

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

1. Introduction

1.1. Purpose

The purpose of our Assessment and Provision of Supports Policy at Mildura Disability Support Services is to demonstrate our commitment to delivering Participant-centred, high-quality support. This policy establishes our procedures for accurately assessing Participant needs and formulating corresponding supports, forging collaborations with other providers, actively involving Participants in the selection of their workers, and providing specialised training to our workers based on individual needs.

Further, we detail our approach to maintaining continuity of supports. Our objective, through the implementation of this policy, is to promote optimal wellbeing for our Participants, help them achieve their desired outcomes, and ensure an uninterrupted and seamless delivery of support services. To adhere to industry best practices, this policy rigorously follows the NDIS Practice Standards, specifically, Continuity of Supports, Access to Supports, Service Agreements with Participants, Support Planning, Responsive Support Provision, and Transitions to and from the Provider.

1.2. Scope

This Policy is applicable to all Workers affiliated with Mildura Disability Support. It is the responsibility of every individual, regardless of their employment status, to fully comprehend and comply with the commitments outlined in this Policy. All Workers must acknowledge that they have read, understood and will comply with the contents of this Policy.

1.3. NDIS Indicators (Objectives)

Access to supports

Outcome: Each Participant accesses the most appropriate support that meets their needs, goals and preferences. To achieve this outcome, the following indicators should be demonstrated:

- a) The supports available, and any access / entry criteria (including any associated costs) are clearly defined and documented. This information is communicated to each Participant using the language, mode of communication and terms that the Participant is most likely to understand.
- b) Reasonable adjustments to the support delivery environment are made and monitored to ensure it is fit for purpose and each Participant's health, privacy, dignity, quality of life and independence is supported.
- c) Each Participant is supported to understand under what circumstances supports can be withdrawn. Access to supports required by the Participant will not be withdrawn or denied solely on the basis of a dignity of risk choice that has been made by the Participant.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

Support Planning

Outcome: Each Participant is actively involved in the development of their support plans. Support plans reflect Participant needs, requirements, preferences, strengths and goals, and are regularly reviewed. To achieve this outcome, the following indicators should be demonstrated:

- a) With each Participant's consent, work is undertaken with the Participant and their support network to enable effective assessment and to develop a support plan. Appropriate information and access is sought from a range of resources to ensure the Participant's needs, support requirements, preferences, strengths and goals are included in the assessment and the support plan.
- b) In collaboration with each Participant:
 - 1) risk assessments are regularly undertaken, and documented in their support plans; and
 - 2) appropriate strategies are planned and implemented to treat known risks to them.
- c) Risk assessments include the following:
 - 1) consideration of the degree to which Participants rely on the provider's services to meet their daily living needs;
 - 2) the extent to which the health and safety of Participants would be affected if those services were disrupted.
- d) Periodic reviews of the effectiveness of risk management strategies are undertaken with each Participant to ensure risks are being adequately addressed, and changes are made when required.
- e) Each support plan is reviewed annually or earlier in collaboration with each Participant, according to their changing needs or circumstances. Progress in meeting desired outcomes and goals is assessed at a frequency relevant and proportionate to risks, the Participant's functionality and the Participant's wishes.
- f) Where progress is different from expected outcomes and goals, work is done with the Participant to change and update the support plan.
- g) Each Participant's support plan is:
 - 1) provided to them in the language, mode of communication and terms they are most likely to understand; and
 - 2) readily accessible by them and by workers providing supports to them.
- h) Each Participant's support plan is communicated, where appropriate and with their consent, to their support network, other providers and relevant government agencies.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

- i) Each Participant's support plan includes arrangements, where required, for proactive support for preventative health measures, including support to access recommended vaccinations, dental check-ups, comprehensive health assessments and allied health services.
- j) Each Participant's support plan:
 - 1) anticipates and incorporates responses to individual, provider and community emergencies and disasters to ensure their safety, health and wellbeing; and
 - 2) is understood by each worker supporting them.

Service Agreements with Participants

Outcome: Each Participant has a clear understanding of the supports they have chosen and how they will be provided. To achieve this outcome, the following indicators should be demonstrated:

- a) Collaboration occurs with each Participant to develop a service agreement which establishes expectations, explains the supports to be delivered, and specifies any conditions attached to the delivery of supports, including why these conditions are attached.
- b) Each Participant is supported to understand their service agreement and conditions using the language, mode of communication and terms that the Participant is most likely to understand.
- c) Where the service agreement is created in writing, each Participant receives a copy of their agreement signed by the Participant and the provider. Where this is not practicable, or the Participant chooses not to have an agreement, a record is made of the circumstances under which the Participant did not receive a copy of their agreement.
- d) Where the provider delivers supported independent living supports to Participants in specialist disability accommodation dwellings, documented arrangements are in place with each Participant and each specialist disability accommodation provider. At a minimum, the arrangements should outline the party or parties responsible and their roles (where applicable) for the following matters:
 - 1) How a Participant's concerns about the dwelling will be communicated and addressed;
 - 2) How potential conflicts involving Participant(s) will be managed;
 - 3) How changes to Participant circumstances and/or support needs will be agreed and communicated;
 - 4) In shared living, how vacancies will be filled, including each Participant's right to have their needs, preferences and situation taken into account; and
 - 5) How behaviours of concern which may put tenancies at risk will be managed, if this is a relevant issue for the Participant.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

- e) Service agreements set out the arrangements for providing supports to be put in place in the event of an emergency or disaster.

Responsive Support Provision

Outcome: Each Participant accesses responsive, timely, competent and appropriate supports to meet their needs, desired outcomes and goals. To achieve this outcome, the following indicators should be demonstrated:

- a) Support are provided based on the least intrusive options, in accordance with contemporary evidence-informed practices that meet Participant needs and help achieve desired outcomes.
- b) For each Participant (with their consent or direction and as agreed in their service agreement) links are developed and maintained by the provider through collaboration with other providers, including health care and allied health providers, to share their information, manage risks to them and meet their needs.
- c) Reasonable efforts are made to involve the Participant in selecting their workers, including the preferred gender of workers providing personal care supports.
- d) Where a Participant has specific needs which require monitoring and/or daily support, workers are appropriately trained and understand the Participant's needs and preferences.

Transitions to or from a provider

Outcome: Each Participant experiences a planned and coordinated transition to or from the provider.

To achieve this outcome, the following indicators should be demonstrated:

- a) A planned transition to or from the provider is facilitated in collaboration with each Participant when possible, and this is documented, communicated and effectively managed.
- b) Risks associated with each transition to or from the provider are identified, documented and responded to, including risks associated with temporary transitions from the provider to respond to a risk to the Participant, such as a health care risk requiring hospitalisation.
- c) Processes for transitioning to or from the provider (including temporary transitions) are developed, applied, reviewed and communicated.

Safe environment

Outcome: Each Participant accesses supports in a safe environment that is appropriate to their needs. To achieve this outcome, the following indicators should be demonstrated:

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

- a) Each Participant can easily identify workers who provide supports to them.
- b) Work is undertaken with each Participant, and others, in settings where supports are provided (including their home), to ensure a safe support delivery environment for them.
- c) Where relevant, work is undertaken with other providers (including health care and allied health providers and providers of other services) to identify and manage risks to Participants and to correctly interpret their needs and preferences.
- d) For each Participant 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.
- e) To avoid delays in treatments for Participants:
 - 1) protocols are in place for each Participant about how to respond to medical emergencies for them; and
 - 2) each worker providing support to them is trained to respond to such emergencies (including how to distinguish between urgent and non-urgent health situations).
- f) Systems for escalation are established for each Participant in urgent health situations.
- g) Infection prevention and control standard precautions are implemented throughout all settings in which supports are provided to Participants.
- h) Routine environmental cleaning is conducted of settings in which supports are provided to Participants (other than in their homes), particularly of frequently touched surfaces.
- i) Each worker is trained, and has refresher training, in infection prevention and control standard precautions including hand hygiene practices, respiratory hygiene and cough etiquette.
- j) Each worker who provides supports directly to Participants is trained, and has refresher training, in the use of PPE.
- k) PPE is available to each worker, and each Participant, who requires it.

Continuity of Supports

Outcome: Each Participant has access to timely and appropriate support without interruption. To achieve this outcome, the following indicators should be demonstrated:

- a) Day-to-day operations are managed in an efficient and effective way to avoid disruption and ensure continuity of supports.
- b) In the event of worker absence or vacancy, a suitably qualified and/or experienced person performs the role.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

- c) Supports are planned with each Participant to meet their specific needs and preferences. These needs and preferences are documented and provided to workers prior to commencing work with each Participant to ensure the Participant's experience is consistent with their expressed preferences.
 - d) Arrangements are in place to ensure support is provided to the Participant without interruption throughout the period of their service agreement. These arrangements are relevant and proportionate to the scope and complexity of supports delivered by the provider.
 - e) Alternative arrangements for the continuity of supports for each Participant, where changes or interruptions are unavoidable, are:
 - 1) explained and agreed with them; and
 - 2) delivered in a way that is appropriate to their needs, preferences and goals.
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2. Policy Statement

At Mildura Disability Support, we are committed to delivering Participant-focused and evidence-informed support services. We prioritise the least intrusive support provision, respecting the privacy, independence, and decision-making capacity of our Participants. We understand the importance of collaboration with other service providers and actively engage in coordination to ensure holistic support.

We involve Participants in the selection of their workers, promoting a comfortable and trust-based environment. We ensure that our workers are adequately trained to meet Participant-specific needs. Furthermore, we strive to provide uninterrupted support, and have systems in place to manage worker absence and other disruptions effectively.

2.1. Relevant legislation

All relevant legislation to this Policy is outlined in the Legislation Register.

2.2. Related documents

- a) Participant Support Plan
- b) Participant Intake Form
- c) Participant Risk Assessment Form
- d) Participant Rights and Responsibilities Policy
- e) Violence, Abuse, Neglect, Exploitation and Discrimination Policy

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

- f) Human Resources Management Policy
 - g) Privacy and Information Management Policy
 - h) Feedback and Complaints Policy
 - i) Incident Management Policy
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3. Responsibilities and Roles

- a) Narelle Margaret Fraser is responsible for the development and review of this policy. It is expected that Narelle Margaret Fraser ensures this Policy remains compliant with all applicable laws, regulations and standards.
 - b) Key Management Personnel play a vital role in ensuring the effective implementation of this Policy throughout Mildura Disability Support. It is the responsibility of all Key Management Personnel to not only assist Workers in understanding and complying with this policy but also to comply with it themselves. By leading by example, they demonstrate the importance of adherence to the policy and foster a culture of compliance within the organisation.
 - c) Workers are responsible for understanding the contents of this policy and complying with all procedures applicable to them.
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4. Definitions

Mildura Disability Support Services means AUS DISABILITY SUPPORT PTY LTD ABN 61 684 083 574.

Key Management Personnel means Narelle Margaret Fraser and other key management personnel involved in Mildura Disability Support Services from time to time.

Director means Narelle Margaret Fraser.

Worker means a permanent, fixed term or casual member of staff, a contractor or volunteer employed or otherwise engaged by Mildura Disability Support Services and includes the Director.

5. Procedures

5.1. Access to supports

- a) At Mildura Disability Support, we are committed to ensuring that all Participants can access the most suitable supports for their needs, goals, and preferences. We appreciate and cater to the unique needs of our Participants, striving to provide comprehensive, efficient, and effective support tailored to meet individual needs.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

- b) We recognize the importance of effective communication and the provision of detailed information to each Participant. As such, we offer a comprehensive Participant Information Booklet outlining all available supports and their respective access/entry criteria, which includes information on any associated costs. This documentation is routinely updated to mirror any changes or additions to our services.
- c) To communicate this information effectively, we utilise the language, mode of communication, and terms that each Participant is most likely to understand. This could involve translating documents into their native language, using sign language, engaging an interpreter, or employing visual aids.
- d) Potential Participants or their respective family members, carers, advocates, or community members can initiate service requests through various channels such as phone, email, or a general inquiry via the Mildura Disability Support Services website. Upon receiving a service request, a competent member of our team will respond promptly, introducing our services and beginning the process of assessing provisional eligibility.

5.2. Assessing and determining provisional eligibility

- a) Provisional eligibility for our services depends on the following criteria:
 - 1) The potential Participant is a person with a disability within the age range that Mildura Disability Support Services is approved to serve according to its NDIS registration.
 - 2) The potential Participant lives in proximity to our area of operations.
 - 3) The potential Participant requires a support or service that we provide.
 - 4) The potential Participant has individualised government funding or a source of private funding.
- b) Following the initial conversation, if the potential Participant shows interest in our services, we provide a set of documents to gather further necessary information. These documents, which include the Advocate or Support Person Request Form, Privacy Consent Form, Participant Information Booklet, Participant Intake Form, and Feedback and Complaints Form, assist us in determining the eligibility of the potential Participant.
- c) For Participants transitioning from other service providers, we actively engage with them and their families/carers to gain a comprehensive understanding of their needs. We discuss support requirements, schedules, plans, and goals, working diligently to create a transition plan that ensures the Participant's smooth integration into our services.
- d) During our initial conversation and subsequent interactions, if a potential Participant requires language assistance or advocacy support, we communicate the availability of such services. We arrange interpreter services, bilingual Workers, and access to advocacy services as necessary.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

- e) Regular assessments of our support delivery environment are conducted, and reasonable adjustments are implemented as required. These adjustments could range from physical modifications for better accessibility to the utilisation of assistive technologies and the implementation of policies that protect each Participant's privacy and dignity.

5.3. Support withdrawal

- a) We ensure that each Participant understands the circumstances under which supports can be withdrawn. Our workers explain these circumstances in detail, in a language and manner that the Participant understands.
- b) The reasons for withdrawing support may include, but are not limited to:
 - 1) The Participant breaches the service agreement, fails to comply with our policies and procedures, or is unwilling to meet the reasonable conditions of their support plan.
 - 2) The Participant no longer qualifies for our services due to changes in their disability status, their location, or the loss of their individualised government or private funding.
 - 3) The Participant's support needs change, but they fail to communicate these changes to us.
 - 4) Our services or the Participant's support plan can no longer cater to their needs or help them achieve their goals.
 - 5) The Participant becomes unable or unwilling over time to work towards agreed goals.
 - 6) The Participant transfers to another service provider or remains uncontactable for two months.
 - 7) The Participant or a family member/carer engages in unacceptable behaviour, such as violence, abuse, theft, or property damage.
 - 8) The Participant's health condition changes, requiring supports or services beyond what our Workers can provide, or they fail to pay due fees.
 - 9) The Participant passes away, or either party gives a four-week written notice for termination of the service agreement.
- c) We respect the Participant's rights and autonomy; thus, we do not withdraw or deny access to supports solely based on a dignity of risk choice made by the Participant.
- d) If concerns arise about a Participant's decision, we have procedures in place to facilitate open, respectful discussions about these concerns, working collaboratively to find a resolution that prioritises the Participant's needs, safety, and dignity.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

5.4. Participant orientation

- a) We organise a detailed orientation meeting with potential Participants, their family members/carers, and other key individuals in their support network. In this meeting, we address the Participant's goals, proposed supports and services, and any reasonable adjustments required in the service delivery environment. Collaboratively, we work on the terms of a Services Agreement, ensuring it aligns with the Participant's expectations and needs.
- b) Following the meeting, we conduct further checks to confirm the Participant's eligibility.
- c) Once confirmed, we prepare a comprehensive Services Agreement that is tailored to the Participant's specific needs.
- d) Depending on the individual's needs, the agreement could be based on a general Services Agreement template, a Support Coordination Services Agreement, or a SIL Service Agreement.
- e) After the execution and signing of the Services Agreement, we set up a Participant File. This file securely stores all pertinent information, records, documents, and correspondence regarding the Participant's engagement with Mildura Disability Support.
- f) Additionally, we complete a Participant Induction Checklist and store it in the file to ensure all required documents are signed and accounted for.

5.5. Service Agreements with Participants

- a) At Mildura Disability Support, we believe that each Participant should have a thorough understanding of the supports they've chosen and how these will be provided. We collaborate with each Participant to create a service agreement that outlines expectations, details the supports to be delivered, and specifies any conditions associated with these supports. To ensure Participants understand, we explain the reasoning behind these conditions.
- b) We assume responsibility for each Participant's full comprehension of their service agreement. To this end, we translate the agreement into a language, mode of communication, and terms that the Participant can understand best.
- c) We provide the service agreement in writing whenever possible, with each Participant receiving a signed copy. If this is not feasible or if the Participant prefers not to have a written agreement, we document the circumstances under which the Participant did not receive a copy. This step ensures transparency and accountability.
- d) Our service agreements contain provisions for providing supports during emergencies or disasters, ensuring that each Participant continues to receive the necessary support during challenging times.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

5.6. Support Planning

- a) After the service agreement is signed and the Participant's consent is obtained, the support planning process begins at Mildura Disability Support. Our team, the Participant, and their support network collaborate to perform a comprehensive assessment. We utilise various resources to ensure all of the Participant's support requirements, needs, preferences, strengths, and goals are included in the assessment.
- b) The support plan includes arrangements for proactive health measures such as recommended vaccinations, dental check-ups, comprehensive health assessments, and allied health services. The plan also incorporates an Individual Emergency Plan (developed with the Participant's consent) that outlines responses to individual emergencies and disasters. This plan enables us to support the Participant's safety, health, and wellbeing during unforeseen circumstances.
- c) We conduct regular risk assessments with Participants, focusing on their reliance on our services for daily living and potential impacts on health and safety if these services were interrupted. These assessments, along with our risk management strategies, are documented in the support plan and our Risk Assessment Form.
- d) Our workers are trained to understand these plans thoroughly, ensuring a swift and appropriate response when necessary. Training on participant specific documentation is recorded on each worker's individual Training and Development Register.
- e) We periodically review the risk management strategies with each Participant. If a risk is not being adequately managed, we involve the Participant in making the necessary changes to strategies.
- f) The support plan undergoes an annual review, or sooner if there is a change in the Participant's needs or circumstances. This review involves assessing the progress made towards desired outcomes and goals, taking into account risks, Participant functionality, and Participant preferences. If outcomes diverge from expectations, we engage the Participant in updating the support plan.
- g) Every Participant's support plan is accessible to them and our workers, presented in a language, mode of communication, and terms that they understand best. With the Participant's consent, we also communicate the support plan to their support network, other service providers, and relevant government agencies. This coordination ensures a unified approach to the Participant's care.

5.7. Providers of daily personal activities with sole support workers

- a) Mildura Disability Support, when providing daily personal activities with sole support workers, providing supports to participants who live alone, will comply with the additional conditions imposed under section 73G of the National Disability Insurance Scheme Act 2013.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

<https://www.ndiscommission.gov.au/providers/registered-ndis-providers/registered-provider-obligations-and-requirements/providers>

- b) Mildura Disability Support Services will undertake the conditions imposed in the Act where:
 - i) The Participant is not receiving, from any other NDIS provider, supports or services that involve regular, face-to-face contact with the participant.
 - ii) One or more of the following applies:
 - 1) The Participant or the Participant's plan indicates that the Participant has limited or no regular, face-to-face contact with relatives, friends or other people with whom the participant is well-acquainted.
 - 2) Without the assistance of another person the Participant has limited or no physical mobility.
 - 3) The Participant uses equipment to enable them to be physically mobile or to facilitate their physical mobility.
 - 4) Without the assistance of another person the Participant has limited or no ability to communicate with others.
 - 5) The Participant uses equipment to enable or facilitate communication with others, including to enable or facilitate the use of a phone or other device.
- c) Where this is applicable to a Participant, Mildura Disability Support Services will:
 - i) Record the evaluation of the Participant's risk factors on the Participant Risk Assessment Form. Mildura Disability Support Services will:
 - 1) Provide a copy of this assessment to the Participant as soon as practicable.
 - 2) Retain a copy of the assessment on the participants personnel file.
 - ii) Where there is a change in circumstance that may have a significant impact on the provision of personal support to the Participant, Mildura Disability Support Services will:
 - 1) Revise the assessment to reflect the change.
 - 2) Provide an updated copy of this assessment to the Participant as soon as practicable.
 - 3) Retain an updated copy of the assessment on the Participants personnel file.
- d) The Risk Management Register documents daily personal activities involving sole support workers, delivering assistance to participants living alone identified as a risk to the Participant, with the possible impacts identified, and mitigation strategies in place should they be required.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

- e) Where a risk factor has been identified as existing in relation to the participant, Mildura Disability Support Services will ensure:
 - i) A comprehensive supervision plan for the participant's support worker is documented, tailored to the participant's risk factors, and actively put into practice.
 - ii) Routine reports on the quality and proficiency of personal support provided to the participant by the support worker are consistently distributed to all key personnel, with the regularity of the reports being appropriate having regard to the participant's risk factors.
 - iii) Where concerns are identified, appropriate action will be taken to address these concerns in a timely manner.

5.8. Responsive Support Provision

- a) At Mildura Disability Support, we prioritise Participants' comfort and autonomy, respecting privacy, independence, and decision-making in the support provision process.
- b) We encourage an evidence-informed approach that aligns with proven strategies to meet Participant needs and facilitate the achievement of desired outcomes.
- c) We also establish collaborations with other providers, such as healthcare and allied professionals, to manage potential risks and deliver more holistic, integrated support.
- d) We emphasise involving Participants in the process of selecting their support workers, taking into account their preferences, which can include the preferred gender of workers for personal care supports.
- e) All our workers are equipped with identification cards featuring their name and photograph, which they carry at all times during service provision. This ensures that Participants can readily identify our team members.
- f) We ensure workers are trained appropriately to comprehend and address the specific needs and preferences of Participants. This training could involve specialised sessions, mentoring on-the-job, or further education as necessary.
- g) Each Participant undergoes a detailed assessment to identify critical supports, considering medical, psychological, nutritional, mobility needs, and daily essentials.
- h) This process leads to the development of personalised emergency plans, taking into account the unique needs, preferences, and vulnerabilities of each Participant.
- i) Regular reviews are conducted to adapt support plans based on changes in a Participant's condition, needs, or support network, with feedback being sought at each step.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

5.9. Adjustments to Support Delivery Environment

- a) In collaboration with the Participant, Mildura Disability Support Services adjusts the Participant's support environment to ensure its safety and supportiveness.
- b) We encourage Participants to take calculated risks to enhance their quality of life, supporting them in understanding potential outcomes and managing these risks.
- c) We urge Participants to utilise self-protection strategies when taking risks and to consult with representatives or legal services when necessary.
- d) During the support planning process, we match workers with Participants based on factors such as personality, language, culture, skill requirements, and specific risk factors.
- e) For Participants receiving personal support and subject to significant risk factors, Mildura Disability Support Services identifies these Participants and monitors the provision of personal support by workers.
- f) In our commitment to ensure their safety, we conduct thorough risk evaluations and supervisory visits. If deemed necessary and practical, we also implement regular worker rotation.
- g) We continuously monitor and adjust the support environment to ensure its suitability and effectiveness.
- h) We regularly monitor worker performance to ensure it aligns with the Participant's needs and safety.
- i) When necessary, we engage with providers of other support services to fulfill our monitoring and performance obligations.

5.10. Transitions to or from a Provider

- a) We aim to make transitioning to our services or moving on to another provider smooth, well-planned, and coordinated, with the Participant's needs and wishes guiding the process. This includes clear communication about the transition process, active involvement in planning and decision-making, and immediate response to questions and concerns. We also ensure the risks associated with each transition are identified, documented, and managed, including risks associated with temporary transitions.
- b) We will review the Participant's NDIS plan to ensure that the required supports and services from the new provider are clearly covered.
- c) Participants will be supported in exploring NDIS-registered providers that offer the services they need. Tools like the NDIS Provider Finder, as well as guidance from Local Area Coordinators (LACs), will be used to assist with this process.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

- d) We will review the current service agreement to understand any notice periods or requirements for ending services, ensuring a smooth handover and compliance with all agreed terms.
- e) Formal written notice of the Participant's intention to transition to a new provider will be provided to the existing provider, in line with the terms of the service agreement.
- f) As part of the transition, we conduct an exit interview where Participants are offered an opportunity to provide feedback, helping us improve our services and identify Worker training requirements.
- g) We will ensure that Participants continue to receive essential supports throughout the transition to prevent any gaps in services, especially where ongoing care is needed. In order to ensure seamless transitions, we will coordinate with the new or previous provider to discuss the participants' needs, goals and support requirements. This will be actioned after we have received confirmation and permission from the participant through the Participant Exit and Transition Form.
- h) We will update the NDIS portal to reflect any changes in the Participant's provider, either adding or removing services as required, in accordance with the correct process.
- i) All communications, updates, and transitions will be thoroughly documented, ensuring that the NDIS portal accurately reflects current provider information. This is essential for maintaining service continuity and accountability. The Participant Exit and Transition Form will be completed with the participant to document the transition details, information sharing arrangement, and risks associated with the transition, as well as risk management strategies.
- j) All Participant information is securely stored in accordance with Mildura Disability Support's Privacy and Information Management Policy.
- k) Considerations for the transition -
 - 1) **Continuity of Care:** For Participants receiving sensitive supports (such as counselling or therapy), we will facilitate a coordinated handover between providers to ensure the continuity of care.
 - 2) **Funding Management:** Depending on the Participant's funding type (self-managed, plan-managed, or NDIA-managed), we will follow the appropriate process for the transition and ensure all necessary steps are completed.
 - 3) **Feedback and Complaints:** If the transition is prompted by dissatisfaction with the current provider, we will inform the Participant about the NDIS Quality and Safeguards Commission's process for raising complaints and provide assistance if required.

5.11. Continuity of Supports

- a) We strive for the continuity of supports at Mildura Disability Support, managing our day-to-day operations efficiently and effectively to prevent disruptions.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

- b) We have systems in place to ensure a rapid response to any sudden changes in personnel availability, arranging for a suitably qualified person to step in when needed.
- c) Worker preferences and needs are well-documented before commencing work with a Participant, ensuring continuity of service.
- d) In cases of unavoidable changes in service delivery, we engage closely with the Participant to agree on alternative arrangements.
- e) We strive to maintain the same worker or group of workers for each Participant, but when changes are inevitable, Participants are involved in the decision-making process.
- f) Support Continuity Strategy
 - 1) In circumstances where unforeseen alterations to support provision occur, such as due to a Worker's sudden illness or planned absence, we have established a thorough continuity strategy to ensure uninterrupted service delivery.
 - 2) Initially, we will identify capable team members or key management personnel who possess the requisite skills and have the capacity to step into the vacant role on a temporary basis. This might involve members of our team juggling multiple responsibilities or stepping outside their usual roles to fill in for their absent colleague.
 - 3) If this solution proves untenable or the duration of absence extends beyond a few weeks, we progress to the second step of our plan. We will seek the assistance of an external labour hire or contracting service, providing us with immediate short-term support and maintaining the stability of our services. We will ensure that any personnel obtained in this way are thoroughly briefed and trained to provide the specific support our Participants require.
 - 4) In a situation where the worker's absence becomes permanent, we will begin the recruitment process for a new, permanent Worker. This may involve advertising the position, shortlisting candidates, and conducting interviews to find the best possible replacement.
 - 5) Throughout these stages of change, we will maintain clear and consistent communication with our Participants. We will explain any changes or disruptions in detail, discussing the alternative arrangements with them and obtaining their agreement. We recognize that every Participant's needs are unique, so we will work collaboratively with them to ensure that these arrangements meet their needs, preserving the quality and continuity of support.

5.12. Feedback and Continuous Improvement

- a) As part of our commitment to delivering high-quality, responsive support, we cultivate an environment that encourages open communication and continuous improvement.

Mildura Disability Support Services| **Assessment and Provision of Supports Policy**

- b) Feedback is actively sought and valued from Participants, workers, and other stakeholders.
 - c) Such feedback, even when provided anonymously, is addressed promptly in accordance with our Feedback and Complaints Policy or Incident Management Policy, as appropriate.
 - d) Regular consultations with our Participants facilitate continuous improvement in delivering best practice service.
 - e) We further our commitment to this continuous improvement through an annual survey.
 - f) This exercise is invaluable in identifying areas for improvement in the implementation of our policies and our dedication to delivering optimal service.
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6. Policy Review and Updates

This Policy is to be amended and updated according to the requirements to comply with the applicable law.

Approval Authority: Narelle Margaret Fraser

Version: 1

Approval Date: February 2025

Review Date: February 2027