

# CS3.1 Participant Care

## Purpose

1. To outline the roles and responsibilities of the SAVVY team through the lifecycle of a participant's care at SAVVY This encompasses the referral, intake, assessment, care planning, service agreement and exit from SAVVY Services. Holistically, the policy also provides structure for how a participant's care is managed, recorded and planned for to ensure continuity of care. Finally, the policy outlines Buniji's expectations in terms of communication with carers, other service providers and relevant government agencies.

## Alignment with Practice Standards

1. Module 1: Rights and Responsibilities
2. Module 2: Provider Governance and Operational Management
3. Module 3: Provision of Support

## Legislative Alignment

1. Disability Discrimination Act 1992 (Cth)
2. Privacy Act 1988 (Cth)
3. Privacy Amendment (Enhancing Privacy Protection) Act 2012

## Key Responsible Executive

Chief Executive Officer

## For More Support

Your People Manager

## Policy Statement

1. SAVVY is committed to strengths based, person centred assessment that respects participants rights to privacy, dignity, independence, choice and fulfilment. The organisation recognises that the service users' situations and needs change over time and as such is committed to regular review of the service users plan.
2. SAVVY will maintain an efficient, person centred participant onboarding process that puts the participants needs and safety first. Onboarding will encompass referrals, direct requests for support, initial assessment, individual plan and service agreement.

3. SAVVY is committed to delivering a consistent, high quality service throughout the participants tenure with SAVVY This requires SAVVY to apply effective Case Management procedures to ensure ongoing participant engagement, continuity of care and appropriate and timely reviews of participant's goals, needs, supports and risks.
4. SAVVY intends to plan for collaborative, fair and person centred transitions between service providers and is committed to working with other service providers in order to achieve this for the participant. Whether the participant is transferring into or out of SAVVY's care, SAVVY will prioritise participant safety, goals and needs.

## Definitions

1. Assessment - the process of gathering information from and about the participant in order to develop an understanding of their needs and to determine suitable options and support planning.
2. Care Plan - a document which provides a shared understanding for the participant, their carers and service providers of the participants;
  - a. Goals and needs
  - b. Strategies to achieve the participants goals and needs, including any positive behaviour support strategies
  - c. Specific requirements to meet the participants needs such as high intensity daily support processes
  - d. Individual preferences, such as communication preferences, persona preferences, likes and dislikes that can inform how a service is delivered
  - e. A risk assessment of the participants needs, the delivery environment and support provision
3. Intake - the systematic process of gathering information about a participant's current situation in order to facilitate their access to SAVVY services and to assist them to make informed decisions about the services needed.
4. Person centred planning – a process of continually listening and learning, focused on what is important to someone now and for the future, and acting on this in alliance with their family, carers, friends and substitute decision makers.
5. Record – information of any kind and in any form that was created, received and maintained as evidence of business or service delivery activities and transactions performed by the organisation.
6. Referral - a request for a specialist consultation or service that occurs when an organisation is not able to meet the participant's needs, believes another organisation will provide the best options for a participant's particular need(s) or has insufficient resources to manage the participant's situation.
7. Secure – refers to reasonable physical, technical and administrative mechanisms in place to prevent privacy and confidentiality breaches.
8. Transfer - The transfer of services refers to when a participant's existing service provision is transferred from one service provider to another. This could be a transfer of services into or out of SAVVY care.

## Delegations

Roles	Responsibilities
Board of Directors	<ul style="list-style-type: none"> <li>● Endorse and ensure compliance with the participant Care Policy and Procedure</li> <li>● Be familiar with legislative requirements of this policy</li> </ul>
CEO	<ul style="list-style-type: none"> <li>● Manage and monitor compliance with this policy</li> <li>● Support employees competence and compliance with this policy and procedure and ensures employees receive appropriate training, supervision and debriefing to comply with this policy</li> <li>● Collate report information on adverse participant events as required</li> <li>● Operational decision making is informed by this policy</li> <li>● Support the review of clinical processes</li> </ul>
Management	<ul style="list-style-type: none"> <li>● Support employees competence and compliance with this policy and procedure and ensures employees receive appropriate training, supervision and debriefing to comply with this policy</li> <li>● Collate report information on adverse service user events as required</li> <li>● Operational decision making is informed by this policy</li> <li>● Support the review of clinical processes</li> </ul>
Staff, volunteers, contractors and students	<ul style="list-style-type: none"> <li>● Comply with the participant Care Policy</li> <li>● Maintain knowledge of the current evidence-based interventions available to participants</li> <li>● Participate in regular practice supervision</li> <li>● Where appropriate maintain registration with relevant associations and/or peak bodies in order to carry out duties</li> </ul>

## Procedures

### 1. Intake

- a. SAVVY's intake procedures are outlined in full in the Access and Intake Policy.
- b. During the intake process, SAVVY's focus is on both
  - i. gathering the required information to begin the assessment process and
  - ii. educating the participant on how SAVVY works, their rights and responsibilities and what the assessment and care planning process will involve.

### 2. Assessment

- a. SAVVY's assessment process is outlined in the Assessment and Care Planning Policy
- b. The assessment for each participant will depend on the services requested and needs of the participant. Each assessment shall at a minimum include;
  - i. Understanding a participants goals and needs

- ii. Risk assessing the physical environment for meeting a participants needs and risks associated with the participants needs and goals, such as medication risks, behaviours of concern, high intensity daily support needs
- iii. Getting to know the participant as an individual, with their own culture, beliefs and experiences in order to effectively design services around the participant.

### 3. Service Agreements and Contracts

- a. Services agreed to during the care planning process will be formalised in a service agreement.
- b. While SAVVY uses standardised Service Agreements, care is taken to explain these to participants and their carers in language they are most likely to understand. Including, where necessary the use of an interpreter to explain the service contract to the participant.
- c. Service agreements will differ for those services which require a quote and those which do not require a quote under the NDIS price guide
- d. If it is agreed that SAVVY will provide services to the participant that do not require a quote, a standing service agreement will be provided to the participant, outlining the potential services to be provided and terms and conditions of providing these services. Terms and conditions will include;
  - i. Requesting services
  - ii. Consent to provide services
  - iii. Cancellation of services once requested
  - iv. Payment of services
- e. For services which require a quote, SAVVY will provide an Agreement which includes the specified services and respective terms and conditions. Services will be outlined in a separate schedule. The Terms and Conditions will include information on:
  - i. Amendments and reviews to the service agreement
  - ii. Cancellation of services
  - iii. Payment for services
- f. Quoted services may include one-off services such as Short Term Accommodation or ongoing services such as daily support. Each new service agreed will be quoted using a service schedule requiring participant or representative signature to accept and appended to the Service Agreement.
- g. There will be two copies of each Service Agreement, once in the participants file and one provided to the participant. A copy may also be provided to a plan manager or participant carer with the participants consent.
- h. Agreement and acceptance of quotes which form the schedules of the Service Agreement should be in writing either by signing the schedule, written confirmation (mail or email) or verbal consent. Verbal consent must be noted on the quote and in the participant's file.
- i. Service Agreements will remain in place whilst the participant receives services from SAVVY. The standard service agreement may be updated from time to time. A copy of the current Service Agreement will remain on SAVVY's website, with any material changes notified in writing to the participant.

### 4. Record Management

- a. SAVVY has an extensive Record management Policy and this is outlined in the participant Record Policy

### 5. Exit

- a. It is SAVVY's intention that participants are able to exit from services in a planned, collaborative manner that is fair and upholds the rights and safety of the participant.

- b. Information about access to and exit from services will be provided in different formats to suit individual requirements and preferences, as requested.
  - c. Where a participant is transferring their services to another service provider, SAVVY will follow its participant transfer procedure;
    - i. The SAVVY employee coordinating the participants care will complete the internal transfer form
    - ii. The transfer form will capture information relevant to the participants existing care plans, risks, NDIS Plan and relevant stakeholders.
    - iii. The form is captured in SAVVY's transfer register, reviewed by a manager and assessed for risks and participant needs before being approved.
    - iv. With the participants consent, the information collected in the form will then be shared with the participant and new service provider.
    - v. With sufficient notice, SAVVY seeks to complete the transfer form prior to the participant commencing services with the new provider in order to ensure the participants care is effectively and safely transitioned
6. Managing changes or unavoidable interruptions
- a. Where there is a change to a participant's planned service which may include worker, timing of service, activity or unavailability, this is to be communicated to the participant in a timely and appropriate manner.
  - b. The participant is to be notified by phone call, sms, email or other preferred communication channel of the change or interruption. The update should also include any action required by the participant to agree, acknowledge or select an alternative.
  - c. Where multiple key workers have been established for the participant, a switch in key workers does not need to be pre-notified (for example of a worker calls in sick, the secondary key worker can cover the shift without prior communication). If an established key worker is not available, the participant should be notified first and an appropriate worker assigned, following the continuity of care procedures.
  - d. Where a change in activity occurs due to issues with the supplier, location or weather, the participant is given the opportunity to opt into an alternative option if available.
  - e. Where a service type is interrupted, a participant should be provided alternative options to meet their objectives. This may alter their schedule of services and therefore it will be up to the participant to accept, decline or work with SAVVY to identify another suitable alternative service.
7. Continuity of Care
- a. SAVVY outlines its policies and procedures in relation to providing continuity of care in the Continuity of Care Policy.
  - b. SAVVY's strategies to provide continuity of care are reviewed as part of the Quality Improvement and Clinical Governance Committees.
  - c. Strategies include;
    - i. Collaborative planning of care and shared decision making
    - ii. Case management for participants with complex needs
    - iii. Service transfer processes
    - iv. Technology to support continuity of care and care coordination
    - v. Building workforce capability and capacity

8. Participant Support Network
  - a. SAVVY recognises and values the collaboration with a participants support network, including, but not limited to, parents, guardians, carers, plan managers, advocates, other service organisers, health and allied health providers, mainstream service providers and the broader community.
  - b. SAVVY have set out specific guidelines for engaging these different stakeholders in the participant Support Network Policy.
  
9. Financial advice
  - a. participants should not be given financial advice at any point, apart from that which would reasonably be required under the participants NDIS plan.
  - b. When supporting a participant to exercise the choice and decision making to make a purchase, a support worker can help the participant to understand the cost, payment method and implications or considerations of making the purchase, however they can not tell the participant which choice to make.
  - c. Depending on the participant's decision making capability, some decisions may be deferred to the parent, guardian or plan nominee for a financial decision to be made.

#### References to other SAVVY policies and external sources

1. CS2.1 Person Centred Practices
2. CS3.2 Access and Intake
3. CS3.3 Participant Assessment and Support Planning
4. CS3.4 Continuity of Care
5. CS3.5 Participant Record Management
6. CS3.6 Participant Support Network

#### Summary of attachments

1. Nil

#### Version Control

1. 1 April 2023 - New Policy Creation