

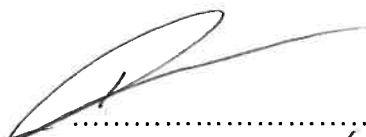


Service Delivery Policy Statement Register (People Who Are Older)

DOCUMENT AUTHORISATION

RESPONSIBLE OFFICER:		MANAGER OF COMMUNITY SERVICES (MCS)			
REVIEWED BY:		MANEX			
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VERSIONS:	DATE:	RESOLUTION NO:	DESCRIPTION OF AMENDMENTS:	AUTHOR / EDITOR:	APPROVED / ADOPTED BY:
2	25/08/2022	17.08/22	Update purpose of the policy, applicability, outcomes, roles and responsibilities and definitions under new policy template. Update relevant acts and policies of Council and dates thereof. Reformat policy to a consistent format to aid readability and understanding. Remove/update redundant statements since last review.	Coordinator of Activity and Lifestyle Support (CALs)	Council
1	27/06/2019	13.06/19	NA	Manager of Community Services (MCS)	Council

Note: Document Control continued at Appendix A



 General Manager (INTERIM)

15.9.22

 Date

ACKNOWLEDGEMENT OF COUNTRY

Glen Innes Severn Council acknowledges and pays respect to the Ngorabul people as the traditional custodians of this land, their elders past, present and emerging and to Torres Strait Islander people and all First Nations people.

PURPOSE

The purpose of this policy is to:

- Provide an ethical framework to guide delivery of services of excellence that encompass a variety of options and opportunities to support consumers to achieve their goals as they choose.

APPLICABILITY

This policy applies to:

- Consumers;
- Council Staff;
- Volunteers; and
- Contractors and Consultants.

OUTCOMES

Glen Innes Severn Council is committed to providing consumer outcomes in which there has been an emphasis on consumer collaboration at all levels of service delivery including planning and evaluation in line with the Aged Care Quality Standards.

ROLES AND RESPONSIBILITIES

It will be the responsibility of the MCS to induct staff into this Policy when required. Revised versions of the Policy that contain significant changes will be communicated with the relevant staff by the MCS.

DEFINITIONS

For the purposes of this policy diversity considers those people who identify as belonging to one of the groups listed below to be from a diverse background in line with the Aged Care Diversity Framework:

- Aboriginal and Torres Strait Islander;
 - From culturally and linguistically diverse (CALD) backgrounds;
 - Living in rural or remote areas;
 - Financially or socially disadvantaged;
 - Veterans;
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- Experiencing homelessness or at risk of becoming homeless;
- Care leavers;
- Parents separated from their children by forced adoption or removal;
- Lesbian, gay, bisexual, transgender and intersex;
- Experiencing mental health problems and mental illness;
- Living with cognitive impairment including dementia; and
- Living with disability.

POLICY STATEMENT

These policies apply to the programs directly or indirectly provided by Glen Innes Severn Council through **Life Choices-Support Services (LC-SS)** for people who are older (over 65 years of age or over 50 years of age for Aboriginal and Torres Strait Islanders).

Consumer Dignity and Choice (Standard 1)

- **Consumer Outcome:** I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.
 - **Organisation Statement:** Glen Innes Severn Council values inclusion and diversity and embraces a culture of respect, dignity and privacy. All consumers are encouraged to exercise choice and maintain independence wherever possible and all staff adhere to the Aged Care Quality Standards and the LC-SS Code of Ethics which underpins this statement.
 - Staff will:
 - Treat each consumer with respect, dignity and courtesy;
 - Respect the rights and individuality of each consumer and their unique family and/or social relationships;
 - Accept without judgment, the way someone is or the way in which they live their life; and
 - Respect each individual's religious and cultural identity provided that it is lawful.
 - Staff will provide services and support that are culturally safe. They will:
 - Act in the best interests of the consumer;
 - Encourage each consumer to be comfortable to provide feedback, as they are entitled to do, giving due consideration to their past service experiences;
 - Acknowledge and respect the uniqueness and potential of all individuals;
 - Inform each consumer and/or their representative of their right to an advocate of their choice, and opportunities for a professional advocacy service;
 - Encourage the participation of individuals from different diversity groups and inform them of other relevant services and give them appropriate assistance to access them;
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- Be sensitive to the cultural and linguistic environment of each unique consumer; and
 - Ask the consumer at intake about their specific cultural and spiritual needs and discuss how best LC-SS can cater for those needs.
 - LC-SS staff will support each consumer to exercise choice and independence in the following ways:
 - Staff will empower each consumer to make their own decisions about their care and ensure that such decisions are clearly documented and communicated to all relevant staff to ensure effective implementation of such decisions during service delivery. Staff will:
 - Give each consumer the right to make informed choices about their service delivery; and
 - Encourage each consumer to be responsible for their decisions and actions.
 - LC-SS staff are cognisant of the importance of preserving family relationships, and informal social networks, however, realise that not all people wish to do this. LC-SS staff will consult each consumer at intake and at reviews about their current wishes regarding whether family, friends, carers or others should have any role in their care and document and follow these wishes. Therefore each consumer will be:
 - Encouraged and supported to maintain contact with their families, friends and other networks that are important to them, for example, clubs and hobby groups.
 - Each consumer's decisions and preferences regarding their service delivery will be communicated in:
 - All support plans;
 - All Consumer Support Details; and
 - All care plans.
 - Each consumer will be supported to connect with others and maintain relationships of their choice, including to maintain and/or develop intimate consensual relationships if they so choose. Staff will:
 - Assist consumers with transport options to support meetings, outings or more private visits as required and requested;
 - Listen and support a consumer who wishes to discuss their feelings about forming or progressing an intimate relationship with another person; and
 - Appreciate that consumers who are older have a right to sexual expression and to develop and maintain consensual sexual relationships.
 - Glen Innes Severn Council respects the right of every consumer to self-determination, independence and dignity. These rights need to be considered alongside other issues raised by the duty of care. Each consumer is supported to take risks to enable them to live the best life they can. To achieve this:
 - Staff, volunteers and contractors must meet their legal duty of care to consumers, while recognising each consumer's right to make informed choices and take calculated risks;
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- Risk minimisation strategies will be discussed with the consumer then implemented and the consequences of a proposed action will be explained in full to the consumer; and
 - Written consent will be obtained for any activities that still pose a risk following risk assessment and risk minimisation strategy implementation.
 - Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice:
 - Each consumer (and/or their representative) is provided with relevant and timely information to assist them to make informed service choices. They have the right (and LC-SS the responsibility) to be consulted, supported and respected to enable them to make choices that they feel will best suit their situation;
 - Appropriate communication methods will be used and may include written, verbal, sign, symbol or an interpreter for another language including Auslan. Where possible ensure that the consumer is able to exercise their right to choose in the way that they can understand. For example, visual menu choices or photo roster schedules;
 - Consumers and/or their representative should be informed of their right to an advocate of their choice, and opportunities for a professional advocacy service such as the Seniors Rights Service; and
 - Consumers and/or their representative need to be informed of service flexibility, including choice of staff, service delivery times and their right to alter the planned schedule on the day should they prefer to utilise the staff for a different activity or task.
 - Each consumer's privacy is respected and their personal information kept confidential and secure through:
 - Compliance with the requirements of the *NSW Privacy and Personal Information Protection Act 1998*, the *NSW Health Records and Information Privacy Act 2002* and the *Government Information Public Access Act 2009 (GIPA)*;
 - Consumers will be made aware of circumstances where their personal information is shared and with whom, that it will only be used and stored for the relevant purpose it was collected and for which the consumer's consent was given;
 - All staff, stakeholders and consumers will be made aware of their rights and responsibilities in regard to personal or health information provided to Council;
 - Access to the information held about consumers will be provided without undue delay, unless such access is deemed to be one of the exceptions mentioned in the legislation;
 - A Privacy Statement will be issued and explained to consumers at intake;
 - Security of records will be maintained with password protected access to electronic records and protocols for access outlined, including consumers' freedom to access their personal records (exceptions outlined in Privacy Statement); and
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- Consumers and/or their representative will be informed that they have the right to withdraw that consent.

Evidence Link (to be used for audit purposes).

Ongoing Assessment and Planning with Consumers (Standard 2)

- **Consumer Outcome:** I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and wellbeing.
- **Organisation Statement:** Glen Innes Severn Council undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. The assessment and planning has a focus on optimising health and wellbeing for the consumer in accordance with their needs, goals and preferences.
- Glen Innes Severn Council demonstrates the following:
 - Assessment and planning, including consideration of risks to the consumer's health and wellbeing, ensures the delivery of safe and effective care and services by:
 - A Support Facilitator will review and action the referral and support plan prepared by the **Rural Assessment (RAS)** team and sent via **My Aged Care (MAC)**;
 - An intake/consent form is prepared with the consumer to receive more detailed information about their needs, health, goals, preferences such as dietary, staff, service times, and enablement/reablement options; and
 - A pre-visit **Work Health Safety (WHS)** form is completed prior to visiting the home, and individual WHS assessments (workplace for the environment/home, personal care where applicable and an individual risk assessment, a home maintenance assessment for minor modifications, a gardening/mowing for outdoors and a venue risk assessment for individual or group outings) are completed to identify and minimise any risks to the consumer and/or staff.
 - Assessment and planning identifies and addresses the consumer's current needs, goals and preferences, including advance care planning and end of life planning options, if the consumer wishes, in the following ways:
 - Support Facilitators explain advocacy and advance care planning and offer assistance with this documentation should the consumer wish to proceed; and
 - Legal representatives are identified and copies of documentation relating to guardianship or power of attorney are requested and filed for reference.
 - Assessment and planning:
 - Is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of their care and services. Staff will:

- Encourage the consumer and/or their representative to call their Support Facilitator whenever their needs change, they want to change their plan or they have any other concerns; and
 - Be available for contact according to the consumer's preference, with the frequency ranging from daily to monthly depending on their well-being and need. Reviews are completed on a needs or preference basis, however reviews are completed for all consumers annually as a minimum.
 - Will demonstrate the inclusion of other organisations, individuals, providers of other care and services that are involved in the care of the consumer. Staff will include anyone requested or approved by the consumer as is considered necessary for holistic assessment and planning. Representatives may include:
 - The Discharge Planner, a Registered Nurse, Physiotherapist, Speech Therapist, General Practitioner, Occupational Therapist, contractors for home modification work, suppliers of goods and equipment and brokered services; and
 - The consumer is central to this process and has the final say in the services and providers they wish to engage with.
 - The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided. The Support Facilitator will work with the consumer and/or their representative to:
 - Prepare a Support/Care Plan for the consumer identifying realistic, consumer focused, strength-based goals and the services required to achieve them. Copies will be given to the consumer and/or their carer and are documented in the consumer's case notes;
 - A Consumer Service Detail is prepared as required for Direct Support Staff or brokered services and these services are arranged in accordance with the consumer's preferences; and
 - Meetings involving consumers, their representatives or careers, and other agencies will be held when appropriate, to coordinate service delivery.
 - Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer:
 - Each consumer receives an initial assessment through My Aged Care to identify their needs;
 - Consumers receive regular monitoring as agreed with their Support Facilitator to ensure that services can be changed to reflect altered circumstances;
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- Each consumer has a Support/Care Plan developed in consultation with them and/or their representative if desired, which identifies their specific needs and the goals set to achieve them;
- In partnership with their Support Facilitator all consumers and/or their representative will actively participate in the development of their individual care plan where their needs and strengths are identified. Each plan is individually tailored to the needs of that consumer and builds on the strengths inherent within the person by developing specific goals;
- Consumers will be alerted to the inclusion of support facilitation time, or planning time within their individual package; and
- The service encourages participation of individuals from different diversity groups and ensures the groups are offered appropriate assistance to achieve this participation.

Evidence Link (to be used for audit purposes).

Personal Care and Clinical Care (Standard 3)

- **Consumer outcome:** I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.
- **Organisation statement:** Glen Innes Severn Council delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer's needs, goals and preferences to optimise health and wellbeing.
- Glen Innes Severn Council demonstrates the following:
 - Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:
 - Is best practice:
 - Glen Innes Severn Council is committed to the delivery of safe and effective personal and clinical care which is developed according to national best practice guidelines.
 - Is tailored to their needs:
 - Each consumer's service delivery will be individually tailored to their personal, clinical, cultural, spiritual and emotional needs following due consultation with them about how they wish this to happen.
 - Optimises their health and wellbeing.
 - Staff work within a framework of wellness and reablement to promote and maximise health and wellbeing options for our consumers:
 - Wellness refers to ongoing actions that encourage and support the person to live as good a life as possible by utilising their strengths, ability, resources and their aspirations for how they wish to live their life; and

- Reablement refers to a time limited strategy that will address a barrier (often functional) to the person's independence and thus is outlined as a goal with a timeframe and desired outcome.
 - It should be noted that some consumers choose to exercise their choice to live in ways that will not optimise their health and wellbeing and staff can only support them as they request and provide information on alternate ways that they may wish to embrace.
 - Effective management of high impact or high prevalence risks associated with the care of each consumer:
 - Risks associated with each individual consumer will be initially identified at the time of intake and revisited during reviews and or service delivery contacts. Risks include:
 - Hydration and nutrition status;
 - Swallowing and choking status;
 - Medication practice, safety and management;
 - Pain management;
 - Pressure injuries;
 - Delirium;
 - Cognitive impairment;
 - Hearing loss;
 - Mobility, balance and history of falls; and
 - Urinary tract infections.
 - Following consultation with the consumer and/or their representative with a clear understanding of their wishes; provision of supports responsive to their needs will be put in place in the safest, least restrictive way;
 - Continuous review of consumer choice and preference will be performed during regular service deliveries with a view to accommodating any altered consumer needs on a more regular basis; and
 - Consumers will be engaged regarding alterations to practice, and changes will be communicated both within the organisation and to other care providers as appropriate.
 - The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved:
 - All consumers will be invited to complete an Advance Care Directive (formulated by the NSW Ministry of Health) at the time of intake and review;
 - Particular attention will always be afforded to the individual's spiritual and emotional care, their cultural values and the influences of those around them that are important to them;
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- Staff will maintain regular communications with consumers who are nearing the end of their life and consistently review preferences and communicate these both within the organisation and with other care providers as appropriate;
 - To facilitate maximum quality time for the consumer and optimise their time with family, an on-call arrangement can be put in place so that staff attend when it best suits the consumer and their family; and
 - Communication with each consumer and/or their representative will be provided in the language, mode of communication and terms that the consumer is most likely to understand.
- Deterioration or change of a consumer's mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner:
- Staff will closely monitor each consumer and document any signs or symptoms that indicate any deterioration of consumer health.
 - Indicators of possible deterioration in a consumer's health status that will initiate further action will be:
 - Any change noted by staff or reported by the consumer or others;
 - Any distress, particularly if this is different, more severe or unusual for the consumer;
 - Any apparent disconnect with reality, including not seeming to understand the consequences of their behaviours or actions;
 - Any loss of function or ability that was recently present;
 - Any increased risk to the consumer or others; and
 - Any sudden (acute) change in clinical symptoms or observations will be documented and reported for action to the Support Facilitator or registered nurse as a priority.
- Information about the consumer's condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared. This happens through:
- Obtaining consent to receive an overview of a consumer's medical history and current medications;
 - Documenting relevant information in the consumers file and using appropriately in Consumer Service Details to inform the Direct Support staff. This is done in conjunction with the identification for each service of the consumer goal that the service will be meeting;
 - Giving each consumer the right to make informed choices about their service delivery; and
 - Where possible staff should regularly seek verbal consent before performing tasks of a personal nature and ascertain the consumer's preference at that time whilst accommodating/encouraging any reablement options nominated.
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- Timely and appropriate referrals to individuals, other organisations and providers of other care and services will be accomplished by:
 - Collaboration with consumers and their health professionals about their changing needs and condition; and
 - Referrals will be discussed with the consumer on a needs basis and facilitated to other care providers and allied health professional as required and agreed by the consumer.
- Minimisation of infection related risks through implementing:
 - Standard and transmission based precautions to prevent and control infection:
 - Staff will adhere to National Best Practice Guidelines related to infection minimisation and control;
 - Staff are trained in and reminded to use universal precautions as part of each Consumer Service Details;
 - Specific infection control strategies are used as required to meet individual consumer needs; and
 - Safe Work Protocols will guide a relevant and supportive framework from which staff can ensure positive consumer outcomes in relation to prevention and control of infection.
 - Practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics. Staff will adhere to Safe Work Practice guidelines for all instances of consumers' requiring medication assistance. Staff will only assist consumers with medications according to medical direction. Consumer antibiotic consumption will be closely monitored and documented according to protocol. Where necessary staff will consult with consumers and take advice from medical professionals in relation to any ongoing use of antibiotics.

Evidence Link (to be used for audit purposes).

Services and Supports for Daily Living (Standard 4)

- **Consumer outcome:** I get the services and supports for daily living that are important for my health and wellbeing and that enable me to do the things I want to do.
 - **Organisation statement:** Glen Innes Severn Council provides safe and effective services and supports for daily living that optimise the consumer's independence, health, wellbeing and quality of life.
 - Glen Innes Severn Council demonstrates the following:
 - Each consumer gets safe and effective services and supports for daily living that meet the consumer's needs, goals and preferences and optimise their independence, health, wellbeing and quality of life. This happens through:
 - Setting of consumer goals in accordance with their preferences and needs;
 - Consumers needs and goals are clearly identified for each service through Consumer Service Details;
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- A Workplace Review Form and Individual Risk Assessments are completed to provide services which are safe and effective;
 - Consumers and/or their representative are encouraged to maintain financial independence wherever possible;
 - Facilitating the consumer's preferred level of social independence; and
 - Reablement goals being identified and encouraged by staff.
 - Services and supports for daily living promote each consumer's emotional, spiritual and psychological wellbeing in the following ways:
 - Support Facilitators build a rapport with the consumers starting at intake;
 - Consumer's individual needs and how they will be met are identified, discussed and planned;
 - Services and workers are put in place that match the consumer's emotional, spiritual and psychological well-being and personal preferences; and
 - Other health professionals with consent by the consumer may be appointed to provide support where required, such as, psychologists, healers and therapists.
 - Services and supports for daily living assist each consumer to:
 - Participate in their community within and outside the organisation's service environment. This is effected through:
 - Services being put in place so the consumer can participate in community events of their interest; and
 - Calendars are prepared for monthly outings and day centre activities after consultation with consumers.
 - Have social and personal relationships:
 - Consumers are encouraged and supported to maintain contact with their families, friends and other networks that are important to them, for example, clubs and hobby groups and partners of choice;
 - Assisting consumers with transport options to support meetings, outings or more private visits as required and requested;
 - Listening and supporting a consumer who wishes to discuss their feelings about forming or progressing an intimate relationship with another person; and
 - Understanding that consumers who are older have a right to sexual expression and to develop and maintain consensual sexual relationships.
 - Do the things of interest to them.
 - Encourage consumers to participate in community and social events that they enjoy, wish to try, or to maintain previous connections.
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- Assist with transport to attend functions, shopping and group outings or visit friends; and
 - When assistance is required roster staff chosen by the consumer, perhaps due to a shared interest, to attend these outings with the consumer.
- Information about the consumer's condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared by:
 - Documenting relevant information in the consumers file and using appropriately in Consumer Service Details to inform the Direct Support staff. This is done in conjunction with the identification for each service of the consumer goal that the service will be meeting;
 - Giving each consumer the right to make informed choices about their service delivery;
 - Direct Support staff notes are completed at all services and are read by the supervisor and the consumer's Support Facilitator;
 - Consumer Service Details are updated as required to meet changes with care needs and or preferences;
 - Registered Nurse health checks are completed regularly; and
 - Changes in condition are referred to the consumer's General Practitioner and updates appropriate to service provision are communicated to relevant staff.
 - Timely and appropriate referrals to individuals, other organisations and providers of other care and services:
 - Communication to other organisations/individuals is completed within 24 hours of a consumer service review/request.
 - Where meals are provided, they are varied and of suitable quality and quantity. This is facilitated by:
 - Contracting an accredited meal provider;
 - Having a winter and summer menu on a four (4) weekly rotation;
 - Giving consumer choice of meals and an alternate meal is prepared when a menu item is not what the consumer wants;
 - Dietary requirements and dislikes are notified to the contractor at implementation of each consumers meal supply plan;
 - Facilitating consumers who attend our Centre to choose their meal options for the month; and
 - Maintaining current food handling certificates for all relevant staff.
 - Where equipment is provided, it is safe, suitable, clean and well maintained:
 - Equipment is recommended by a referral to and report from an Occupational Therapist or Physiotherapist;
 - Equipment is purchased specifically for consumers with the relevant funding after their assessment;
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- Direct Support staff report back to the Support Facilitator if any equipment requires repair or replacement; and
- Support Facilitators check equipment purchased annually at the consumer review and arrange for a qualified person to service or check if required.

Evidence Link (to be used for audit purposes).

Organisation's service environment (Standard 5)

- **Consumer outcome:** I feel I belong and I am safe and comfortable in the organisation's service environment.
- **Organisation statement:** Glen Innes Severn Council provides a safe and comfortable service environment that promotes the consumer's independence, function and enjoyment.
- Glen Innes Severn Council demonstrates the following:
 - The service environment is welcoming and easy to understand, and optimises each consumer's sense of belonging, independence, interaction and function;
 - The administration area is welcoming, accessible, clean and tidy with access to information about local services and events of interest. There are also a variety of artworks featuring but not limited to, local Aboriginal artists, local history and other items of interest to past or present consumers;
 - There are accessible interview rooms just off reception to enable privacy and prompt access to staff;
 - The My Aged Care room has a lift chair for consumers with mobility deficits, a computer and phone to enable access by the consumers should they so wish;
 - The kitchen is clean and tidy and is easy for consumers to access and engage with meal preparation and/or clean-up should they so desire;
 - Tea/coffee making facilities are easy to get to and facilitate consumer independence;
 - There is easy access to the building, accessible parking and toilets are available;
 - Consumers decide how the main activity room is set up and the items they wish to display and identify with this being their space; and
 - Reverse cycle air conditioning has been installed in the activity room and My Aged Care Room for consumer comfort in all seasons, at their request.
 - The service environment:
 - Is safe, clean, well maintained and comfortable:
 - The area is cleaned after each use;

- The temperature is regulated by fans and reverse cycle air conditioning to enable consumer preference in terms of heating and cooling and to accommodate allergies and tolerance concerns of individual consumers;
 - The kitchen, tables and benches are cleaned in accordance with the Food Act 2003 (NSW) and the Food Regulation 2015 (NSW); and
 - Consumers have a choice of several types of chairs to ensure that they are comfortable at all times.
- Enables consumers to move freely, both indoors and outdoors;
 - Consumers decide how the main activity room is set up and the items they wish to display and identify with this being their space;
 - A garden has been established off the activity room and consumers have input into what goes in the garden and often plant and water the plants in the raised garden beds;
 - There is a seamless transition to the covered outdoor area which is well utilised. Outdoor blinds have been installed at the edge of the covered area to keep it warmer and facilitate use for more of the year and to accommodate larger crowds; and
 - There is a toilet and basin easily accessed from outside the building.
- Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer:
 - There is easy clean furniture to minimise discomfort for the consumer if there are any spills;
 - Higher adjustable chairs with armrests are available as required to meet specific needs or preferences of consumers; and
 - Tables are on wheels to facilitate rearranging due to consumer preference or to accommodate movie sessions, Tai Chi classes, fashion parades and other activities as requested.

Evidence Link (to be used for audit purposes).

Feedback and Complaints (Standard 6)

- **Consumer outcome:** I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.
 - **Organisation statement:** Glen Innes Severn Council regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback as continuous improvements for individual consumers and the whole organisation.
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- Glen Innes Severn Council demonstrates the following:
 - Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints by:
 - Making all consumers aware of their right to complain, and fully explain the complaints procedure and the use and availability of advocates;
 - Taking steps to ensure that consumers feel comfortable to continue accessing the service after making a complaint;
 - Information on the complaints procedure is included in the Information Booklet for Consumers of the Commonwealth Home Support Programme and Home Care Packages which are presented and explained to consumers at the time of entry to service. Feedback forms are also included in LC-SS Newsletters;
 - Person/s affected by the complaint should be fully informed of all facts and given the opportunity to put their case. If the complaint is of a criminal nature the person should be advised to report the matter to the appropriate authorities;
 - Any comment or complaint about a service, access to service or staff member (which must be in writing) will be handled promptly, fairly and without retribution;
 - Our service encourages participation of individuals from different diversity groups and ensures the groups are informed in a manner they can understand of their right to complain, or give feedback;
 - All written complaints will be acknowledged in writing within ten (10) working days;
 - When a complaint cannot be resolved immediately, the complainant will be advised within ten (10) working days, that we are awaiting further information, and a maximum of a further ten (10) working days will be allowed to finalise the complaint;
 - Consumers are sent an annual survey protecting their identity with a prepaid envelope to give feedback on staff and service delivery, or invited to participate in a phone survey. Electronic survey participation is available to consumers and provides a further option with a view of ensuring anonymity; and
 - Records of complaints and their resolution should be kept on the consumer's file if relating to their service delivery; if of a more general or systemic nature, they should be kept in ECM; complaints about staff will be forwarded to the Records Supervisor for filing with appropriate security in ECM.
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- Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints. Staff will:
 - Advise the consumer of their right to use an advocate or representative of their choice to negotiate on their behalf with Glen Innes Severn Council. This may be a family member or friend, or an agency such as the Older Persons Advocacy Network (OPAN) on 1800 700 600, the Seniors Rights Service on 1800 424 079, Interpreter Service (TIS):131 450 and TTY: 133 677 (then ask for 02 9281 3600).
- Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. Staff will:
 - Fully explain what happened, why it happened and apologise;
 - Offer to refer a consumer that is not satisfied with the outcome or how their complaint has been handled to someone more senior to do an internal review; and
 - If the consumer remains unsatisfied, advise them that the Aged Care Quality and Safety Commission can help and provide with the number 1800 951 822.
- Feedback and complaints are reviewed and used to improve the quality of care and services by:
 - Discussing with staff what happened, what was done by Council and what could be done better if it were to happen again.

Evidence Link (to be used for audit purposes).

Human Resources (Standard 7)

- **Consumer outcome:** I get quality care and services when I need them from people who are knowledgeable, capable and caring.
 - **Organisation statement:** Glen Innes Severn Council has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.
 - Glen Innes Severn Council demonstrates the following:
 - The workforce is planned, with the number and mix of members of the workforce deployed, to enable the delivery and management of safe and quality care and services:
 - Council has a Workforce Management Strategy 2022-2025; and
 - The position descriptions are reviewed by the position supervisor and quality checked and edited by **Human Resource (HR)** staff prior to approval by the section Director. The new/reviewed position description is then approved for recruitment by the General Manager after reviewing a Position Justification Form along with the position description.
 - Workforce interactions with consumers are kind, caring and respectful of each consumer's identity, culture and diversity.
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- Council has a Cultural Relations Policy, and Code of Conduct for Council Staff and values an inclusive and diverse community. This involves the workforce:
 - Encouraging and supporting each person to contribute to social and civic life in their communities in the way they choose;
 - Collaborative program development that considers each consumer's service delivery choices relative to their cultural needs, safety, spiritualism, capacity and uniqueness; and
 - Consumers are valued for their uniqueness and individuality and this philosophy is translated into the person-centred approach that is used in all consumer interactions.
- The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles. Position descriptions are developed and advertised identifying the education, skills and experience, duties and responsibilities, physical demands and work environment for every position that is advertised.
- The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards. This is ensured through:
 - The recruitment process (including Scout Talent, Omnia/Hogan Assessments, Police Certificates and any other pre-employment checks with all records maintained), with access to training both compulsory and optional;
 - The HR Policy Statement Register;
 - An orientation and induction process is in place that is completed by workers including completion of the mandatory HR and WHS worker orientation programs as well as site specific and team specific orientation programs; and
 - Access to an **Employee Assistance Program (EAP)**.
- Regular assessment, monitoring and review of the performance of each member of the workforce:
 - All staff have a three (3) month probation review period;
 - Regular team meetings are held and individual meetings with a supervisor. These meetings are usually monthly;
 - The Pulse (Human Capital Management module) system is used for managing staff performance through supervision, and appraisals; and
 - Council is working towards staff and volunteer inductions, on-boarding, training and policy reviews and sign-offs being able to happen in Pulse.

Evidence Link (to be used for audit purposes).

Organisational Governance (Standard 8)

- **Consumer outcome:** I am confident the organisation is well run. I can partner in improving the delivery of care and services.
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- **Organisation statement:** Glen Innes Severn Council demonstrates effective governance processes based on a continuous improvement approach to safe and accountable service planning and delivery with consumer input central to the process.
 - Glen Innes Severn Council demonstrates the following:
 - Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement by:
 - Specifically tailoring support plans to the needs of the consumer to build on the strengths inherent within them and developing specific goals that are realistic, consumer focused, strength-based and, targeted towards maintaining or enhancing the individual's independence;
 - Identifying and pursuing opportunities in learning or social and recreational interests, membership and participation in community organisations and service clubs, or other community events or activities, where this forms part of their chosen activities; and
 - Any public activity or material published by the organisation will promote the abilities, contribution and competence of people of all abilities.
 - Glen Innes Severn Council promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery by:
 - Encouraging and supporting each person to contribute to social and civic life in their communities in the way they choose;
 - Collaborative program development that considers each consumer's service delivery choices relative to their cultural needs, safety, spiritualism, capacity and uniqueness;
 - Consumers will be valued for their uniqueness and individuality and this philosophy is translated into the person-centred approach that is used in all consumer interactions; and
 - Budgets will be developed, monitored, and managed to promote choice, value for money and transparency.
 - Effective organisation wide governance systems relating to the following:
 - Information management is controlled by Council through:
 - Secure information and record-keeping systems;
 - There are systems in place for backing up electronic information;
 - Regular audits and review of information, policies and procedures;
 - Information and reports regarding operations;
 - Provision of initial training in relation to any systems and further training if there is a system change;
 - Provision of relevant and timely information to allow customers/consumers to make informed choices that best suit their situation;
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- Council's website where access to information and polices are available;
 - Monthly Council meetings that are opened to the public, Council Business Papers, annexures and minutes;
 - A ten (10) year Community Strategic Plan, a four (4) year Delivery Program and an annual Operational Plan outlining objectives, timeframes for the person responsible to achieve them and expected outcomes. These outcomes are reported quarterly to Council and an Annual Report is prepared; and
 - Fees and charges are outlined in the Operational Plan.
- Continuous Improvement is an ongoing process for Council. A structured documentation and adherence to this concept has been in place within the Community Services sections (catering for people who are older and people with a disability) for the past 11 years with successful **International Organisation for Standardisation (ISO)** certification since that time. Strategies to achieve this include:
- The Continuous Improvement Register;
 - The Complaints/Feedback Form;
 - Regular audits of budgets, value for money, staff performance, consumer choice and satisfaction;
 - Item on monthly meeting agendas and Management Review Meetings;
 - Whole of Council staff meetings for information gathering and/or reporting;
 - ISO Certification 9001:2015;
 - Council's Continuous Improvement Policy and practises where the introduction describes *'continuous improvement as the ongoing effort to improve products, services and processes to provide excellence and added value for Council's customers, staff and community'*.
 - The Quality Review process under the Aged Care Quality Commission; and
 - ISO recertification.
- Financial Governance is structured and monitored by financial planning through:
- A ten (10) year Community Strategic Plan and 10 year Long-Term Financial Plan;
 - A four (4) year Delivery Program;
 - Annual Operational Plan;
 - Annual audited financial statements;
 - Transparency and accountability;
 - A Chart of Accounts;
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- Acquittals processes are in place;
 - Delegations for Financial Authority which are overseen by the Governance, Risk and Corporate Planning department which maintains a register of all authority approvals;
 - Internal controls and external audits; and
 - Qualified Finance Staff.
- Council has robust workforce governance, including the assignment of clear responsibilities and accountabilities through:
- A dedicated human resources team;
 - Position descriptions, identifying the education, skills and experience, duties and responsibilities, physical demands and work environment;
 - Recruitment Process (including Scout Talent, Omnia/Hogan Assessments, Police Certificates and any other pre-employment checks with all records maintained) with access to training both compulsory and optional;
 - Access to an **Employee Assistance Program (EAP)**;
 - The Workforce Management Strategy 2022-2025 with five (5) key strategic workforce planning outcomes. They are to:
 - Become an Employer of Choice;
 - Foster a One Council Culture;
 - Create a Sustainable Workforce;
 - Promote Health and Wellbeing; and
 - Resource the Future.
 - The HR Policy Statement Register;
 - An orientation and induction process is in place that is completed by workers including completion of the mandatory HR and WHS worker orientation programs as well as site specific and team specific orientation programs; and
 - The Pulse (Human Capital Management module) system is used for managing staff performance through supervision, appraisals and working towards staff and volunteer inductions, on-boarding, training and policy reviews and sign-offs.
- Regulatory compliance is underpinned by the following processes:
- Staff follow the LC-SS Procedure Manual;
 - Chain of Command is followed;
 - An annual Operational Plan is in place to guide Council and inform the community;
 - The Procurement Policy (informing contractual and purchasing arrangements);
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- Strategies identified in the Promoting Better Practice Review;
 - Legislative requirements, Service Delivery Policies/Statement Register;
 - Police Checks for legislative compliance and consumer safety;
 - Policy Register, and sign offs. Policies on Website, legislation is mentioned where applicable in Council reports and policies; and
 - Adherence to Fit for the Future reforms requires Council to add value to, and demonstrate continuous improvement in the performance of their functions.
- Feedback and complaints:
- All consumers should be made aware of their right to complain, and should fully understand the complaints procedure and the use and availability of advocates;
 - Steps should be taken to ensure that consumers feel comfortable to continue accessing the service after making a complaint;
 - Information on the complaints procedure is included in the Information Booklet for Consumers of the Commonwealth Home Support Programme and Home Care Packages, presented and explained to consumers at the time of entry to service. Feedback forms are also included in LC-SS Newsletters;
 - Person/s affected by the complaint should be fully informed of all facts and given the opportunity to put their case. If the complaint is of a criminal nature the person should be advised to report the matter to the appropriate authorities;
 - Any comment or complaint about a service, access to service or staff will be handled promptly, fairly and without retribution;
 - Our service encourages the participation of individuals from different diversity groups and ensures the groups are informed in a manner they can understand about their right to complain, or give feedback;
 - All written complaints will be acknowledged in writing within ten (10) working days;
 - When a complaint cannot be resolved immediately, the complainant will be advised within ten (10) working days that we are awaiting further information and a maximum of a further ten (10) working days will be allowed to finalise the complaint; and
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- Records of complaints and their resolution should be kept on the consumer's file if relating to their service delivery. If of a more general or systemic nature, they should be kept in ECM, complaints about staff will be forwarded to the Records Supervisor for filing with appropriate security in ECM.
 - Council has effective risk management systems and practices, including but not limited to the following:
 - Risk staff;
 - Checklist forms for Individuals, pre-visit, venue, workplace review, internal maintenance review and external maintenance;
 - Risk Management Plan;
 - The Damstra Safety reporting system for WHS and Pulse (Enterprise Risk Management module) for Risk Management;
 - A Business Continuity Plan;
 - Staff training in WHS and Risk;
 - Safety interactions are conducted by senior staff at workplaces twice a year;
 - Hazards, incidents and injuries are reported and discussed at staff meetings and WHS meetings; and
 - Members of teams will be invited in groups, commencing with higher risk teams, to attend a WHS meeting to give feedback, gain a greater understanding of the purpose of the meetings and make suggestions to improve systems and safety.
 - Council manages high impact or high prevalence risks associated with the care of consumers by:
 - The least restrictive approach is used to avoid risk and minimise impact on consumer choice, self-determination and independence; and
 - Written consent is obtained for any activities that still pose a risk following risk assessment and risk minimisation strategy implementation.
 - Identifying and responding to abuse and neglect of consumers:
 - In accordance with the *Aged Care Act 1997* and amendments, and the *Aged Care Quality Standards* that outline the obligations service providers have, Glen Innes Severn Council will work to ensure that the rights of people who are older are met as equal members of society and free from abuse;
 - Glen Innes Severn Council facilitates community education and awareness of abuse;
 - All staff (including paid, unpaid staff and contractors) require National Police Certificate screening prior to employment and every three (3) years thereafter;
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- Prevention strategies include the employment of skilled staff who respect the rights of consumers, are aware of current policies and legislation pertaining to abuse and who will support consumers and their families/guardians to access complaint mechanisms and provide feedback regarding services;
 - A standard approach with clear protocols for identifying the risk indicators for abuse will be applied; and
 - People who are older will be informed of their rights, including their right to make their own decisions and to an advocate of their choice.
- Supporting consumers to live the best life they can by:
 - Fully supporting each consumer's right to autonomy and self-determination;
 - Staff work within a framework of wellness and reablement to promote and maximise health and wellbeing options for our consumers; and
 - Supporting consumers to be empowered to identify their wishes in any domain and providing relevant assistance as required to facilitate these wishes.
 - Where clinical care is provided a clinical governance framework, including but not limited to the following:
 - Antimicrobial stewardship:
 - Council staff realise that antimicrobials are an integral component of health care delivery and need to be readily available and effective. Furthermore, when resistance emerges and the effectiveness is reduced there is a significant impact on an individual's treatment and the community more broadly. Council has a focus on public health and the health of the community;
 - Council staff, in particular those working with people that are older (and other vulnerable cohorts) have a sound awareness of the need for and benefit from antibiotic use. Staff also understand the risks associated with taking incomplete courses, antibiotics that have been prescribed for someone else and storing and using more than one course of antibiotics without consultation with a general practitioner; and
 - Consumer antibiotic consumption will be closely monitored and documented with particular attention given to repeat prescriptions. Staff will seek professional medical advice in relation to antibiotic use as necessary.
 - Minimising the use of restraint:
 - The least restrictive response to any behaviour should be practiced. Any strategies which impose restrictions on a consumer's rights, choice or freedoms must only be considered for implementation with legal consent;
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- These interventions have a high potential for harm and are practices that organisations can avoid with positive changes in how they assess, plan and deliver personal and clinical care for consumers. If an organisation uses restrictive practices such as physical or chemical restraint, these are expected to be consistent with best practice and used as a last resort, for as short a time as possible and to comply with relevant legislation; and
- Staff will always pursue clinical assessment and refer to the Dementia Clinical Nurse Consultant for an assessment if there has been a change or deterioration in behaviour to try and establish if the behaviour has been caused by disease, infection, mental illness, medication or is a change in cognitive function.
- Open disclosure is practised by Council, through a robust complaints policy and procedure. Staff will take timely and relevant action in response to complaints and staff readily:
 - Give a full and accurate explanation about what happened, why it happened and where Council staff could have done better and follow up with an apology;
 - Offer to refer a consumer that is not satisfied with the outcome or how their complaint has been handled to someone more senior to do an internal review; and
 - Advise the consumer that the Aged Care Quality and Safety Commission can help and provide them with the commission phone number 1800 951 822 if the consumer remains unsatisfied.

Evidence Link (to be used for audit purposes).

LEGISLATION AND SUPPORTING DOCUMENTS

Relevant Legislation, Regulations and Industry Standards include:

- *Aged Care Act 1997;*
 - *Aged Care Quality and Safety Commission Act 2018;*
 - *Aged Care Quality Standards;*
 - *Aged Care Diversity Framework;*
 - *Food Act 2003 (NSW) and the Food Regulation 2015 (NSW);*
 - *NSW Privacy and Personal Information Protection Act 1998;*
 - *NSW Health Records and Information Privacy Act 2002;*
 - *Government Information Public Access Act 2009 (GIPA); and*
 - *Quality of Care Principles 2014 (Including the Accreditation Standards).*
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Relevant Council Policies and Procedures include:

- Code of Conduct for Council Staff;
- Community Strategic Plan 2022-2032;
- Complaints Management Policy;
- Delivery Program 2022-2025;
- Human Resources Policy Statement Register;
- Incident Management and Reportable Incidents Policy for Community Services;
- LC-SS - National Police Certificate/Criminal History Check Policy;
- LC-SS - Procedure Manual;
- Pandemic Business Continuity Plan;
- Risk Management Plan;
- WHS Management Plan 2019-2022; and
- Workforce Management Strategy 2022-2025.

VARIATION AND REVIEW

The Service Delivery Policy Statement Register (People Who Are Older) will be reviewed every three (3) years, or earlier if deemed necessary, to ensure that it meets the requirements of legislation and the needs of Council. The term of the Policy does not expire on the review date, but will continue in force until superseded, rescinded or varied either by legislation or a new resolution of Council.
