

## 1. POLICY PURPOSE:

This policy sets out the environment in which supports are provided to our clients. This policy supports us to apply the NDIS Practice Standards, in particular Core Module 4: Provision of Supports Environment.

### 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 a safe and secure environment in which supports are provided to our clients by ensuring:

- each client accesses supports in a safe environment that is appropriate to their needs;
- client's money and property is secure and each client uses their own money and property as they determine;
- each client requiring medication is confident that we administer, store and monitor the effects of their medication and work to prevent errors or incidents;
- each client requiring mealtime management receives meals that are nutritious, and of a
  texture that is appropriate to their individual needs and preferences, and delivered in a
  way that is appropriate to their individual needs and ensures that the meals are
  enjoyable; and
- each client, each worker, and any other person in the home is protected from harm as a result of exposure to waste, infectious or hazardous substances generated during the delivery of supports.

### 4. ROLES AND RESPONSIBILITIES:

#### 4.1 Minda Board

- Ensures there is an organisation-wide approach to the support provision environment.
- Ensures there are effective organisation-wide systems in place for managing and governing all aspects of the support provision environment.

#### 4.2 Chief Executive Officer and Executive Team:

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- Promote a culture of shared responsibility for effective support provision environments.
- Regularly evaluate and review risks and other relevant information in relation to effective support provision environments.
- 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 support provision environments 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**

- 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 (Complaints Management and Resolution) Rules 2018
- National Disability Insurance Scheme (Specialist Disability Accommodation Conditions)
   Rule 2018

## **South Australian Legislation**

- Disability Inclusion Act 2018 (SA)
- Disability Inclusion (NDIS Worker Check) Regulations 2020 (SA)
- COVID-19 Emergency Response Act 2020 (SA)
- Supported Residential Facilities Act 1992 (SA)
- Supported Residential Facilities Regulations 2009 (SA)
- Disability Inclusion (NDIS Worker Check) Regulations 2020 (SA)
- Community Housing Providers (National Law) (SA) Act 2013
- Residential Tenancies Act SA 1995

## 6. SUPPORTING DOCUMENTS AND ADDITIONAL INFORMATION:

#### **Internal Resources:**

All Support Provision Environment documents are available via Practice Excellence Framework and Minda internal SharePoint site

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# 7. KEY PERFORMANCE INDICATORS (KPI), RECORDS, AUDIT:

## 7.1 Demonstration of compliance with this policy will include:

#### 7.1.1 Safe Environment

- Each client can easily identify workers engaged to provide the agreed supports.
- Where supports are provided in the client's home, work is undertaken with the client to ensure a safe support delivery environment.
- Where relevant, work is undertaken with other providers and services (including health care and allied health providers, and other providers of services) to identify and manage risks, ensure safe environments, and prevent and manage injuries.
- For each client requiring support with communication, clear arrangements are in place to assist workers who support them to understand their communication needs and the manner in which they express emerging health concerns.
- To avoid delays in treatments for clients:
  - protocols are in place for each client about how to respond to medical emergencies for them; and
  - each worker providing support to them is trained to respond to such emergencies (including how to distinguish between urgent and non-urgent health situations).
- Systems for escalation are established for each client in urgent health situations.
- Infection prevention and control standard precautions are implemented throughout all settings in which supports are provided to clients.
- Routine environmental cleaning is conducted of settings in which supports are provided to clients (other than in their homes), particularly of frequently-touched surfaces.
- Each worker is trained, and has refresher training, in infection prevention and control standard precautions including hand hygiene practices, respiratory hygiene and cough etiquette.
- Each worker who provides supports directly to clients is trained, and has refresher training, in the use of PPE.
- PPE is available to each worker, and each client, who requires it.

### 7.1.2 Client Money and Property

- Where we have access to a client's money or other property, processes to ensure that it is managed, protected and accounted for are developed, applied, reviewed and communicated. Clients' money or other property is only used with the consent of the client and for the purposes intended by the client.
- If required, each client is supported to access and spend their own money as the client determines.
- Clients are not given financial advice or information other than that which would reasonably be required under the client's plan

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## 7.1.3 Management of Medication

- Records clearly identify the medication and dosage required by each client, including all information required to correctly identify the client and to safely administer the medication.
- All workers responsible for administering medication understand the effects and side effects of the medication and the steps to take in the event of an incident involving medication.
- All medications are stored safely and securely, can be easily identified and differentiated, and are only accessed by appropriately trained workers.

## 7.1.4 Mealtime Medication

- Each client requiring mealtime management is identified.
- Each client requiring mealtime management has their individual mealtime management needs assessed by appropriately qualified health practitioners, including by practitioners:
  - a) undertaking comprehensive assessments of their nutrition and swallowing; and
  - b) assessing their seating and positioning requirements for eating and drinking; and
  - c) providing mealtime management plans which outline their mealtime management needs, including for swallowing, eating and drinking; and
  - d) reviewing assessments and plans annually or in accordance with the professional advice of the client's practitioner, or more frequently if needs change or difficulty is observed.
- With their consent, each client requiring mealtime management is involved in the assessment and development of their mealtime management plans.
- Each worker responsible for providing mealtime management to clients understands
  the mealtime management needs of those clients and the steps to take if safety
  incidents occur during meals, such as coughing or choking on food or fluids.
- Each worker responsible for providing mealtime management to clients is trained in preparing and providing safe meals with clients that would reasonably be expected to be enjoyable and proactively managing emerging and chronic health risks related to mealtime difficulties, including how to seek help to manage such risks.
- Mealtime management plans for clients are available where mealtime management is provided to them and are easily accessible to workers providing mealtime management to them.
- Effective planning is in place to develop menus with each client requiring mealtime management to support them to:
  - a) be provided with nutritious meals that would reasonably be expected to be enjoyable, reflecting their preferences, their informed choice and any recommendations by an appropriately qualified health practitioner that are reflected in their mealtime management plan; and
  - b) if they have chronic health risks (such as swallowing difficulties, diabetes, anaphylaxis, food allergies, obesity or being underweight) proactively manage those risks.

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- Procedures are in place for workers to prepare and provide texture-modified foods and fluids in accordance with mealtime management plans for clients and to check that meals for clients are of the correct texture, as identified in the plans.
- Meals that may be provided to clients requiring mealtime management are stored safely and in accordance with health standards, can be easily identified as meals to be provided to particular clients and can be differentiated from meals not to be provided to particular clients.

## 7.1.5 Management of Waste

- Policies, procedures and practices are in place for the safe and appropriate storage and disposal of waste, infectious or hazardous substances that comply with current legislation and local health district requirements.
- All incidents involving infectious material, body substances or hazardous substances are reported, recorded, investigated and reviewed.
- An emergency plan is in place to respond to clinical waste or hazardous substance management issues and/or accidents. Where the plan is implemented, its effectiveness is evaluated, and revisions are made if required.
- Workers involved in the management of waste and infectious or hazardous substances receive training to ensure safe and appropriate handling. This includes training on any protective equipment and clothing required when handling waste or substances.

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

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Approved by: Kym Shreeve, Chief Executive Officer Date: 10/09/2021

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