PRACTICE EXCELLENCE POLICY
GOVERNANCE AND OPERATIONAL MANAGEMENT

1. POLICY PURPOSE:

This policy sets out our governance and operational management responsibilities. This policy supports us to apply the NDIS Practice Standards, in particular Core Module 2: *Provider Governance and Operational Management.*

2. POLICY SCOPE:

This policy applies to all paid staff, contract workers, temporary agency workers, students on placement and volunteers. Staff are expected to be familiar with and apply this policy in all their actions. This policy is owned by the Chief Executive Officer.

3. POLICY CONTEXT AND STATEMENT:

We recognise all people with disability have human and legal rights which should be respected at all times. We promote and protect those rights as an integral component of each and all our services. Our clients are at the centre of our thoughts, our actions, our service intent, expectations, and experiences.

This policy supports us to achieve our governance and operational management responsibilities by ensuring:

- each client's support is overseen by robust governance and operational management systems relevant (proportionate) to our size and scale and the scope and complexity of supports delivered;
- risks to our clients, our workers and our organisation are identified and managed;
- each client benefits from a quality management system relevant and proportionate to our size and scale, which promotes continuous improvement of support delivery;
- management of each client's information ensures that it is identifiable, accurately recorded, current and confidential. Each client's information is easily accessible to the client and appropriately utilised by relevant workers;
- each client has knowledge of and access to our complaints management and resolution system. Complaints and other feedback made by all parties are welcomed, acknowledged, respected and well-managed;
- each client is safeguarded by our incident management system, ensuring that incidents are acknowledged, responded to, well-managed and learned from;
- each client's support needs are met by workers who are competent in relation to their role, hold relevant qualifications, and who have relevant expertise and experience to provide person-centred support; and
- each client has access to timely and appropriate support without interruption.
- Risks to the health, safety, and wellbeing of clients that may arise in an emergency or disaster are considered and mitigated, and continuity of supports critical to the health, safety, and wellbeing of clients in an emergency or disaster is ensured.

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PRACTICE EXCELLENCE POLICY
GOVERNANCE AND OPERATIONAL MANAGEMENT

4. ROLES AND RESPONSIBILITIES:

4.1 Minda Board

- Ensures there is an organisation-wide approach to effective governance and operational management.
- Ensures there are effective organisation-wide systems in place for managing and governing all aspects of governance and operational management.

4.2 Chief Executive Officer and Executive Team:

- Promote a culture of shared responsibility for effective governance and operational management.
- Regularly evaluate and review risks and other relevant information in relation to effective governance and operational management.
- Delegate the day-to-day responsibility for ensuring the activities related to this policy are implemented and monitored by the relevant senior managers.
- Ensure there are appropriate escalation processes in place for governance and operational management that could result in substantial liability and/or have the potential to come to the attention of the Chief Executive Officer.

4.3 Senior Managers and Managers:

- Have responsibility for ensuring the activities related to this policy are implemented and monitored.

4.4 Employees, Contractors, Volunteers, and Students will:

- Adhere to the principles and aims of this policy and its related procedures and guidelines.

5. LEGISLATIVE REQUIREMENTS:

Commonwealth Legislation

- United Nations Convention on the Rights of Persons with Disability 2006
- Australian Human Rights and Equal Opportunities Act 1986
- Privacy Act 1988
- Disability Discrimination Act 1992
- National Disability Insurance Scheme Act 2013
- National Disability Insurance Scheme (Code of Conduct) Rules 2018
- National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018
- National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018
- National Disability Insurance Scheme (Restrictive Practices and Behavioural Support) Rules 2018

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PRACTICE EXCELLENCE POLICY
GOVERNANCE AND OPERATIONAL MANAGEMENT

- National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018

South Australian Legislation

- Disability Inclusion Act 2018 (SA)
- Disability Services (Community Visitor Scheme) Regulations 2013 (SA)
- Disability Services (Assessment of Relevant History) Regulations 2014 (SA)
- Disability Inclusion (NDIS Worker Check) Regulations 2020 (SA)
- Equal Opportunity Act 1984 (SA)
- Associations Incorporation Act 1985 (SA)

6. Supporting Documents and Additional Information:

Internal Resources:

All Governance and Operational Management documents are available via Practice Excellence Framework and Minda internal SharePoint site.

7. Key Performance Indicators (KPI), Records, Audit:

7.1 Demonstration of compliance with this policy will include:

7.1.1 Governance and Operational Management

- Opportunities are provided by the Board and Executive for people with disability to contribute to the governance of the organisation and have input into the development of organisational policy and processes relevant to the provision of supports and the protection of client rights.
- A defined structure is implemented by the Board and Executive to meet our financial, legislative, regulatory and contractual responsibilities, and to monitor and respond to quality and safeguarding matters associated with delivering supports to clients.
- The skills and knowledge required for the Board and Executive to govern effectively are identified, and relevant training is undertaken by members of the Board and Executive to address any gaps.
- The Board and Executive ensures that strategic and business planning considers legislative requirements, organisational risks, other requirements related to operating under the NDIS (for example Agency requirements and guidance), client and worker needs, and the wider organisational environment.
- The performance of management, including responses to individual issues, is monitored by the Board and Executive to drive continuous improvement in management practices.
- Our organisation is managed by a suitably qualified and/or experienced persons with clearly defined responsibility, authority and accountability for the provision of supports.
- There is a documented system of delegated responsibility and authority to another suitable person in the absence of a usual position holder in place.
- Perceived and actual conflicts of interest are proactively managed and documented, through development and maintenance of organisational policies.

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PRACTICE EXCELLENCE POLICY
GOVERNANCE AND OPERATIONAL MANAGEMENT

7.1.2 Risk Management

- Risks to the organisation, including risks to clients, financial risks, work health and safety risks, and risks associated with provision of supports are identified, analysed, prioritised and treated.
- A documented risk-management system that effectively manages identified risks is in place, and is relevant and proportionate to our size and scale and the scope and complexity of supports provided.
- Support delivery is linked to a risk management system which includes:
  - Incident Management;
  - Complaints Management and Resolution;
  - Work Health and Safety;
  - Human Resource Management;
  - Financial Management;
  - Information Management;
  - Governance and Operational Management; and
  - Emergency and Disaster Management.
- Where relevant, the risk management system includes measures for the prevention and control of infections and outbreaks.
- Supports and services are provided in a way that is consistent with the risk management system.
- Appropriate insurance is in place, including professional indemnity, public liability and accident insurance.
- In collaboration with each client,
  - risk assessments are regularly undertaken, and documented in their support plans; and
  - appropriate strategies are planned and implemented to treat known risks to them.
- Risk assessments include the following;
  - Consideration of the degree to which participants rely on the provider's services to meet their daily living needs; and
  - The extent to which the health and safety of clients would be affected if those services were disrupted.

7.1.3 Quality Management

- A quality management system is maintained that is relevant and proportionate to our size and scale, and the scope and complexity of the supports delivered. The system defines how to meet the requirements of legislation and these standards. The system is reviewed and updated as required to improve support delivery.
- Our quality management system has a documented program of internal audits relevant (proportionate) to our size and scale and the scope and complexity of supports delivered.

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PRACTICE EXCELLENCE POLICY
GOVERNANCE AND OPERATIONAL MANAGEMENT

- Our quality management system supports continuous improvement, using outcomes, risk related data, evidence-informed practice and feedback from clients and workers

7.1.4 Information Management

- Each client's consent is obtained to collect, use, and retain their information or to disclose their information (including assessments) to other parties, including details of the purpose of collection, use and disclosure. Each client is informed in what circumstances the information could be disclosed, including that the information could be provided without their consent if required or authorised by law.
- Each client is informed of how their information is stored and used, and when and how each client can access or correct their information and withdraw or amend their prior consent.
- An information management system is maintained that is relevant and proportionate to our size and scale and records each client's information in an accurate and timely manner.

Documents are stored with appropriate use, access, transfer, storage, security, retrieval, retention, destruction and disposal processes relevant and proportionate to the scope and complexity of supports delivered.

7.1.5 Feedback and Complaints Management

- A complaints management and resolution system is maintained that is relevant and proportionate to the scope and complexity of supports delivered and our size and scale. The system follows principles of procedural fairness and natural justice and complies with the requirements under the National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018.
- Each client is provided with information on how to give feedback or make a complaint, including avenues external to our organisation, and their right to access advocates. There is a supportive environment for any person who provides feedback and/or makes complaints.
- Demonstrated continuous improvement in complaints and feedback management by regular review of complaint and feedback policies and procedures, seeking of client views on the accessibility of the complaints management and resolution system, and incorporation of feedback throughout our organisation.
- All workers are aware of, trained in, and comply with the required procedures in relation to complaints handling.

7.1.6 Incident Management

- An incident management system is maintained that is relevant and proportionate to the scope and complexity of supports delivered and our size and scale. The system complies with the requirements under the National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018.
- Each client is provided with information on incident management, including how incidents involving the client have been managed.
- Demonstrated continuous improvement in incident management by regular review of incident management policies and procedures, review of the causes, handling and outcomes of incidents, seeking of client and worker views, and incorporation of feedback throughout our organisation.

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PRACTICE EXCELLENCE POLICY
GOVERNANCE AND OPERATIONAL MANAGEMENT

- All workers are aware of, trained in, and comply with the required procedures in relation to incident management

7.1.7 Human Resources Management

- The skills and knowledge required of each position within our organisation are identified and documented together with the responsibilities, scope and limitations of each position.
- Records of worker pre-employment checks, qualifications and experience are maintained.
- An orientation and induction process is in place that is completed by workers including completion of the mandatory NDIS worker orientation program.
- A system to identify, plan, facilitate, record and evaluate the effectiveness of training and education for workers is in place to ensure that workers meet the needs of each client. The system identifies training that is mandatory and includes training in relation to staff obligations under the NDIS Practice Standards and other National Disability Insurance Scheme rules.
- Timely supervision, support and resources are available to workers relevant to the scope and complexity of supports delivered.
- The performance of workers is managed, developed and documented, including through providing feedback and development opportunities.
- Workers with capabilities that are relevant to assisting in the response to an emergency or disaster (such as contingency planning or infection prevention or control) are identified.
- Plans are in place to identify, source and induct a workforce in the event that workforce disruptions occur in an emergency or disaster.
- Infection prevention and control training, including refresher training, is undertaken by all workers involved in providing supports to participants.
- For each worker, the following details are recorded and kept up to date:
    - their contact details; and
    - details of their secondary employment (if any).

7.1.8 Continuity of Supports

- Day-to-day operations are managed in an efficient and effective way to avoid disruption and ensure continuity of supports.
- In the event of worker absence or vacancy, a suitably qualified and/or experienced person performs the role.
- Supports are planned with each client to meet their specific needs and preferences. These needs and preferences are documented and provided to workers prior to commencing work with each client to ensure the client's experience is consistent with their expressed preferences.
- Arrangements are in place to ensure support is provided to the client without interruption throughout the period of their service agreement. These arrangements are relevant and proportionate to the scope and complexity of supports delivered.

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PRACTICE EXCELLENCE POLICY
GOVERNANCE AND OPERATIONAL MANAGEMENT

- Alternative arrangements for the continuity of supports for each participant, where changes or interruptions are unavoidable, are
  - Explained and agreed with them; and
  - delivered in a way that is appropriate to their needs, preferences and goals.

7.1.9 Emergency and Disaster Management

- Measures are in place to enable continuity of supports that are critical to the safety, health and wellbeing of each client before, during and after an emergency or disaster.
- The measures include planning for each of the following:
  - preparing for, and responding to, the emergency or disaster;
  - making changes to client supports;
  - adapting, and rapidly responding, to changes to client supports and to other interruptions; and
  - communicating changes to client supports to workers and to clients and their support networks.
- The governing body develops emergency and disaster management plans (the *plans*), consults with clients and their support networks about the plans, and puts the plans in place.
- The plans explain and guide how the governing body will respond to, and oversee the response to, an emergency or disaster.
- Mechanisms are in place for the governing body to actively test the plans, and adjust them, in the context of a particular kind of emergency or disaster.
- The plans have periodic review points to enable the governing body to respond to the changing nature of an emergency or disaster.
- The governing body regularly reviews the plans, and consults with clients and their support networks about the reviews of the plans.
- The governing body communicates the plans to workers, clients, and their support networks.
- Each worker is trained in the implementation of the plans.

7.2 Audit & Review

- This policy is subject to internal and external audit
- This policy will be reviewed and updated as required by our document management processes or as legislation requires.

8. DEFINITIONS:

For the purpose of this procedure the following definitions apply:

Word	***Definition***
Human rights	*Human rights are often defined in different ways. The Australian Human Rights Commission defines human rights as:* *-the recognition and respect of people's dignity*

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PRACTICE EXCELLENCE POLICY
GOVERNANCE AND OPERATIONAL MANAGEMENT

	-a set of moral and legal guidelines that promote and protect a recognition of our values, our identity and ability to ensure an adequate standard of living *-the basic standards by which we can identify and measure inequality and fairness* *-those rights associated with the Universal Declaration of Human Rights*

9. Document Approval:	
Approved by: Kym Shreeve, Chief Executive Officer	Date: 10/09/2021

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