

# Heart Wing Supports – Policy & Procedure Manual



## Document Control

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## **Section 1 — Introduction & Organisational Overview**

### **1.1 About Heart Wing Supports**

Heart Wing Supports is a sole-trader NDIS provider based in Western Australia, founded and operated by **Kim Henderson**. With both professional expertise and lived experience, Heart Wing Supports provides person-centred, capacity-building supports that empower people to navigate life transitions, build independence, and work toward meaningful life goals.

Heart Wing Supports specialises in the delivery of **Registration Group 0106 – Assist-Life Stage, Transition**, including:

- Life-transition planning
- Capacity building and skill development
- Psychosocial recovery-informed support
- Mentoring and coaching
- Community connection and engagement
- Crisis and adjustment support
- Linking participants to mainstream, community, and funded supports

Heart Wing Supports delivers supports in a flexible, trauma-informed, collaborative, and respectful way, ensuring each person is supported to lead their own recovery and life journey.

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### **1.2 Mission Statement**

Heart Wing Supports exists to support people with disabilities to build confidence, independence, and purpose through personalised, meaningful capacity-building supports. We aim to walk beside each participant as they grow, adapt, and make empowered choices during key life stages and transitions.

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### **1.3 Vision Statement**

To create a safe, compassionate, and empowering environment where people feel seen, heard, respected, and supported to thrive—emotionally, socially, and practically.

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### **1.4 Values**

The work of Heart Wing Supports is grounded in the following values:

- **Respect** – Every person’s culture, identity, voice, and choices are honoured.
- **Honesty & Integrity** – We act with transparency, truthfulness, and professionalism.

- **Privacy & Dignity** – Personal information is protected. Boundaries and consent matter.
  - **Growth & Development** – We embrace learning, reflection, feedback, and evidence-based practice.
  - **Best Practice & Quality** – Supports are delivered to the highest NDIS standard.
  - **Individualisation** – No two journeys are the same; supports are tailored to each unique person.
  - **Safety** – Emotional, cultural, psychological, and physical safety is foundational.
  - **Lived Experience Leadership** – Empathy, insight, and real-world understanding guide our practice.
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## 1.5 Scope of Services

Heart Wing Supports provides capacity-building supports to participants with a range of disabilities, including **psychosocial disability, autism, and acquired or traumatic brain injury**, where needs align with **Registration Group 0106 – Assist-Life Stage, Transition**.

This includes:

- Life-transition planning
- Decision-making and goal planning
- Psychosocial recovery-informed support
- Individual skill development (e.g., routines, emotional regulation strategies, confidence building)
- Coaching and mentoring
- Crisis support and planning
- Linking with community, mainstream, and supports
- Assistance to increase capacity for independence and participation
- Supports for families and carers in understanding participant goals and transitions

Heart Wing Supports **does not provide**:

- behaviour support or behaviour intervention plans
- clinical therapy
- psychological treatment
- neurorehabilitation
- cognitive therapy
- restrictive practices

Where participants require specialist clinical, behavioural, or therapeutic intervention, Heart Wing Supports supports **referral and collaboration** with appropriately registered professionals.

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## 1.6 Organisational Structure

Heart Wing Supports operates as a **sole trader**.

### Owner/Director:

**Kim Henderson** is responsible for:

- Governance & compliance
- Service delivery
- Risk management
- Record keeping
- Incident and complaint management
- Continuous improvement
- Participant intake, planning, and review
- Quality and safeguarding
- Finance and reporting
- Privacy and information security

If support workers or contractors are engaged in the future, this manual provides future-ready guidance while clearly noting that **Heart Wing Supports currently has no employees**.

A Delegation of Authority Form will be used if responsibility is temporarily handed to another person (e.g., illness, leave).

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## 1.7 Commitment to the NDIS Practice Standards

Heart Wing Supports is committed to:

- Meeting the **NDIS Practice Standards (Core Module)**
- Complying with the **NDIS Code of Conduct**
- Providing supports that uphold human rights
- Ensuring participant safety, wellbeing, and inclusion
- Continual improvement through feedback, reflection, and evidence

This manual outlines the policies, procedures, and practices that ensure supports are delivered safely, ethically, professionally, and in alignment with regulatory requirements.

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## 1.8 About This Manual

This manual outlines how Heart Wing Supports:

- Provides safe and high-quality supports
- Manages governance and compliance
- Protects participant rights and privacy
- Ensures record-keeping, risk management, and incident reporting
- Upholds NDIS Quality and Safeguarding requirements
- Continuously improves service delivery

The manual is:

- Reviewed annually by the Owner/Director
  - Updated whenever legislation, NDIS standards, or policy requirements change
  - Provided to auditors and stakeholders as required
  - A living document that grows with the organisation
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## **SECTION 2 — GOVERNANCE & OPERATIONAL MANAGEMENT**

Heart Wing Supports maintains a governance system that ensures safe, ethical, high-quality supports consistent with the NDIS Practice Standards. As a sole trader, these systems are simple, transparent, and driven by continuous improvement and accountability.

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### **2.1 Governance Policy**

#### **Purpose**

To ensure Heart Wing Supports is managed responsibly, ethically, and in accordance with the NDIS Practice Standards, legislation, and best practice requirements.

#### **Scope**

Applies to all operations of Heart Wing Supports and to any future contractors or workers engaged by the organisation.

#### **Policy Statement**

Heart Wing Supports, led by **Kim Henderson – Owner/Director**, ensures:

- Strong governance and ethical decision-making
- Clear accountability and professional conduct
- Compliance with all NDIS obligations
- Transparent systems for documentation, reporting, and continuous improvement
- Supports are provided safely, consistently, and with respect for participant rights

## **Responsibilities**

**Owner/Director (Kim Henderson)** is responsible for:

- Governance & compliance
- Risk management
- Financial management
- Service delivery quality
- Incident and complaint oversight
- Internal audits and continuous improvement
- Document control and record keeping
- Privacy and information security
- Ensuring policies remain up to date

If external workers or contractors are engaged, they must follow all policies in this manual.

## **Procedure**

- Governance systems are reviewed annually or when major changes occur.
- Records, plans, risks, and quality data are monitored monthly.
- Decisions are documented where relevant (emails, notes, registers).
- The Delegation of Authority Form is used if governance duties are temporarily transferred.

## **2.2 Document Control Policy**

### **Purpose**

To ensure all policies, procedures, and documents are current, identifiable, and controlled.

### **Policy**

Heart Wing Supports maintains a centralised digital document system (Microsoft and Google Workspace). Document control includes:

- Version numbers
- Approval dates
- Review dates

- Controlled updates
- Archived superseded versions

### **Procedure**

- The Owner/Director updates documents as required.
  - The most current version is kept in the "Policy & Compliance" folder.
  - Superseded versions are stored in an "Archive" folder and labelled clearly.
  - Only the Owner/Director may approve or release updated versions.
  - Documents relevant to participants (service agreements, consent forms) are provided to them upon request.
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## **2.3 Quality & Continuous Improvement Policy**

### **Purpose**

To ensure Heart Wing Supports continuously improves the quality, safety, and effectiveness of supports.

### **Policy**

Heart Wing Supports uses the following strategies:

- Participant feedback and surveys
- Complaint reviews
- Incident reviews
- Risk monitoring
- Self-audits
- Reflective practice
- Professional development
- Outcome tracking linked to participant goals

A simple **Plan–Do–Check–Act (PDCA)** cycle underpins quality improvements.

### **Procedure**

1. **Identify opportunities** through feedback, incidents, or self-reflection.
2. **Plan improvements**, document proposed changes.
3. **Implement changes** in practice, documentation, or processes.
4. **Review and evaluate** the impact.
5. **Record all improvements** in the Continuous Improvement Register.

The Owner/Director reviews all quality data at least quarterly.

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## 2.4 Risk Management Policy

### Purpose

To ensure risks are identified, assessed, and managed to maintain participant, worker, and organisational safety.

### Policy

Heart Wing Supports maintains a simple and effective risk management system that:

- Identifies risks
- Assesses likelihood and consequence
- Implements control measures
- Monitors and reviews risks
- Documents risks in a register

### Types of Risks Managed

- Participant safety risks
- Environmental hazards in community or home settings
- Lone worker risks
- Information security risks
- Business continuity risks
- Practice or documentation risks

### Procedure

1. **Identify** risks through observation, review, or participant disclosure.
2. **Assess** the risk using a simple low–medium–high scale.
3. **Control** the risk using elimination, substitution, engineering, administrative controls, or PPE.
4. **Record** the risk in the Risk Register.
5. **Monitor** risks regularly.
6. **Review and update** risks at least annually or when circumstances change.

Emergent or critical risks must be managed immediately.

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## 2.5 Conflict of Interest Policy

### Purpose

To ensure all decisions are transparent and free from improper influence.

## **Policy**

Heart Wing Supports manages conflicts of interest by:

- Identifying actual, potential, or perceived conflicts
- Declaring conflicts using the Conflict-of-Interest Form
- Avoiding situations where personal relationships, financial gain, or external interests could improperly influence service delivery
- Ensuring participants are aware of their right to choose any provider

## **Examples of Conflicts**

- Supporting a close family member
- Providing services to someone where a financial relationship exists
- Referring exclusively to preferred providers
- Accepting gifts over nominal value

## **Procedure**

- The Owner/Director completes a Conflict-of-Interest Declaration annually.
- Any new conflict that arises is immediately recorded and managed.
- Participants are informed of their rights if a conflict is identified.
- Where meaningful conflict cannot be removed, supports may be transitioned elsewhere.

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## **2.6 Privacy & Information Security Summary**

(A full Privacy & Confidentiality Policy appears later in the manual.)

## **Key Commitments**

- Comply with the Privacy Act 1988 and NDIS requirements
- Protect participant information at all times
- Obtain informed consent before collecting or sharing information
- Store records securely and retain them according to legislation
- Only access records necessary for service delivery
- Report and document any suspected data breach

## **Digital Security Measures**

- Password-protected devices
- Cloud storage with appropriate encryption
- Limited access only to the Owner/Director

- Regular password updates
  - Locked devices when unattended
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## **2.7 Internal Audit & Review Schedule**

Heart Wing Supports conducts internal audits on the following:

### **Annually**

- Policy & procedure review
- Risk Register review
- Incident review summary
- Complaints and feedback analysis
- Participant outcome and goal review
- Privacy and security audit
- Service delivery model review

### **Quarterly**

- File audits
- Quality review
- Risk scan

### **After Any Incident**

- Immediate review
- Corrective action
- Improvement entry in CI Register

A simple **Internal Audit Checklist** will be included in the appendices.

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## **SECTION 3 – PARTICIPANT RIGHTS & RESPONSIBILITIES**

This section is written to meet:

- **NDIS Practice Standards – Core Module (Rights & Responsibilities)**
- **Human Rights Frameworks**
- **Sole Trader governance structure**

- **Participant groups (including psychosocial disability and children 0–16)**
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## **SECTION 3 — PARTICIPANT RIGHTS & RESPONSIBILITIES**

Heart Wing Supports is committed to upholding the rights, dignity, privacy, and safety of all participants. Participants have the right to receive supports that respect their identity, culture, abilities, and preferences. They are partners in planning, decision-making, and reviewing their supports.

This section outlines the rights of participants, the responsibilities of Heart Wing Supports, and the expectations around working respectfully together.

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### **3.1 Participant Rights Charter**

All participants receiving supports from Heart Wing Supports have the right to:

#### **Respect & Dignity**

- Be treated with respect, kindness, and fairness
- Have their personal values, identity, culture, beliefs, and relationships honoured
- Make choices about their life, goals, and supports

#### **Self-Determination**

- Be involved in all decisions affecting their life
- Direct how their supports are delivered
- Choose and change providers at any time

#### **Safety**

- Receive supports in an environment that is emotionally, culturally, psychologically, and physically safe
- Be free from neglect, violence, exploitation, bullying, discrimination, and abuse
- Have concerns taken seriously and acted on promptly

#### **Privacy & Confidentiality**

- Have their personal information protected
- Access their own information upon request
- Provide consent before any information is shared

#### **Quality Supports**

- Receive competent, ethical, and evidence-informed support
- Expect reliability, professionalism, and transparency
- Receive supports that reflect their goals, preferences, and needs

## **Communication**

Heart Wing Supports adapts communication to support participants with:

- autism
- brain injury
- cognitive or processing differences

This may include:

- simplified language
- visual supports
- repetition and clarification
- written summaries
- flexible pacing

Participants are supported to understand information in a way that works for them and to make informed choices at their own pace.

## **Feedback & Complaints**

- Give feedback without fear of negative consequences
- Make a complaint at any time
- Have complaints handled respectfully, fairly, and promptly
- Access advocacy support for complaints or appeals

## **Cultural Rights**

- Have supports delivered in a culturally safe, inclusive way
- Identify cultural priorities such as family involvement, connections to community, language, and traditions

## **Child & Young Person Rights**

(For participants aged 0–16)

- Be safe and protected
- Have age-appropriate supports
- Have their voice heard, even through developmentally appropriate methods
- Have carers and families involved appropriately in planning and decision-making

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## **3.2 Responsibilities of Heart Wing Supports**

Heart Wing Supports (Kim Henderson – Owner/Director) commits to:

### **Delivering Safe, Respectful Supports**

- Acting with care, skill, and professionalism

- Maintaining clear boundaries
- Ensuring supports align with NDIS Practice Standards

### **Supporting Participant Autonomy**

- Encouraging choice and control
- Providing information for informed decision-making
- Supporting dignity of risk

### **Protecting Rights & Safety**

- Acting immediately if safety concerns arise
- Following incident and reporting requirements
- Creating environments free from discrimination and harm

### **Protecting Privacy & Confidentiality**

- Storing information securely
- Sharing information only with consent or where legally required

### **Providing Transparent Information**

- Explaining service agreements, costs, and support options clearly
- Providing accessible and understandable information

### **Listening & Responding to Feedback**

- Welcoming feedback, compliments, and complaints
- Resolving concerns respectfully and without delay
- Using feedback to improve service delivery

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### **3.3 Participant Responsibilities**

While participants are not “obligated” to do anything, the following help ensure a safe, respectful, and effective support environment:

Participants (and where relevant, families/carers) are encouraged to:

- Treat workers with respect
- Communicate openly about needs, preferences, and concerns
- Provide accurate information to support effective planning
- Notify Heart Wing Supports if appointments need to be changed
- Participate in planning and review processes
- Respect privacy and boundaries

These expectations are communicated in the **Service Agreement** and at intake.

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### **3.4 Supported Decision-Making & Dignity of Risk**

Heart Wing Supports, supports people to make their own decisions, even where support is needed to:

- Understand information
- Weigh options
- Consider risks and consequences
- Communicate preferences

#### **Dignity of Risk Principles**

Participants have the right to:

- Try new things
- Make mistakes
- Learn through experience

Heart Wing Supports will:

- Identify risks collaboratively
- Put measures in place to reduce harm
- Document agreed strategies in the Support Plan
- Balance autonomy with safety obligations

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### **3.5 Cultural Safety & Inclusion**

Heart Wing Supports is committed to cultural safety for:

- First Nations participants
- CALD communities
- LGBTQIA+ people
- People with complex trauma histories
- People with psychosocial disability

Supports will:

- Honour cultural identity
- Promote inclusion
- Avoid assumptions and bias
- Use culturally respectful communication
- Seek cultural consultation where required

### **3.6 Child Safety & Youth Safeguarding**

Heart Wing Supports works in alignment with:

- National Child Safe Principles
- WA Child Safety frameworks
- NDIS Practice Standards

Commitments include:

- Prioritising the safety of children and young people
- Listening to young people's voices and preferences
- Ensuring environments are safe and supportive
- Reporting any concerns immediately
- Engaging families/carers meaningfully

No worker (including contractors in future) may work with children without:

- An NDIS Worker Screening Check; or
  - Valid Working With Children Check (WA)
- 

### **3.7 Informed Consent**

Consent is required for:

- Collecting or sharing personal information
- Support planning
- Involving other providers
- Transport
- Photography or video
- Any significant change to supports

Consent must be:

- Voluntary
- Informed
- Specific
- Documented

Participants may withdraw consent at any time.

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### **3.8 Advocacy**

Participants are supported to access an advocate at any time.

Information about advocacy services is provided during intake and in the Service Agreement.

If a participant is experiencing conflict with Heart Wing Supports, they will be referred to independent advocacy if desired.

## **SECTION 4 — SERVICE DELIVERY (0106 Life Stage Transition)**

Heart Wing Supports recognises that participants with autism and brain injury may experience differences in:

- communication
- sensory processing
- executive functioning
- emotional regulation
- fatigue, memory, or cognitive load

Supports are adapted by:

- using clear, structured communication
- pacing sessions appropriately
- breaking tasks into manageable steps
- supporting routine development and predictability
- respecting sensory needs and preferences
- allowing additional processing time

Supports remain **capacity-building and non-clinical** and are delivered within the provider's scope and competence.

Where a participant has a Behaviour Support Plan or clinical recommendations, Heart Wing Supports:

- works **alongside** those plans (with consent)
- does not implement or modify behaviour interventions
- follows guidance provided by the relevant practitioner

This includes:

- Intake
- Assessment
- Service agreements
- Planning & review
- Psychosocial recovery-informed practice

- Capacity building
- Community connection
- Crisis support
- Transition & exit
- Continuity of supports

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## **SECTION 4 – SERVICE DELIVERY (0106 LIFE STAGE TRANSITION)**

### **4.1 Overview of Service Delivery Model**

Heart Wing Supports provides supports under **Registration Group 0106 – Assist-Life Stage, Transition**, which focuses on helping participants build capacity, adapt to change, navigate systems, and work towards meaningful life goals. Supports are tailored, trauma-informed, recovery-oriented, and centred around participant choice and control.

Heart Wing Supports **does not** provide personal care, clinical services, medical tasks, behaviour support, or high-risk supports.

The service delivery process includes:

1. **Service Access & Intake**
2. **Assessment & Understanding Needs**
3. **Support Planning**
4. **Implementation of Supports**
5. **Review & Reflection**
6. **Transition or Exit (if applicable)**

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### **4.2 Service Access Policy**

#### **Purpose**

To ensure participants can easily access supports and understand service options.

#### **Policy**

Heart Wing Supports accepts referrals from:

- Participants or families
- Support Coordinators

- Plan Managers
- Community organisations
- Allied health providers

No participant will be refused supports on the basis of disability type, cultural identity, gender, age, or background. Supports may only be declined where:

- The participant's needs fall outside the 0106 registration scope
- The service has no capacity at that time
- There are safety risks that cannot be mitigated

### **Procedure – Intake Steps**

#### **1. Initial Contact**

- Participant receives service information.
- Availability and suitability are discussed.

#### **2. Eligibility & Scope Check**

- Confirm that supports requested fall within 0106 services.
- Confirm that risks are manageable.

#### **3. Intake Form & Consent**

- Collect basic information.
- Obtain consent for information collection and sharing.

#### **4. Service Agreement**

- Costs, responsibilities, cancellation rules, and rights explained.
- Participant signs agreement before supports commence.

#### **5. Initial Meeting/Assessment**

- Participant needs, goals, risks, and preferences explored.

### **4.3 Assessment & Understanding Needs**

Heart Wing Supports conducts an initial assessment that focuses on:

- Participant goals and aspirations
- Functional needs and current challenges
- Strengths and personal resources
- Natural supports (family, community)
- Environmental or contextual barriers
- Risks (safety, psychosocial, environmental)
- Support preferences and cultural considerations

- Communication needs

### Tools Used

- Intake & Consent Form
- Support Plan Template
- Risk Assessment (if needed)

### Principles

- Trauma-informed
- Culturally respectful
- Led by participant choice
- Safe and flexible
- Developmentally appropriate (for children and young people)

## 4.4 Support Planning Policy

### Purpose

To develop an individualised Support Plan that reflects the participant's goals, needs, and preferences.

### Policy

The Support Plan:

- Is developed collaboratively with the participant
- Links directly to their NDIS goals and desired outcomes
- Identifies strengths and capacity-building opportunities
- Outlines strategies and supports to be delivered
- Considers dignity of risk
- Identifies early signs of distress and preferred response strategies
- Includes review timeframes

### Procedure

#### 1. Gather Information

- Participant goals
- Strengths
- Challenges
- Support contexts

#### 2. Create Support Plan

- Document goals and planned outcomes

- Outline strategies and supports
- Identify risks and mitigation strategies

### 3. Review with Participant

- Ensure the plan reflects their preferences
- Adjust based on feedback

### 4. Finalise & Sign Off

- Provide a copy to the participant
- Store securely in records

## 4.5 Psychosocial Recovery-Informed Practice

Many participants supported by Heart Wing Supports experience psychosocial disability or mental health challenges.

Support delivery reflects:

### Trauma-Informed Principles

- Safety
- Trust and transparency
- Collaboration
- Empowerment
- Choice
- Cultural sensitivity

### Recovery-Oriented Principles

- Hope and possibility
- Self-agency and empowerment
- Relationship-based support
- Strengths-focused approaches
- Supporting identity, meaning, and purpose

### Capacity-Building Focus

Supports help participants:

- Build emotional regulation skills
- Increase independence
- Strengthen routines and daily life organisation
- Navigate services and the NDIS system
- Build confidence and resilience

- Improve social connection and participation
- 

## **4.6 Implementing Supports**

Supports may include:

### **Planning & Coordination Activities**

- Clarifying goals and priorities
- Developing life transition plans
- Problem-solving barriers
- Assisting with service navigation
- Supporting communication with providers

### **Skill Development Activities**

- Routine building
- Time management skills
- Confidence and self-esteem building
- Community engagement
- Decision-making skills
- Coping strategies

### **Linking Supports**

- Referrals to community, mainstream, and funded services
- Helping participants connect with local opportunities
- Supporting families to understand systems and transitions

### **Mentoring & Coaching**

- Motivational support
- Emotional support
- Building hope and capability
- Celebrating progress

### **Crisis & Adjustment Support**

- Helping participants navigate significant change
- Supporting safety planning when needed
- Coordinating short-term responses in collaboration with relevant supports

All supports are:

- Documented in progress notes

- Delivered with professionalism, empathy, and respect
  - Adapted to individual preference and need
- 

## **4.7 Progress Notes & Documentation**

Progress notes must:

- Be factual and objective
- Reflect support delivered
- Address progress toward goals
- Identify risks or concerns
- Use participant-preferred language
- Be completed on the same day as service delivery

Records are stored securely and retained according to legal requirements.

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## **4.8 Service Reviews**

### **Purpose**

To ensure supports remain effective, relevant, and aligned with participant goals.

### **Review Timing**

- At least every **3–6 months**, or
- When goals or needs change, or
- At participant request

### **Review Process**

- Reflect on progress, strengths, and challenges
  - Identify what is working and what needs adjustment
  - Update goals, strategies, or supports as needed
  - Document outcomes in the Review Template
- 

## **4.9 Transition & Exit Policy**

### **Exit may occur when:**

- Goals are achieved
- Participant changes provider
- Needs fall outside 0106 supports

- Safety cannot be maintained
- Participant chooses to end supports

### **Procedure**

1. Discuss transition with participant
  2. Provide appropriate notice
  3. Offer referrals and warm handover
  4. Provide final record summary on request
  5. Close file and archive securely
- 

### **4.10 Continuity of Supports**

Heart Wing Supports ensures service continuity by:

- Notifying participants as early as possible of availability changes
  - Offering alternative times or temporary adjustments
  - Using a Delegation of Authority if the Owner/Director is temporarily unavailable
  - Maintaining clear communication during transitions or disruptions
- 

### **4.11 Communication & Accessibility**

Supports are delivered in a way that respects how each participant:

- Understands information
- Gives feedback
- Expresses needs
- Makes decisions

Communication methods may include:

- Plain English
  - Visual supports
  - Text-based communication
  - Cultural or family supports
  - Advocates
  - Interpreters (if required)
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**Document Control****Version:** 1.0**Approved By:** Kim Henderson**Approval Date:** 29/12/2025**Review date:** 29/12/2026**SECTION 5 — FEEDBACK, COMPLAINTS & INCIDENT MANAGEMENT****5.1 Feedback and Complaints Policy****Purpose**

To ensure participants feel safe and supported to provide feedback or make complaints without fear of negative consequences.

**Policy**

Heart Wing Supports values feedback as an essential part of continuous improvement. Participants, families, carers, advocates, and stakeholders are encouraged to provide compliments, suggestions, and complaints at any time.

Heart Wing Supports ensures:

- Feedback is welcomed and easy to provide
- Complaints are managed fairly, respectfully, and promptly
- Participants are informed of their rights
- No-one is disadvantaged for speaking up
- Participants may use an advocate at any stage
- Records of complaints are kept securely
- Complaints are used to improve services

**How Participants Can Give Feedback or Make a Complaint**

Participants may provide feedback or lodge a complaint via:

- Phone
- Email
- In person
- Written form
- Feedback and Complaint Form
- Through an advocate or nominated representative

Heart Wing Supports will assist participants to express concerns, including providing accessible communication formats or connecting them with advocacy services.

## **External Complaint Options**

Participants may contact:

### **NDIS Quality and Safeguards Commission**

Phone: 1800 035 544

Website: [www.ndiscommission.gov.au](http://www.ndiscommission.gov.au)

## **Procedure – Handling Complaints**

### **1. Receive**

- Acknowledge the complaint within 2 business days.
- Offer support or advocacy if needed.

### **2. Record**

- Document in the Complaints Register.
- Store securely according to privacy requirements.

### **3. Review and Investigate**

- Identify issues raised.
- Gather relevant information.
- Assess any immediate risks.

### **4. Respond**

- Provide an outcome within 14 days where possible.
- Explain decisions clearly and respectfully.
- Offer solutions, adjustments, or next steps.

### **5. Resolve or Escalate**

- If unresolved, support participant to escalate internally or externally.
- Encourage advocacy involvement.

### **6. Improve**

- Add learnings to the Continuous Improvement Register.
- Review whether policies or practices require updating.

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## **5.2 Incident Management Policy**

### **Purpose**

To ensure all incidents are responded to promptly, recorded accurately, and used to improve participant safety.

## **Definition of an Incident**

Any event that:

- Causes harm or risk of harm
- Involves injury, illness, or distress
- Impacts participant safety, privacy, or wellbeing
- Occurs during service delivery or is related to supports

## **Policy**

Heart Wing Supports maintains an incident management system that includes:

- Timely response
- Clear documentation
- Appropriate escalation
- Risk assessment
- Review and improvement

## **Procedure – Managing Incidents**

### **1. Respond Immediately**

- Ensure the participant is safe.
- Provide support, reassurance, or first aid (if within capacity).
- Call emergency services if required.

### **2. Record the Incident**

- Complete an Incident Report on the same day.
- Document facts only, not assumptions.
- File securely in participant record and Incident Register.

### **3. Notify Relevant Parties**

- Inform the participant and, where relevant, their nominee or carer.
- Seek consent for additional notifications unless unsafe.

### **4. Review and Assess**

- Identify contributing factors.
- Assess risk of recurrence.
- Consider environmental, social, emotional, or systemic factors.

### **5. Implement Corrective Actions**

- Adjust supports, safety strategies, or communication approaches.

- Update the Risk Register if required.

## 6. Follow-Up

- Check in with participant after the incident.
- Document follow-up steps.

## 7. Continuous Improvement

- Add learnings to the CI Register.
- Update policies or procedures if required.

### 5.3 NDIS Reportable Incidents Policy

Heart Wing Supports complies with the NDIS Commission's requirements for notifying **Reportable Incidents**.

Reportable incidents include:

- Death of a participant
- Serious injury
- Abuse or neglect
- Unlawful physical or sexual contact
- Sexual misconduct
- Use of restrictive practices (not applicable to this provider)

### Procedure – Reportable Incidents

#### 1. Immediate Safety Response

- Ensure participant safety
- Contact emergency services if required

#### 2. Notify the NDIS Commission

- Within *24 hours* for:
  - Death
  - Serious injury
  - Abuse or sexual misconduct
- Within *5 business days* for other notifiable matters

#### 3. Provide Detailed Follow-Up Report

- Within *5 business days* (or within timeframe required by the Commission)

#### 4. Participate in Any Required Investigations

- Provide records and information as requested

#### 5. Document Actions Taken

- File in Incident Register

- Record in participant file

## 6. Implement Improvements

- Review service delivery
  - Update policies or safety strategies
- 

### 5.4 Managing Risks Identified Through Incidents

If an incident reveals new or heightened risks:

- Update the Risk Register
  - Reassess the Support Plan
  - Review lone worker safety practices
  - Adjust communication methods
  - Provide additional supports or referrals
  - Document updates clearly
- 

### 5.5 Open Disclosure

Heart Wing Supports follows open disclosure principles:

- Be honest
  - Acknowledge what occurred
  - Support the participant
  - Explain what will be done to prevent recurrence
  - Document all communication
- 

### 5.6 Access to Advocacy in Complaints or Incidents

Participants are encouraged to involve advocacy services at any time, especially during:

- Complaints
- Incident reviews
- Service changes or disputes

A list of advocacy services is provided at intake and included in the Service Agreement.

---

### 5.7 Record Keeping for Complaints & Incidents

Records include:

- Complaint Forms

- Complaint Register
- Incident Reports
- Incident Register
- Corrective Action Records
- Continuous Improvement entries

Records are kept securely for no less than 7 years.

---

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**SECTION 6 – SAFETY, RISK & WORK HEALTH (SOLE TRADER VERSION)**

This includes:

- WHS responsibilities
- Lone worker safety
- Home and community visit safety
- Environmental scanning
- Emergency response (simple version)
- Business continuity

**SECTION 6 — SAFETY, RISK & WORK HEALTH (SOLE TRADER VERSION)****6.1 Work Health & Safety (WHS) Policy****Purpose**

To ensure Heart Wing Supports provides services in a way that protects the safety and wellbeing of participants and the provider (sole trader).

**Policy**

Heart Wing Supports ensures:

- Supports are delivered safely, respectfully, and professionally
- Environments are checked for risks before and during service delivery
- Risks are documented and managed appropriately
- Emergency situations are responded to promptly
- The provider works within role boundaries and training

- The provider maintains personal wellbeing, safe workload, and safe travel practices

### **Responsibilities — Sole Trader**

**Kim Henderson – Owner/Director** is responsible for:

- Assessing and managing risks in all work environments
- Ensuring her own fitness for work
- Managing fatigue, stress, and workload
- Using safe practices during community work
- Maintaining safe use of personal vehicle
- Reporting and documenting hazards, near misses, and incidents
- Reviewing WHS practices annually
- Updating Risk Register as needed

### **6.2 Lone Worker Safety**

As a sole provider delivering supports in homes and community settings, managing lone worker risks is essential.

Additional risks that may be considered for participants with autism or brain injury include:

- cognitive fatigue
- sensory overload
- difficulty with change or unpredictability
- communication misunderstandings
- reduced insight during periods of stress

These risks are managed through:

- collaborative planning
- clear routines and expectations
- flexible delivery
- early identification of distress
- referral to appropriate professionals where needed

#### **Risks may include:**

- Working alone with unfamiliar individuals
- Unpredictable or distressed participant behaviour
- Travelling between locations
- Isolated environments
- Environmental hazards (animals, unsafe housing, neighbourhood risks)

## **Procedures to Maintain Safety**

### **1. Pre-Visit Risk Assessment**

- Consider history, environment, behaviours of concern, known triggers.
- Decline or reschedule if risks cannot be managed safely.

### **2. Safety Check-In Process**

- Let a nominated trusted contact know your schedule (optional but recommended).
- Check in/out during higher-risk visits.

### **3. Environment Scan on Arrival**

- Assess for hazards (weapons, unsafe flooring, clutter, aggression, animals).
- Leave immediately if unsafe.

### **4. Positioning for Safety**

- Keep clear exit path.
- Maintain personal space.
- Sit closest to the exit.

### **5. Managing Escalation**

- Use de-escalation techniques.
- End the session if safety risk increases.
- Follow incident management procedures.

### **6. Emergency Situations**

- Call 000 if urgent.
- Leave the environment if unsure or unsafe.
- Document incident after the event.

### **7. Record Keeping**

- Document any safety concerns in participant notes.
- Update Risk Register for ongoing risks.

---

## **6.3 Home & Community Environment Safety**

Before and during support delivery, Heart Wing Supports will:

**Check for environmental hazards such as:**

- Slippery or obstructed walkways
- Unsafe animals
- Drug or alcohol use in the environment

- Aggressive or unpredictable people present
- Poor lighting or heat extremes
- Neighbourhood safety considerations

**If any hazard is identified:**

- Discuss concerns respectfully with participant
- Adapt environment (where possible)
- Move location or end session if necessary
- Document issue and next steps

---

## **6.4 Personal Safety & Professional Boundaries**

Safety also includes emotional, psychological, and relational boundaries.

### **Provider Responsibilities**

- Maintain emotional regulation and trauma-informed practice
- Avoid dual relationships, over-involvement, or role confusion
- Do not provide services beyond scope (e.g., personal care, clinical tasks)
- Decline invitations to unsafe environments
- Maintain appropriate communication methods (no late-night messaging unless crisis-related and agreed upon)
- Use professional judgement regarding session content and tone

### **Participants' Responsibilities**

(Supported through Service Agreement and conversation)

- Treat the provider with respect
- Not engage in harassment, threats, or unsafe behaviours
- Maintain a safe environment during visits
- Respect boundaries

---

## **6.5 Travel Safety & Vehicle Use**

Because you use your own vehicle for community visits:

### **Policy**

- Vehicle must be roadworthy and legally registered
- Provider must hold an appropriate licence
- Phone must not be used while driving
- Fatigue must be managed—supports rescheduled if unsafe to travel

- Routes chosen to maximise safety
- Participants must be transported only if:
  - It is safe
  - Consent is given
  - It is part of the Service Agreement
  - It fits 0106 supports

## **Accidents**

If an accident occurs during service delivery:

- Follow emergency procedures
- Document incident
- Notify participant and insurer as required

---

## **6.6 Managing Participant Behaviour**

Heart Wing Supports does **not** use or authorise restrictive practices.

### **If a participant becomes distressed, escalated, or unsafe:**

- Use trauma-informed de-escalation
- Maintain calm tone and safe body positioning
- Offer breaks and choices
- End the session if needed
- Leave the environment if safety deteriorates
- Follow incident reporting procedures

### **If behaviour presents ongoing risk:**

- Update Support Plan and Risk Register
- Consult with participant and/or supports
- Consider referrals to clinical supports if needed
- Adjust service delivery or location
- Consider exit if risks cannot be safely mitigated (with warm handover)

---

## **6.7 Emergency Response Procedures**

### **In an emergency:**

1. **Ensure immediate safety**

2. **Call emergency services (000) when required**
3. **Provide essential information only**
4. **Follow instructions from emergency responders**
5. **Document the incident**
6. **Notify relevant parties (with consent unless unsafe)**
7. **Debrief and review practices**

#### **Examples of Emergencies**

- Health medical crisis
- Fire or environmental hazard
- Serious injury
- Threat of violence
- Missing participant
- Car accident
- Mental health emergency

---

#### **6.8 Mental Health Crisis Response**

If a participant is experiencing a mental health crisis:

- Remain calm
- Use de-escalation strategies
- Support grounding techniques (if appropriate)
- Contact a crisis service or 000 if risk is imminent
- Encourage use of participant's Crisis Plan (if they have one)
- Do not provide clinical interventions
- Document the situation and follow incident procedures

Emergency mental health contacts may include:

- **Lifeline: 13 11 14**
- **Beyond Blue: 1300 22 4636**
- **WA Mental Health Emergency Response Line (MHERL)**
- **000 for immediate danger**

---

#### **6.9 Business Continuity Planning**

Heart Wing Supports maintains continuity of supports by:

- Giving participants early notice of illness or unavailability
- Offering rescheduling options
- Providing referrals for temporary support if needed
- Using a Delegation of Authority (future-ready) if longer-term absence occurs
- Maintaining up-to-date contact lists
- Storing essential information securely in the cloud

### **Examples of Disruption Events**

- Illness
- Accident
- Significant personal emergency
- Natural disaster
- Technology failure

### **Actions**

- Notify participants promptly
  - Prioritise participants with higher vulnerability
  - Document service interruptions
  - Restore normal operations as soon as safe
- 

### **6.10 Safety Document Tools (Appendices)**

The following templates will support this section:

- Risk Register
  - WHS Hazard Report Form
  - Incident Report Form
  - Lone Worker Check-In Sheet (optional)
  - Emergency Contact List
  - Business Continuity Plan template
- 

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## SECTION 7 — HUMAN RESOURCES (FUTURE-READY, SOLE TRADER VERSION)

- I currently have **0 workers**
- I may engage contractors or staff in future

## SECTION 7 — HUMAN RESOURCES (FUTURE-READY SOLE TRADER VERSION)

### 7.1 Overview of Human Resources Policy

#### Purpose

To ensure that any future worker or contractor engaged by Heart Wing Supports is safe, competent, suitable, and aligned with NDIS Practice Standards.

#### Current Workforce Status

Heart Wing Supports is a **sole trader**.

At the time of this manual's creation:

- **There are no employees.**
- **All supports are delivered solely by Kim Henderson – Owner/Director.**

This policy outlines the systems that *would* be used if workers or contractors are engaged in future.

#### Guiding Principles

- Safety
- Competency
- Integrity
- Participant rights
- Compliance with NDIS Code of Conduct

---

### 7.2 Worker Screening Requirements

Heart Wing Supports follows the NDIS Worker Screening requirements.

#### Current Status

- Kim Henderson holds a valid NDIS Worker Screening Check.

#### Future Requirement

If workers or contractors are engaged, they must hold:

- A valid **NDIS Worker Screening Clearance**, and
- A valid **Working With Children Check (WA)** if engaging with participants under 18, and
- Any profession-specific clearances if relevant (e.g., police check if required).

#### Procedure If Hiring in Future

- Screening clearance must be verified before commencing work.
  - Screening details will be recorded in the Worker Screening Register.
  - Screening must remain current at all times.
- 

## **7.3 Recruitment & Engagement Policy (Future-Ready)**

### **Purpose**

To ensure any worker or contractor engaged is suitable, qualified, and appropriate for disability support work.

**If recruitment occurs, Heart Wing Supports will:**

- 1. Define the role**
  - Duties, boundaries, required skills, and competencies.
- 2. Screen applicants**
  - Verify identity
  - Check qualifications (if applicable)
  - Confirm NDIS Worker Screening clearance
  - Conduct reference checks
- 3. Confirm alignment with organisational values**
  - Empathy
  - Respect
  - Trauma-informed practice
  - Professionalism
- 4. Provide a Service Agreement if contracting a provider**
  - Responsibilities
  - Insurance requirements
  - Compliance expectations

No worker or contractor will commence until all checks are completed.

---

## **7.4 Induction & Training**

### **Induction (for future workers)**

Any future worker or contractor must complete an induction including:

- NDIS Code of Conduct
- Participant rights and safety
- Complaint and incident management

- Privacy and confidentiality
- Trauma-informed practice
- Lone worker safety (if relevant)
- Organisational values
- Policies and procedures overview

## **Training**

Workers must:

- Complete the **NDIS Worker Orientation: Quality, Safety and You** module
- Maintain skills relevant to the role
- Participate in supervision and support

## **Record Keeping**

All induction and training activities will be recorded in the Training Register.

---

## **7.5 Supervision & Support**

### **Current Status**

As a sole trader, Kim Henderson is responsible for:

- Self-reflection
- Maintaining competency
- Engaging in ongoing professional development

### **If workers are engaged in future:**

Supervision will be provided through:

- Scheduled check-ins
- Reflective practice sessions
- Review of documentation
- Performance discussions

Supervision models may be:

- 1:1 meetings
- External professional supervision (e.g., for psychosocial skill development)
- Peer supervision if engaging contractors

---

## **7.6 Performance & Conduct Management**

### **Purpose**

To ensure safe, ethical, and competent service delivery.

### **Future Expectations**

Workers or contractors must:

- Follow all Heart Wing Supports policies
- Maintain respectful communication
- Uphold participant rights
- Maintain professional boundaries
- Comply with the NDIS Code of Conduct

### **If concerns arise:**

- Concerns will be documented
- Worker will be informed and given opportunity to respond
- A support plan may be developed
- If serious, work may be suspended or terminated
- Reportable misconduct will be escalated to the NDIS Commission if required

---

### **7.7 Professional Boundaries (Applies to Kim Henderson Today)**

To maintain safety and professionalism:

- Relationships remain professional, not personal
- Social media boundaries are maintained
- No inappropriate gifts, loans, or financial interactions
- No offering services outside the scope of 0106 supports
- No personal relationships with participants or families
- Privacy and consent must always be upheld

---

### **7.8 Self-Care & Capacity to Work (Sole Trader Focus)**

Because you are the only worker, maintaining your wellbeing is essential to ensure participant safety.

### **Commitments**

- Monitor your own mental health and fatigue levels
- Reschedule supports if unwell, unsafe to drive, or unable to perform duties
- Seek professional supervision as needed
- Use reflective practice to maintain quality and self-awareness
- Maintain work/life boundaries to reduce burnout

This aligns with NDIS requirements for provider suitability.

---

## **7.9 Insurance Requirements**

### **Current Requirements (Sole Trader)**

Heart Wing Supports maintains:

- Public Liability Insurance
- Professional Indemnity Insurance

### **Future Workers**

- Contractors must provide proof of their own insurances
  - Employees (if ever engaged) will be covered under the business's policies
- 

## **7.10 Record Keeping for HR (Future Ready)**

Heart Wing Supports maintains:

- Worker Screening Register
- Training Register
- Induction Records
- Contractor Agreements

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## **SECTION 8 — PRIVACY & CONFIDENTIALITY**

This Privacy & Confidentiality section is **essential** as I work with vulnerable people, psychosocial disability, and minors. The version below is for a **sole trader**, and compliant with:

- Privacy Act 1988 (Cth)
  - Australian Privacy Principles (APPs)
  - NDIS Practice Standards
  - NDIS Code of Conduct
- 

## **SECTION 8 — PRIVACY & CONFIDENTIALITY**

## **8.1 Purpose**

To ensure all personal information collected by Heart Wing Supports is handled lawfully, securely, and respectfully, in accordance with the Privacy Act 1988 and NDIS requirements.

---

## **8.2 Scope**

This policy applies to:

- All participant information
  - Family/carer information
  - Worker information (currently only applies to Kim Henderson)
  - Any future contractors or staff
  - All records, whether digital, written, verbal, or photographic
- 

## **8.3 Policy Statement**

Heart Wing Supports is committed to protecting privacy by:

- Collecting only the information necessary for service delivery
  - Using information only for its intended purpose
  - Securing information from loss, misuse, or unauthorised access
  - Sharing information only with informed consent or when legally required
  - Allowing participants to access and correct their information
  - Clearly explaining rights and responsibilities regarding privacy
- 

## **8.4 What Information Is Collected**

Heart Wing Supports may collect:

### **Personal information**

- Name, DOB, address, phone number
- Emergency contacts
- Cultural identity
- Communication preferences

### **NDIS-related information**

- NDIS number
- Goals and support needs
- Service agreements
- Relevant reports or assessments

## **Health or sensitive information**

- Mental health history (relevant to support delivery)
- Risks and safety concerns
- Information disclosed during sessions
- Behavioural triggers or coping strategies

## **Records created during support**

- Progress notes
- Contact records
- Incident reports
- Outcome and review notes

Only information relevant to delivering safe, effective supports is collected.

---

## **8.5 How Information Is Collected**

Information may be collected through:

- Intake forms
- Conversations during sessions
- Emails, texts, or calls
- Referrals from other providers (with consent)
- Observations during service delivery

---

## **8.6 Why Information Is Collected**

To:

- Provide safe and appropriate supports
- Understand goals, needs, and preferences
- Manage safety risks
- Develop and review Support Plans
- Meet NDIS quality, safeguarding, and audit requirements
- Contact families, carers, or emergency services if needed
- Maintain accurate records

## 8.7 Consent

Heart Wing Supports obtains **informed consent** for:

- Collecting information
- Sharing information with family, other providers, or supports
- Communication methods (SMS, email, etc.)
- Transport
- Use of photos (rarely required)
- Contacting third parties

Consent must be:

- Voluntary
- Informed
- Specific
- Documented
- Able to be withdrawn at any time

Consent forms are provided at intake.

---

## 8.8 Disclosure of Information

Information will **only** be shared:

### With consent

- Other providers
- Support coordinators
- Family/carers (if approved)
- Medical services
- Plan managers
- Advocates

### Without consent only when legally required

- To prevent a serious threat to life, health, or safety
- If required by law (e.g., subpoena, court order)
- When reporting a death, serious incident, or abuse
- Under mandatory NDIS Reportable Incidents obligations

Participants are informed whenever possible before information is shared without consent.

---

## **8.9 How Information Is Stored**

All information is stored securely using:

### **Digital Security**

- Encrypted cloud storage (Google Workspace / Microsoft)
- Password-protected devices
- MFA (multi-factor authentication) where available
- Regular password updates
- Locked devices when unattended

### **Physical Security**

- Minimal paper files
- Any hard copies stored in a locked cabinet at home office (if used)

### **Transport of Information**

- Files not left in vehicles unattended
- Devices kept on person where safe

Only the Owner/Director (Kim Henderson) has access to participant information.

---

## **8.10 Retention & Disposal of Information**

Heart Wing Supports retains records for:

- **7 years** after service delivery ends for adults
- **7 years after a child turns 18** (as required)

After the retention period:

- Digital files are permanently deleted
  - Paper files are securely shredded
- 

## **8.11 Participant Access to Information**

Participants have the right to:

- Access their information
- Request corrections
- Ask how their info is used
- Receive a copy of their file (within reasonable timeframe)

Requests must be responded to within **30 days**.

---

## **8.12 Privacy Breaches**

A privacy breach includes:

- Lost records
- Unauthorised access
- Accidental disclosure
- Cyber incident

### **Procedure**

1. **Contain the breach immediately**
  2. **Assess what occurred**
  3. **Notify affected person(s)**
  4. **Report to OAIC (Office of the Australian Information Commissioner) if required**
  5. **Document the breach**
  6. **Implement improvements to prevent recurrence**
- 

## **8.13 Confidentiality in Practice**

During service delivery, Heart Wing Supports ensures:

- Private conversations occur discreetly
  - Sensitive information is handled respectfully
  - Notes focus on facts, not opinions
  - Information about third parties is minimised
  - Personal information is not discussed in public spaces
  - Phones, diaries, and devices are locked when not in use
- 

## **8.14 Communication & Technology Safety**

Participants choose how communication occurs.

When communicating via SMS, phone, email, or video:

- No sensitive information is sent via SMS unless agreed
  - Email communication avoids unnecessary detail
  - Video calls occur in a private space
  - Photos or recordings require explicit consent
-

## **8.15 Privacy Complaints**

Participants may make a privacy complaint directly to:

Heart Wing Supports

OR

Office of the Australian Information Commissioner (OAIC)

oaic.gov.au

All privacy complaints follow the Complaints Management Procedure.

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## **SECTION 9 — RECORD KEEPING & INFORMATION MANAGEMENT**

This will include:

- What records must be kept
- How long
- Format
- Access control
- Documentation standards
- File audit processes
- Progress note requirements

This version is tailored for **a sole trader, 0106 services, and psychosocial capacity building work.**

## **SECTION 9 — RECORD KEEPING & INFORMATION MANAGEMENT**

### **9.1 Purpose**

To ensure all organisational and participant records are created, stored, managed, and disposed of in a lawful, secure, and consistent way.

Heart Wing Supports maintains records to:

- Provide safe and high-quality supports
  - Demonstrate compliance with NDIS Practice Standards
  - Meet legal, insurance, and audit obligations
  - Support continuous improvement
-

## 9.2 Scope

This policy applies to:

- All participant records
  - Organisational records (complaints, incidents, risk registers)
  - Administrative records (service agreements, financial documentation)
  - Digital and physical files
  - Records created by the Owner/Director or any future worker/contractor
- 

## 9.3 Principles of Record Management

Heart Wing Supports follows these principles:

1. **Accuracy** – Records must be factual and correct.
  2. **Timeliness** – Notes and records must be completed promptly.
  3. **Security** – Information must be protected from unauthorised access.
  4. **Confidentiality** – Only essential information is kept and used.
  5. **Legality** – Retention periods and privacy laws are followed.
  6. **Accessibility** – Participants may access their information upon request.
  7. **Professionalism** – Documentation must reflect respectful and objective practice.
- 

## 9.4 Types of Records Kept

Heart Wing Supports maintains:

### Participant Records

- Intake forms
- Consent forms
- Service agreements
- Support plans
- Risk assessments (if applicable)
- Progress notes
- Communication logs
- Incident reports
- Review notes
- Transition/exit summaries

## **Organisational Records**

- Complaints Register
- Incident Register
- Risk Register
- Continuous Improvement Register
- Internal audit checklists
- Policies and procedures (current and archived versions)

## **Administrative Records**

- Insurance documentation
- ABN and registration documents
- Financial invoices and billing history
- Worker screening checks
- Training records (for future staff)

---

## **9.5 Progress Notes Policy**

Progress notes are essential to demonstrate:

- What support was delivered
- Relevance to goals
- Participant progress
- Duty of care
- Risk awareness
- NDIS compliance

### **Progress Notes Must:**

- Be written **on the same day** as service delivery
- Be clear, objective, and factual
- Avoid opinions or assumptions
- Use the participant's chosen language and respectful tone
- Describe how the support related to the participant's goals
- Include any risks, concerns, or changes

### **A Typical Progress Note Includes:**

- Date and time
- Duration of support

- Purpose of session
- What occurred
- Participant's engagement and response
- Progress towards goals
- Any risks or concerns
- Actions taken
- Next steps or plan

**Examples of Phrases That ARE Appropriate:**

- "Participant reported feeling overwhelmed and requested support to organise tasks."
- "Supported participant to contact X service and discuss next steps."
- "Participant demonstrated increased confidence in..."
- "Observed increased anxiety; provided grounding strategies."

**Examples of Phrases to AVOID:**

- Judgments ("participant was lazy")
- Diagnostic statements ("participant was manic")
- Personal opinions
- Inappropriate detail about third parties

---

## **9.6 Communication Records**

Communication records are kept for:

- Phone calls
- Emails
- Text messages
- Case coordination
- Provider contact
- Relevant interactions with families or carers

Only information relevant to service delivery is recorded.

---

## **9.7 Storage & Security of Records**

### **Digital Storage**

All files are stored securely using:

- Encrypted cloud storage (Google Workspace / Microsoft OneDrive)

- Password-protected devices
- MFA where available
- Locked screens when unattended

## **Physical Files**

If any paper files are used:

- They are stored in a locked cabinet in the home office
- They are digitised and uploaded where possible

## **Backups**

Essential information is backed up via encrypted cloud services.

---

## **9.8 Retention & Disposal**

### **Retention Timeframes**

- **Adult participants:** Records kept **7 years** after the last service.
- **Child participants:** Records kept **7 years after the person turns 18.**

### **Secure Disposal**

- Digital files permanently deleted
  - Paper documents securely shredded
  - Old digital media securely wiped
- 

## **9.9 Access to Records**

Participants may:

- Request access to their information
- Request corrections to inaccurate or outdated information
- Ask how records are used
- Receive a copy of their file

### **Procedure for Access Requests**

- Request must be acknowledged within **7 days**
  - Processed within **30 days**
  - Records provided securely (encrypted email or physical copy)
  - Any refusal must be lawful and explained
-

## **9.10 Third-Party Information Sharing**

Information is only shared:

- With written/informed consent
- With emergency services if needed for safety
- Under mandatory reporting (e.g., reportable incidents)
- Under lawful requirements (e.g., subpoena)

Any sharing of information is documented.

---

## **9.11 Documentation Standards for Audit**

Heart Wing Supports ensures:

- All records are complete, current, and legible
- Progress notes demonstrate alignment with goals
- Support Plans are updated at least annually
- Incidents and complaints are recorded using official templates
- Risk Register is reviewed regularly
- Any improvements are documented

Auditors will review:

- A sample of participant records
  - Policies
  - Registers
  - Service documentation
  - Incident and complaint logs
- 

## **9.12 File Audits**

Heart Wing Supports conducts internal file audits:

### **Quarterly**

- Participant files
- Risk assessments
- Progress notes
- Support Plans

### **Annually**

- Comprehensive file audit for all records

- Archive outdated documents
  - Review compliance and improvement actions
- 

## **9.13 Technology Use Standards**

The following standards apply:

- No storing participant info on personal phones except temporary texts/emails
  - No use of unsecured public Wi-Fi for record access
  - Devices must be updated regularly (security patches)
  - Portable devices should be protected with passwords and biometric locks
  - Sensitive information not discussed or viewed in public spaces
- 

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## **SECTION 10 — SERVICE AGREEMENTS & BILLING PRACTICES**

This section will include:

- How you create service agreements
- What must be included
- Participant rights in agreements
- Transparency around billing, travel, cancellations
- NDIS pricing compliance
- How changes to service agreements are managed

This version is tailored **specifically to a sole trader** delivering **Registration Group 0106 – Assist-Life Stage, Transition.**

## **SECTION 10 — SERVICE AGREEMENTS & BILLING PRACTICES**

### **10.1 Purpose**

To ensure all participants have a clear, transparent, and fair Service Agreement that outlines:

- Supports to be delivered
- Roles and responsibilities
- Rights and safeguards
- Costs and billing practices

- How to make changes or end supports

Service agreements protect both the participant and Heart Wing Supports.

---

## **10.2 Policy Statement**

Heart Wing Supports ensures that:

- All participants have a written Service Agreement prior to supports commencing
  - Agreements are explained in plain English
  - Participants are supported to understand terms before signing
  - Participants may involve family, carers, or advocates in the process
  - Agreements can be changed or ended at any time with notice
  - Billing practices comply with NDIS Pricing Arrangements
  - No participant is pressured or disadvantaged in negotiations
- 

## **10.3 When a Service Agreement Is Required**

A Service Agreement is required:

- Before supports begin
  - When supports change significantly
  - When price limits change under the NDIS Pricing Arrangements
  - If the participant requests an update
- 

## **10.4 What Must Be Included in a Service Agreement**

Heart Wing Supports' Service Agreement includes:

### **Details about supports**

- Type of supports (0106 Life Stage Transition)
- How and where supports will be delivered
- Availability and scheduling expectations
- Expected outcomes or focus areas

### **Rights and responsibilities**

- Participant rights
- Provider responsibilities
- Professional boundaries
- Safety requirements

## **Costs and billing**

- Hourly rate (within NDIS price limit)
- Travel arrangements
- Non-face-to-face support rates
- Cancellation policy
- Invoicing and payment method

## **Contact details**

- Participant's preferred communication method
- Emergency contact
- Provider contact details

## **Changes and reviews**

- How to request a change
- How quickly changes will be actioned
- Planned review periods

## **Ending the agreement**

- Required notice
- Situations requiring immediate cessation (safety, scope limitations)
- Participant's right to change providers at any time

## **Complaints and feedback**

- How to make a complaint
- How complaints are handled
- External complaint options (NDIS Commission)

---

## **10.5 Explaining the Service Agreement**

To ensure informed consent, Heart Wing Supports:

- Explains the agreement in clear, accessible language
- Encourages the participant to ask questions
- Offers interpreters or support persons when needed
- Does not start supports until the participant agrees
- Provides a copy of the agreement to the participant

Where a participant cannot sign:

- A nominee, guardian, parent, or appointed representative may sign

- The arrangement is clearly recorded
- 

## **10.6 Amendments to Service Agreements**

Service agreements may be changed when:

- Participant goals change
- Support needs change
- Costs or pricing arrangements update
- Capacity increases or decreases
- Either party requests a change

### **Procedure for Amendments**

1. Discuss the proposed change
  2. Document the updated terms
  3. Obtain participant consent
  4. Issue an updated agreement or addendum
  5. Store the updated version securely
- 

## **10.7 Ending Supports**

A participant may end the agreement:

- At any time
- For any reason
- With the notice period specified in the agreement (usually 7 days)

Heart Wing Supports may end an agreement when:

- The participant's needs fall outside the provider's scope
- There are persistent unsafe behaviours that cannot be managed
- There is a serious breach of agreement terms
- The participant relocates or changes goals
- It is unsafe or unethical to continue

### **Ending Process**

- Provide explanation with respect and clarity
- Give written notice
- Offer warm handover and referrals
- Finalise invoices

- Close the file and archive records appropriately
- 

## **10.8 Billing Practices**

Heart Wing Supports follows:

- **NDIS Pricing Arrangements and Price Limits**
- **NDIS guidelines for travel, non-face-to-face, cancellations, and report writing**

### **General Billing Principles**

- Participants are billed only for services delivered
- No hidden fees
- No additional charges without written agreement
- All invoicing statements are clear and itemised
- Records are kept for audit purposes

### **Invoicing**

- Plan-managed: invoices sent directly to plan manager
  - Self-managed: invoices sent to participant with 7–14 day payment terms
  - NDIA-managed: processed via the MyPlace portal
- 

## **10.9 Travel Charges**

Travel charges follow the NDIS Pricing Arrangements.

Heart Wing Supports may bill:

- Time spent travelling to the participant (within limits)
- Vehicle running costs (per km rate) if agreed in the Service Agreement
- Non-face-to-face time associated with travel (if applicable)

All travel charges must:

- Be agreed in advance
  - Be included in the Service Agreement
  - Stay within NDIS limits
- 

## **10.10 Non-Face-to-Face Supports**

Non-face-to-face time may be billed when directly related to supporting the participant and included in the Service Agreement.

Examples:

- Preparing resources

- Reviewing reports relevant to support planning
- Coordinating referrals
- Writing progress notes
- Communicating with other providers
- Updating support plans

All non-face-to-face billing must be transparent and justifiable.

---

### **10.11 Cancellation Policy**

Heart Wing Supports follows NDIS cancellation rules.

A cancellation may be charged when:

- Less than 7 clear days' notice is given
- A participant does not attend a scheduled session
- The provider has kept the time reserved and cannot replace the booking

No cancellation fee is charged when:

- The provider cancels
- The participant is in hospital or engaged in emergency circumstances
- Supports are unsafe to deliver (e.g., environment risk)

Policy is clearly explained in the Service Agreement.

---

### **10.12 Documentation for Billing**

For audit readiness, Heart Wing Supports keeps:

- Time sheets or session logs (sole trader uses calendar + notes)
- Progress notes
- Invoices
- Service agreements
- Travel logs (if charged)
- Communication logs
- Evidence of participant consent for any non-standard charges

All records are stored securely for at least 7 years

**Document Control****Version:** 1.0**Approved By:** Kim Henderson**Approval Date:** 29/12/2025**Review date:** 29/12/2026**SECTION 11 — RISK, SAFEGUARDING & DUTY OF CARE**

This includes:

- Protective obligations
- Duty of care vs dignity of risk
- Safeguarding strategies
- Responding to abuse, neglect, or exploitation
- Working with children & vulnerable persons
- Mandatory reporting

This version is tailored precisely to a **sole trader** delivering **0106 Life Stage Transition supports**, with a **psychosocial and trauma-informed lens**.

**SECTION 11 — RISK, SAFEGUARDING & DUTY OF CARE****11.1 Purpose**

To ensure Heart Wing Supports protects participant safety and wellbeing by:

- Identifying and managing risks
- Responding to safety concerns appropriately
- Promoting a safe service environment
- Supporting participants' rights and dignity
- Meeting legal and NDIS safeguarding obligations

---

**11.2 Safeguarding Principles**

Heart Wing Supports follows these principles:

**Safety First**

Participants have the right to be safe from harm, abuse, neglect, violence, and exploitation.

**Dignity of Risk**

Participants have the right to make choices—even risky ones—when risks are understood and manageable.

### **Least Restrictive Approach**

Supports are never controlling or limiting. Heart Wing Supports does **not** use restrictive practices.

### **Trauma-Informed Practice**

Safety, trust, empowerment, and collaboration guide interactions.

### **Proportional Response**

Responses match the level of risk and respect participant rights.

### **Cultural Safety**

Supports respect the identity and cultural needs of all participants.

---

### **11.3 Duty of Care**

Heart Wing Supports maintains a **duty of care** to:

- Act reasonably to protect participants from foreseeable harm
- Provide safe, competent, and professional supports
- Respond appropriately to concerning situations
- Escalate emergencies or risks
- Document concerns clearly and promptly

**Duty of care applies at all times during service delivery.**

---

### **11.4 Dignity of Risk**

Participants have the right to:

- Make informed choices
- Experience life fully
- Take reasonable risks
- Learn through trial and error

Heart Wing Supports balances dignity of risk with duty of care by:

- Exploring risks collaboratively
- Supporting informed decision-making
- Documenting strategies to reduce harm where possible
- Reviewing risks regularly

Risk mitigation strategies are included in the **Support Plan** or **Risk Register** when needed.

---

## **11.5 Identifying Risk**

Risks may relate to:

### **Participant Factors**

- Mental health fluctuations
- Distress or crisis
- Cognitive or communication challenges
- History of trauma
- Self-neglect or self-harm

### **Environmental Factors**

- Unsafe home conditions
- Presence of weapons, drugs, or aggression
- Unsafe community locations

### **Interpersonal Risks**

- Coercion, exploitation, bullying, or abuse
- Family conflict
- Carer stress

### **Systemic Risks**

- Service gaps
- Lack of support networks
- Difficulty navigating systems

All identified risks are documented and reviewed regularly.

---

## **11.6 Safeguarding Strategies**

Heart Wing Supports uses a range of safeguarding practices, including:

- Trauma-informed approaches
- Clear boundaries and expectations
- Environmental safety checks
- Safety planning with participants
- Crisis de-escalation strategies
- Collaboration with supports and professionals (with consent)
- Referrals to appropriate services
- Documentation of all concerns

---

## **11.7 Responding to Abuse, Neglect, or Exploitation**

If abuse, neglect, or exploitation is suspected or disclosed, Heart Wing Supports will:

### **1. Prioritise Safety**

- Ensure the participant is safe
- Call emergency services if required

### **2. Listen and Validate**

- Believe the participant
- Respond calmly and non-judgmentally

### **3. Document**

- Record facts objectively
- Avoid speculation

### **4. Report**

Depending on circumstances, Heart Wing Supports may notify:

- NDIS Commission (if related to supports)
- Police (for criminal matters)
- Child protection services (for minors)
- Guardian, nominee, or carer (if appropriate and safe)
- Emergency services

### **5. Support the Participant**

- Provide emotional support
- Offer referrals to counselling or advocacy services
- Review and update safety strategies

---

## **11.8 Mandatory Reporting Requirements**

Heart Wing Supports complies with all mandatory reporting obligations, which may include:

### **For Adults**

- Serious injury
- Abuse or neglect
- Sexual misconduct
- Criminal behaviour
- Reportable Incidents (as required by NDIS)

## **For Children**

Reports may be required to:

- WA Department of Communities – Child Protection
- Police in emergencies

If a child is at risk of harm, reporting is mandatory.

---

## **11.9 Working With Children and Young People**

Because you support participants aged 0–16, Heart Wing Supports adheres to:

- National Child Safe Principles
- WA Working With Children (WWC) legislation
- NDIS child safeguarding requirements

### **Commitments**

- Prioritise safety and wellbeing
- Support the rights and voices of children
- Involve parents/carers appropriately
- Ensure environments are safe
- Act immediately on concerns

### **Safety Measures for Children**

- No restrictive practices
  - No physical discipline
  - No unsupervised transport without agreement
  - Clear professional boundaries
  - Age-appropriate communication
  - Trauma-informed support
- 

## **11.10 Managing Disclosures of Harm**

When a participant discloses harm:

- 1. Listen without judgment**
- 2. Acknowledge their experience**
- 3. Do not promise secrecy**
- 4. Explain your duty of care**
- 5. Record the disclosure factually**

6. **Follow reporting requirements**
  7. **Provide emotional reassurance**
  8. **Develop or update safety plans**
- 

### **11.11 Safety Planning**

Safety plans may be developed for participants experiencing:

- Mental health instability
- Suicidal thoughts or self-harm behaviour
- Family violence
- Homelessness or unsafe housing
- Escalating behaviour
- Relationship or community conflict

A safety plan may include:

- Early warning signs
- Coping strategies
- Preferred responses
- Emergency contacts
- Services to call
- Agreed environmental adjustments

Safety plans are optional but recommended for participants at risk.

---

### **11.12 Crisis Response**

A crisis may include:

- Panic attack
- Suicidal ideation
- Severe distress
- Unsafe environment
- Threats of violence
- Missing participant
- Medical emergency

## **Crisis Procedure**

1. Stay calm
  2. Ensure immediate safety
  3. Use supportive communication
  4. Contact emergency services if imminent risk
  5. Notify appropriate supports (with consent)
  6. Document
  7. Follow-up and review
- 

## **11.13 External Agencies for Safeguarding**

Heart Wing Supports may contact external supports such as:

- Police (000)
- Ambulance/Fire (000)
- Mental Health Emergency Response Line (MHERL)
- Crisis Care Helpline
- Advocacy organisations
- Support coordinators
- Domestic violence services

This occurs with consent unless safety requires immediate action.

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## **11.14 Provider Incompatibility or Declining Services**

Heart Wing Supports may decline or discontinue services if:

- The participant's needs fall outside 0106 scope
- Safety risks cannot be mitigated
- There is ongoing aggression, harassment, or violence
- The environment is consistently unsafe
- Boundaries are violated repeatedly
- Ethical or legal concerns arise

Notice is provided and a **warm handover** is offered where appropriate.

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## **11.15 Record Keeping**

All safeguarding concerns are documented in:

- Progress notes
- Incident Reports
- Risk Register
- Support Plans (if relevant)

Documentation must:

- Be factual
- Avoid assumptions
- Include dates and times
- Include actions taken

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## **11.16 Continuous Improvement and Review**

Safeguarding practices are reviewed:

- After any incident
- At least annually
- When improvements are identified
- When laws or guidelines change

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## **SECTION 12 — INCIDENT MANAGEMENT SYSTEM**

### **12.1 Purpose**

To outline the Incident Management System used by Heart Wing Supports to identify, record, respond to, and review incidents in accordance with:

- NDIS (Incident Management and Reportable Incidents) Rules 2018
- NDIS Practice Standards – Core Module

This system ensures the safety, wellbeing, and rights of participants.

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## **12.2 What the Incident Management System Includes**

Heart Wing Supports maintains an incident management system made up of:

- 1. Incident Management Policy** (Section 5)
- 2. Incident Response Procedure**
- 3. Incident Report Form**
- 4. Incident Register**
- 5. Reportable Incident Procedure**
- 6. Continuous Improvement process**

These components together ensure every incident is:

- Responded to promptly
- Documented clearly
- Managed safely
- Escalated when required
- Reviewed for improvement opportunities

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## **12.3 What Is an Incident?**

An incident includes any event that:

- Causes harm or a risk of harm to a participant
- Involves injury, illness, or distress
- Occurs during service delivery
- Impacts safety, privacy, or wellbeing
- Could have resulted in harm (a “near miss”)
- Involves inappropriate conduct, aggression, or environmental risks

Incidents may be:

- Minor
- Moderate
- Severe
- Psychological or emotional
- Environmental or behavioural

All incidents are documented.

---

## **12.4 Responsibilities**

### **Sole Trader (Kim Henderson) Responsibilities**

- Respond to incidents
  - Ensure participant safety
  - Notify emergency services when needed
  - Document incidents in a timely manner
  - Determine whether an incident is reportable
  - Notify the NDIS Commission when required
  - Maintain and review the Incident Register
  - Implement corrective or preventative actions
  - Review incidents as part of continuous improvement
- 

## **12.5 Incident Response Process**

### **1. Identify**

- Recognise the incident or near miss.

### **2. Ensure Immediate Safety**

- Provide support
- Manage environment
- Call emergency services if necessary

### **3. Document the Incident**

- Complete Incident Report within 24 hours
- Include facts only

### **4. Notify Relevant People**

- Participant
- Nominee/family (if consented or appropriate)
- Other providers involved (with consent)

### **5. Determine if Reportable**

- Assess whether the incident meets NDIS Reportable Incident criteria

### **6. Report to NDIS Commission if Required**

- Within 24 hours for serious matters
- Within 5 days for follow-up documentation

### **7. Review & Improve**

- Update Risk Register if needed
  - Add actions to Continuous Improvement Register
  - Adjust support strategies
- 

## **12.6 NDIS Reportable Incidents**

Reportable incidents include:

- Death of a participant
- Serious injury
- Abuse or neglect
- Unlawful physical or sexual contact
- Sexual misconduct
- Use of restrictive practices (not used by this provider)

## **Notification Timeframes**

- **Within 24 hours:**
    - Death
    - Serious injury
    - Abuse or sexual misconduct
  - **Within 5 business days:**
    - Follow-up detailed reports
  - **As soon as practicable:**
    - Any other reportable matters outlined by NDIS Commission
- 

## **12.7 Incident Register**

Heart Wing Supports maintains an Incident Register including:

- Date and time
- Participant involved
- Description of incident
- Type/category
- Immediate actions taken
- People notified
- Whether reportable
- Corrective actions

- Review notes

The register is stored securely and reviewed quarterly.

---

## **12.8 Follow-Up and Reviews**

All incidents are followed up by:

- Checking participant wellbeing
- Reviewing environmental or behavioural triggers
- Updating safety plans (if applicable)
- Implementing improvements

### **Quarterly Review**

- Patterns or recurring issues
- Environmental risks
- Practice improvements

### **Annual Review**

- Whole-of-system review
  - Policy updates
  - Risk Register adjustments
- 

## **12.9 Continuous Improvement Link**

Each incident provides an opportunity to:

- Improve service delivery
- Strengthen safety
- Enhance communication
- Adjust support strategies

Learnings are added to the **Continuous Improvement Register** and inform policy updates.

---

## **12.10 Training (Future-Ready)**

If workers or contractors are engaged in future:

- All workers must be trained in incident response
- Training will include what is an incident, how to report, and what requires escalation
- Records of training will be kept

**Document Control****Version:** 1.0**Approved By:** Kim Henderson**Approval Date:** 29/12/2025**Review date:** 29/12/2026**SECTION 13 — CONTINUOUS IMPROVEMENT FRAMEWORK**

This section will cover:

- CI register
- Review processes
- Provider self-assessment
- Using feedback, incidents, and risks to improve
- Annual review cycle

**SECTION 13 — CONTINUOUS IMPROVEMENT FRAMEWORK****13.1 Purpose**

To ensure Heart Wing Supports continually improves the quality, safety, and effectiveness of services by:

- Monitoring performance
- Reviewing outcomes
- Responding to feedback and incidents
- Identifying opportunities for improvement
- Ensuring compliance with NDIS Practice Standards

Continuous improvement is an ongoing, intentional process that strengthens outcomes for participants.

---

**13.2 Principles of Continuous Improvement**

Heart Wing Supports follows these key principles:

**Participant-Centred**

Participant experiences, needs, and feedback drive improvements.

**Evidence-Based**

Improvements draw from data, documentation, best practice, and lived experience.

**Transparent**

Changes are communicated clearly and respectfully.

**Proactive**

Improvements occur *before* issues escalate.

## **Reflective**

Practice is regularly reviewed with honesty and openness.

---

### **13.3 What Informs Continuous Improvement**

Heart Wing Supports uses multiple sources of information:

#### **1. Feedback**

- Participant feedback
- Family/carer feedback
- Advocate or provider feedback
- Compliments and suggestions

#### **2. Complaints**

- Themes or patterns
- Timeliness of responses
- Areas of participant dissatisfaction

#### **3. Incidents**

- Safety risks
- Environmental issues
- Practice improvements

#### **4. Risk Assessments**

- Individual risk profiles
- Environmental risks
- Trends identified in the Risk Register

#### **5. Documentation Reviews**

- Progress notes
- Support Plans
- Record keeping practices

#### **6. Personal Reflection (Sole Trader)**

- Fatigue or wellbeing issues
- Professional development needs
- What worked well / what didn't
- Boundary and ethical considerations

#### **7. Policy and Legislative Changes**

- NDIS updates
  - New Pricing Arrangements
  - Practice Standard changes
  - Child safety reforms
- 

### **13.4 Continuous Improvement Register**

Heart Wing Supports maintains a **Continuous Improvement (CI) Register** that includes:

- Identified issue or opportunity
- Source (feedback, incident, review, reflection)
- Date identified
- Improvement action
- Person responsible (always the Owner/Director unless future staff exist)
- Completion date
- Review/impact notes

The CI Register is reviewed:

- Quarterly
  - After major incidents
  - When feedback identifies a trend
  - Annually as part of the self-assessment
- 

### **13.5 Quality Review Processes**

Quality review occurs at three levels:

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#### **1. Ongoing Review (Weekly/Monthly)**

- Review progress notes
  - Reflect on participant progress
  - Note minor improvements needed
  - Update risk or support strategies as needed
- 

#### **2. Quarterly Review**

- Review Incident Register
- Review Complaints Register

- Review CI Register
  - Review risk trends
  - Check documentation consistency
  - Update service improvements
- 

### **3. Annual Review (Formal Self-Assessment)**

Each year, Heart Wing Supports conducts a self-assessment that includes:

- Review of all policies and procedures
- Review of participant outcomes
- Review of risk management
- Audit of participant files
- Review of business continuity and WHS
- Identification of training needs
- Updates required due to NDIS rule changes
- Confirmation of compliance with NDIS Code of Conduct

An annual summary is documented and retained for audit.

---

### **13.6 Participant Involvement in Continuous Improvement**

Participants influence improvements through:

- Direct feedback
- Suggestions
- Complaints
- Goal progress reviews
- Conversations during sessions

Changes influenced by participants are recorded in the CI Register and shared (where appropriate).

---

### **13.7 Using Incidents, Complaints & Feedback for Improvement**

Heart Wing Supports uses incidents and complaints constructively:

#### **When an incident occurs:**

- Review what happened
- Identify contributing factors
- Determine whether policy or practice changes are needed

- Document changes in the CI Register

**When a complaint is made:**

- Identify the root cause
- Review communication and expectations
- Adjust processes or documentation

**When feedback is provided:**

- Identify opportunities to enhance service quality
- Strengthen communication
- Improve accessibility

---

### **13.8 Professional Development (Sole Trader Focus)**

Continuous improvement includes maintaining skills, knowledge, and wellbeing.

Annual goals may include:

- Trauma-informed practice training
- Psychosocial disability education
- Professional supervision
- Reflective practice
- Peer networking
- NDIS updates and training

The Training Register (even if you are the only worker) records:

- Completed training
- Dates
- Relevance to service delivery

---

### **13.9 Documentation and Evidence**

Evidence of continuous improvement includes:

- CI Register
- Annual review notes
- Policy updates
- File audit results
- Incident and complaint analysis
- Training records

- Practice reflections

This documentation demonstrates compliance during audit.

---

### **13.10 Communication of Improvements**

Heart Wing Supports communicates improvements to:

- Participants (when relevant)
- Families/carers (if appropriate)
- Other providers (if improvements affect collaboration)

Communication methods may include:

- Email
- Updated documents
- Verbal discussions during planning and reviews

## **SECTION 14 CULTURAL COMPETENCY & INCLUSION**

### **14.1 Purpose**

To ensure Heart Wing Supports provides culturally safe, respectful, and inclusive services for people of all cultural backgrounds, including Aboriginal and Torres Strait Islander peoples, migrants, and culturally and linguistically diverse communities.

### **14.2 Policy Statement**

Heart Wing Supports is committed to:

- Respecting all cultures, identities, spiritual beliefs, and traditions
- Providing culturally safe, responsive service delivery
- Recognising the impact of colonisation and intergenerational trauma on Aboriginal communities
- Being aware of and responsive to cultural communication preferences
- Working collaboratively with families, Elders, and community supports when appropriate

### **14.3 Cultural Safety Principles**

- **Respect** — Value cultural identities and experiences
- **Humility** — Acknowledge limitations and commit to ongoing learning
- **Curiosity** — Ask, don't assume
- **Partnership** — Work with the participant, not over them
- **Safety** — Create spaces where people feel seen, heard, and respected

## **14.4 Practice Requirements**

- Ask participants about cultural needs, preferences, and important customs
  - Adapt support plans to reflect cultural practices or obligations
  - Use appropriate language and avoid jargon
  - Consider cultural views around disability, mental health, gender, and family roles
  - Seek advice from cultural advisors or community supports when appropriate
  - Ensure documents and communication are culturally accessible
- 

## **SECTION 15 — LGBTQIA+ INCLUSION POLICY**

### **15.1 Purpose**

To ensure Heart Wing Supports is a safe, affirming, and inclusive service for LGBTQIA+ people.

### **15.2 Policy Statement**

Heart Wing Supports:

- Affirms all identities, genders, and sexual orientations
- Respects chosen names and pronouns
- Ensures a non-discriminatory, safe environment
- Challenges stigma, discrimination, and exclusion
- Incorporates LGBTQIA+ inclusion into continuous improvement

### **15.3 Inclusive Practice Requirements**

- Ask participants how they would like to be addressed
- Respect pronouns in all written and verbal communication
- Avoid assumptions about relationships, gender, or identity
- Ensure confidentiality when participants choose not to disclose
- Provide referrals to LGBTQIA+ safe services when requested
- Engage in ongoing training and reflection about queer-inclusive practice

### **15.4 Safety Considerations**

If a participant is unsafe due to discrimination, family conflict, or community attitudes, safeguarding procedures and safety planning must be activated.

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## **SECTION 16 — TRAUMA-INFORMED CARE SUMMARY**

### **16.1 Purpose**

To ensure all supports are delivered in a trauma-informed, empowering, and sensitive manner.

Heart Wing Supports acknowledges that trauma may intersect with:

- autism
- brain injury
- psychosocial disability

Supports recognise that behaviours or responses may reflect:

- sensory overwhelm
- cognitive fatigue
- neurological processing differences rather than intentional non-compliance.

Supports are adjusted accordingly to maintain safety, dignity, and empowerment.

### **16.2 Trauma-Informed Principles Used by Heart Wing Supports**

#### **1. Safety**

Physical, emotional, cultural, and environmental safety are prioritised.

#### **2. Trust & Transparency**

Clear communication, predictable processes, and honest expectations.

#### **3. Choice**

Participants have control wherever possible: how sessions run, communication preferences, pacing, and content.

#### **4. Collaboration**

Support is done *with* participants, not *to* them.

#### **5. Empowerment**

Focus on strengths, capability, autonomy, and self-determination.

#### **6. Cultural Context**

Respect for cultural histories, intergenerational trauma, and identity.

### **16.3 Trauma-Informed Practice Behaviours**

- Speak calmly and respectfully
- Avoid surprise changes; always explain what comes next
- Validate experiences and emotions
- Provide grounding strategies when needed

- Notice early signs of distress and adjust support
  - Maintain strong boundaries to create safety
  - Avoid re-triggering content unless clinically guided (and you do NOT provide clinical therapy)
- 

## **SECTION 17 — ENVIRONMENTAL SUSTAINABILITY POLICY**

### **17.1 Purpose**

To minimise environmental impact in service delivery.

### **17.2 Policy Statement**

Heart Wing Supports is committed to environmentally responsible practice by:

- Reducing waste
- Minimising energy use
- Reducing unnecessary travel
- Using digital documentation where possible

### **17.3 Sustainability Practices**

- Use electronic files instead of paper
  - Choose energy-efficient devices
  - Recycle where possible
  - Schedule travel efficiently to reduce emissions
  - Encourage digital meetings when appropriate
  - Purchase low-waste materials for any resources used with participants
- 

## **SECTION 18 — SOCIAL MEDIA & COMMUNICATION POLICY**

### **18.1 Purpose**

To ensure all communication and social media interactions maintain professionalism, confidentiality, and safety.

### **18.2 Policy Statement**

Heart Wing Supports:

- Maintains clear boundaries between personal and professional communication
- Never posts participant information online
- Uses social media responsibly and ethically
- Communicates with participants through approved channels only

### **18.3 Communication with Participants**

Approved methods:

- Phone
- Email
- Text message
- Secure platforms (if used)

Not approved:

- Personal social media messaging (Messenger, Instagram DMs, etc.)
- Adding participants as friends/followers on personal accounts
- Sharing photos of participants without explicit consent

### **18.4 Social Media Use**

- No identifying participant information posted under any circumstance
- No sharing of private communication
- No discussing participant situations publicly
- No tagging, checking in, or referencing participant locations

### **18.5 Boundary Management**

If a participant attempts to contact via social media:

- Redirect them to official communication channels
- Document the interaction
- Maintain professional boundaries

---

## **SECTION 19 — WORKING WITH INTERPRETERS**

### **19.1 Purpose**

To ensure accessible, equitable services for participants with limited English proficiency or who use Auslan.

### **19.2 Policy Statement**

Heart Wing Supports:

- Provides interpreters when needed
- Uses NAATI-certified interpreters or accredited agencies
- Ensures participants understand their rights, choices, and supports
- Avoids using family members as interpreters unless specifically requested and appropriate

### **19.3 Procedure for Using Interpreters**

1. Identify language/interpreter need during intake
  2. Confirm participant preferences (e.g., gender of interpreter, cultural considerations)
  3. Book interpreter through an approved service
  4. Brief interpreter on purpose of session
  5. Conduct the session, addressing the participant directly
  6. Debrief/clarify after session
  7. Document interpreter use in progress notes
- 

## **SECTION 20 — DOMESTIC & FAMILY VIOLENCE RESPONSE POLICY**

### **20.1 Purpose**

To ensure safe, appropriate, and trauma-informed responses when domestic or family violence (DFV) is suspected or disclosed.

### **20.2 Policy Statement**

Heart Wing Supports:

- Recognises DFV as a serious safeguarding issue
- Responds with sensitivity, respect, and zero judgment
- Prioritises participant safety and choice
- Does *not* provide clinical DFV interventions but can support access to specialist services

### **20.3 Recognising Signs of DFV**

Possible indicators include:

- Fear of a partner or family member
- Controlling behaviours
- Isolation from friends or supports
- Financial control
- Physical injuries or signs of harm
- Emotional distress or hypervigilance

### **20.4 Responding to DFV**

1. **Ensure Immediate Safety**
  - If danger is imminent, call 000.
2. **Validate and Listen**

- Believe the participant
- Offer emotional safety

### **3. Explain Rights & Boundaries**

- You cannot guarantee secrecy if someone is at immediate risk.

### **4. Support Choices**

- Ask what the participant wants now
- Respect pacing and readiness

### **5. Offer Connections to Specialists**

- Women's refuges
- DFV counselling
- Police
- Legal services
- Crisis Care

### **6. Document Carefully**

- Use factual, neutral language
- Do NOT document sensitive risk information where abusers may access records without participant consent

### **7. Plan for Safety**

- Create or update a safety plan
- Support crisis strategies

## **20.5 Mandatory Reporting**

- For children: immediate report to Child Protection
- For adults: report when risk is imminent, serious, or life-threatening

For people lacking capacity: follow safeguarding requirements

## **Document Control**

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## SECTION 21 — EMERGENCY AND DISASTER MANAGEMENT POLICY

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### 21.1 Purpose

To ensure Heart Wing Supports can **prevent, prepare for, respond to, and recover from emergencies and disasters** in a way that:

- Protects participant safety and wellbeing
- Maintains continuity of essential supports
- Meets NDIS emergency management obligations
- Aligns with trauma-informed and safeguarding principles

This policy applies to all emergency and disaster events affecting participants, service delivery, or the provider.

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### 21.2 Scope

This policy applies to:

- All participants receiving supports
- All support activities delivered by Heart Wing Supports
- The Owner/Director (Kim Henderson)
- Any future contractors or workers

It covers emergencies occurring:

- During service delivery
  - In participant homes or community settings
  - During travel
  - Due to natural disasters, public health emergencies, or service disruption
- 

### 21.3 Definitions

**Emergency** – Any event that poses immediate risk to life, safety, health, or property (e.g., fire, medical crisis, violence, missing person, mental health crisis)

**Disaster** – A large-scale or prolonged emergency that disrupts normal services (e.g., bushfire, flood, heatwave, pandemic, cyclone, infrastructure failure)

**Continuity of Supports** – Ensuring participants remain safe, informed, and supported even when normal operations are disrupted

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### 21.4 Guiding Principles

Heart Wing Supports responds to emergencies using these principles:

- **Safety First** – Human life and wellbeing come before service delivery
- **Trauma-Informed Practice** – Calm, clear, respectful communication
- **Participant-Centred** – Individual risks, vulnerabilities and preferences matter

- **Proportionate Response** – Response matches level of risk
  - **Dignity & Rights** – Respect choice, consent and privacy wherever possible
  - **Legal Compliance** – Follow NDIS, WA, and emergency service requirements
- 

## 21.5 Types of Emergencies Covered

This policy applies to:

### **Personal Emergencies**

- Medical crisis
- Mental health crisis
- Suicide risk or self-harm
- Family violence
- Abuse or neglect
- Missing participant

### **Environmental & Community Emergencies**

- Fire
- Flood
- Cyclone
- Extreme heat
- Power or communication failure
- Dangerous animals or people
- Unsafe housing

### **Service & Business Disruption**

- Provider illness or injury
  - Vehicle breakdown
  - Technology failure
  - Natural disaster
  - Public health emergency
- 

## 21.6 Emergency Preparedness

Heart Wing Supports maintains preparedness by:

### **Participant-Level Planning**

Participants at higher risk may have:

- Safety plans
  - Crisis plans
  - Emergency contacts
  - Risk mitigation strategies
- in their Support Plan or Risk Register

These are developed collaboratively and reviewed regularly.

### **Provider-Level Planning**

Kim Henderson maintains:

- Emergency contact lists
- Business continuity plans

- Delegation of Authority (future-ready)
- Secure access to records
- Backup communication methods

This aligns with Section 6.9 Business Continuity Planning

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## **21.7 Emergency Response Procedure**

When an emergency occurs:

### **Step 1 — Ensure Immediate Safety**

- Remove people from danger
- Provide reassurance
- Call **000** if required
- Follow instructions of emergency services

### **Step 2 — Stabilise the Situation**

- Use de-escalation strategies
- Support grounding
- Create physical and emotional safety
- Maintain trauma-informed communication

### **Step 3 — Notify Where Appropriate**

With consent (unless unsafe), notify:

- Family or nominee
- Support Coordinator
- Relevant services

If required by law or safety, notify authorities.

### **Step 4 — Document**

Complete:

- Incident Report
- Progress notes
- Risk Register updates

Follow the Incident Management System in Section 12

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## **21.8 Disaster Response**

When a disaster impacts services (fire, flood, heatwave, etc.):

Heart Wing Supports will:

- Monitor WA emergency warnings
- Contact affected participants
- Assess risk and vulnerability
- Suspend unsafe services
- Offer phone or remote support if possible
- Prioritise high-risk participants

- Provide referrals where needed
- Resume services when safe

Participants will never be pressured to attend or continue supports during unsafe conditions.

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## **21.9 Mental Health Crisis Response**

When a participant is in psychological distress:

Follow Section 6.8 Mental Health Crisis Response

This includes:

- Calm communication
- De-escalation
- Grounding strategies
- Calling crisis services or 000 if required
- Using the participant's Crisis Plan if available

Heart Wing Supports does not provide clinical or medical intervention.

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## **21.10 Continuity of Supports**

If normal services are disrupted:

Heart Wing Supports will:

- Notify participants as soon as possible
- Offer rescheduling
- Provide temporary alternatives
- Offer referrals
- Prioritise vulnerable participants
- Use Delegation of Authority if required

This aligns with Business Continuity Planning in Section 6.9

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## **21.11 Children & Vulnerable Participants**

For children or high-risk participants:

- Safety overrides all other considerations
- Child protection laws apply
- Mandatory reporting applies
- Parent/guardian involvement occurs where safe
- NDIS safeguarding rules are followed

This aligns with Section 11 — Risk, Safeguarding & Duty of Care

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## **21.12 Record Keeping**

All emergency and disaster events are recorded in:

- Progress notes
- Incident Reports
- Incident Register
- Risk Register
- Support Plans (if needed)

Records are kept in line with Section 9 — Record Keeping.

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## **21.13 Review & Improvement**

After any emergency or disaster:

Heart Wing Supports will:

- Review what occurred
- Identify improvements
- Update plans and risks
- Record actions in the Continuous Improvement Register

This ensures emergency readiness continues to improve over time.

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## **21.14 External Emergency Contacts**

- **000** – Police / Fire / Ambulance
- **Mental Health Emergency Response Line (WA)**
- **Lifeline** – 13 11 14
- **Beyond Blue** – 1300 22 4636
- **Crisis Care WA**
- **Domestic Violence Helpline**

(Details are kept in the Emergency Contact List)

### **NDIS Support Coordinator – Crisis Call Script (WA)**

#### **0) Open calmly + establish control**

**“Hi, I’m here with you. I’m glad you called. I’m going to ask a few quick questions to make sure you’re safe.”**

**“Are you somewhere you can talk safely right now?”**

If no → “You can answer yes/no. Is it safer to move somewhere else?”

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#### **1) Immediate Safety (FIRST — do not skip)**

**“Are you safe right now?”**

**“Is anyone else in danger right now?”**

**“Do you need emergency services — ambulance, police, or fire?”**

**“Where are you right now?”** (exact location, suburb, landmarks)

**If unsafe / life-threatening**

Say clearly:

**“I’m concerned about your safety. We need emergency help now. Can you call 000 while I stay on the phone?”**

If they cannot:

- Stay online
  - Ask them to put phone on speaker
  - Follow your organisation’s escalation procedure
- 

## **2) Identify + basic facts**

**“Can I confirm your full name?”**

**“What’s the best number to call if we get disconnected?”**

**“Who is with you right now?”**

**“Are there any weapons, drugs, or anything dangerous nearby?”**

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## **3) What’s happening**

**“Tell me what’s happening right now.”**

**“What made today different — what changed?”**

**“What is the biggest concern right now?”**

Reflect back briefly:

**“So right now you’re dealing with \_\_\_, and the most urgent issue is \_\_\_. ”**

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## **4) Risk Check (ask directly, calmly)**

**Self-harm / suicide**

**“Are you thinking about harming yourself?”**

If yes:

- **“Do you have a plan?”**
- **“Do you have access to anything you could use?”**
- **“Have you taken anything or hurt yourself today?”**
- **“Can you stay safe while we get support?”**

**Harm to others**

**“Are you thinking about hurting anyone else?”**

**“Is anyone else at risk right now?”**

## **Abuse / neglect / exploitation (NDIS safeguarding)**

**“Is someone hurting you, threatening you, or taking advantage of you?”**  
**“Do you feel safe where you are living?”**

**⚠ If abuse/neglect suspected → document → follow **NDIS Incident + safeguarding obligations****

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## **5) Medical Check (quick screen)**

**“Are you injured, in severe pain, or struggling to breathe?”**  
**“Have you taken drugs, alcohol, or too much medication?”**  
**“Do you feel faint, confused, or like you might pass out?”**

If yes → **Ambulance (000)**

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## **6) Stabilise (only if safe)**

**“Let’s slow things down for a moment.”**  
**“Take one slow breath with me.”**  
**“Can you tell me 3 things you can see?”**

(Goal: reduce panic enough to plan next step)

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## **7) Supports + immediate safety**

**“Is there someone who can be with you right now?”**  
**“Can we call a family member, carer, or support worker?”**  
**“Are you safe to stay where you are tonight?”**

If self-harm risk:

**“Can you move anything you could use to hurt yourself away from you?”**

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## **8) Decide the action (NDIS Coordinator role)**

Choose the **lowest safe option**:

**EMERGENCY (000)**

- Immediate danger
- Suicide plan + means
- Violence / abuse
- Medical emergency
- Cannot stay safe

## **URGENT SAME DAY**

- Contact Mental Health Emergency Response Line (MHERL WA)  
**1300 555 788**

- Present to nearest Emergency Department
- Contact guardian / family / SIL / provider
- Activate crisis supports

## **NON-IMMEDIATE CRISIS**

- GP / Psychiatrist urgent appointment
- Crisis line referral
- Increase supports / respite
- Incident report + safeguarding action

Say clearly:

**“Based on what you’ve told me, here’s what we need to do next: \_\_\_\_.”**

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## **9) Confirm plan + commitment**

**“Can you repeat the plan back to me?”**

**“Can you stay safe until help arrives?”**

**“If things get worse, what will you do first?”**

If they cannot commit to safety → **escalate**

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## **10) Close safely**

**“Before we finish — are you safe right now?”**

**“Where will you be after this call?”**

**“Who is with you / who are you contacting next?”**

**“You did the right thing calling. You’re not alone.”**

Document immediately after call.

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## **WA Quick Reference (for you)**

**Emergency:** 000

**Mental Health Emergency Response Line (MHERL WA):** 1300 555 788 (24/7)

**Suicide Call Back Service:** 1300 659 467

**Lifeline:** 13 11 14

**NDIS Reportable Incident (if required):** via NDIS Commission portal

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## **When YOU must escalate (Duty of Care)**

- Immediate risk to life
- Suicide plan + means
- Serious self-harm or overdose

- Violence / domestic violence
- Abuse, neglect, exploitation of participant
- Participant lacks capacity to stay safe
- Psychosis / extreme distress / confusion
- Serious service breakdown leaving participant unsafe

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