, who may not be able to verbalise a complaint or understand the lodgment procedure, alerts are included under Health in Building Better Lives, and in Lifestyle Support Team and Management Team meeting agendas. These alerts ask support staff to be vigilant at all times for signs of complaint from the people being supported. Such signs include: health fluctuations and depression. Complaints from this source are investigated firstly by the Direct Service Coordinator and referred to the Direct Support Manager if they are not resolved and symptoms persist.

CONSUMER RECORDS – CONFIDENTIALITY AND ACCESS

The policy, is located under Policies & Procedures on our website

If you wish to discuss this policy contact the Direct Service Coordinator.

MANAGING A CLIENT’S FINANCES

In accordance with Management of Clients Funds – DHHS Policy Number:
P2010/1092-001

The policy is located under Policies & Procedures on our website

If you wish to participate in the management of and/or discuss your finances please contact the Direct Service Coordinator.

People representing clients will need to have been given a legitimate advocacy role by the client or according to Guardianship & Administration Board guidelines

ADVOCACY

If you feel you need an independent advocate to advise you or assist you in any way you can contact one of the following:

Advocacy Tasmania Inc.

77 Best Street

Devonport Tas 7310

Phone: 64410201 Ext 220

Mobile: 0409 704 451

Speak Out Association of Tasmania

2 Spring Street

Burnie Tas 7320

Phone: (03) 64 319333

Fax: (03) 64 318333

Mob: 0409 319 337

NDIS SUPPORT LOG

Participant Name: _____

Participant Reference: _____

Period Start Date: _____

Period End Date: _____

Start Date	Start Time	End Date	End Time	Total Hours	Support Type	Participant/Nominee Signature

Staff Printed Name: _____

Staff Signature: _____

INVITATION

Please contact the manager of the service directly with ideas for how we can improve this package for clients and their families.

0418 140 000