



CHCCCS010

Maintain a high
standard of service



CHCCCS010

Maintain a high standard of service

Release 1

Learner Guide

Aspire Version 1.1

CHCCCS010 Maintain a high standard of service, Release 1

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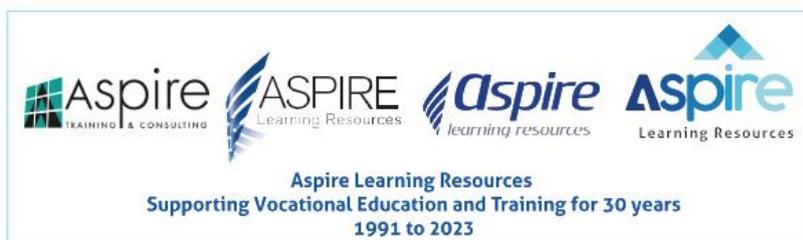
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Aspire acknowledges the homelands of all Aboriginal and Torres Strait Islander peoples and pays our respect to Country



Before you begin

This Learner Guide is based on the unit of competency *CHCCCS010 Maintain a high standard of service*, Release 1.

Your trainer or training organisation must give you information about this unit of competency as part of your training program.

How to work through this Learner Guide

This Learner Guide contains a number of features that will assist you in your learning. Your trainer will advise which parts of the Learner Guide you need to read, and which Practice Tasks and Learning Checkpoints you need to complete.

Feature of the Learner Guide	How you can use each feature	
Learning content	Read each topic in this Learner Guide. If you come across content that is confusing, make a note and discuss it with your trainer. Your trainer is in the best position to offer assistance. It is very important that you take on some of the responsibility for the learning you will undertake.	
Examples	These highlight learning points and provide realistic examples of workplace situations.	
Practice Tasks	Practice Tasks give you the opportunity to put your skills and knowledge into action. Your trainer will tell you which Practice Tasks to complete.	
Callouts	Callouts reiterate key learning points to help students revise for their assessments.	
Weblinks	Weblinks provide learners with additional content to contextualise their learning and develop their understanding.	
Videos	Videos provide a visual reference of key concepts to aid comprehension and guide learner exploration. Each video is accessed by a QR code in the Learner Guide (or a button in the eBook version) for ease of access.	 
Glossary/margin definitions	Key terms are defined where they first appear to help consolidate understanding. A glossary of terms is provided at the end of the Learner Guide to assist learner revision of key concepts.	
Summaries	Key learning points are provided at the end of each topic.	
Learning Checkpoints	There are Learning Checkpoints at the end of each topic. Your trainer will tell you which activities to complete. These activities give you an opportunity to check your progress and apply the skills and knowledge you have learnt.	
Case studies	Case studies are interspersed throughout the learning content to provide a workplace setting that contextualises key concepts.	

Foundation skills

As you complete learning using this guide, you will be developing the foundation skills relevant for this unit. Foundation skills are the language, literacy and numeracy (LLN) skills and the employability skills required for participation in modern workplaces and contemporary life.

These skills are listed below:

Foundation skill area	Foundation skill description
Reading	<ul style="list-style-type: none"> Understanding how documents are presented and being able to navigate through documents Understanding industry- and job-specific terminology Interpreting key information in relevant documents Understanding routine workplace checklists and documentation
Writing	<ul style="list-style-type: none"> Planning, drafting and writing reports and documents Communicating through written letters, email and online Recording progress; reporting incidents
Oral communication	<ul style="list-style-type: none"> Clarifying instructions Providing information Supporting others through encouragement, negotiation and conflict resolution Using body language to model desired behaviour and responding to others' body language
Numeracy	<ul style="list-style-type: none"> Calculating costs, weights, measurements of height and distance Interpreting measurements
Learning	<ul style="list-style-type: none"> Understanding your job role, organisational procedures and legal responsibilities Managing your work and seeing how well you are going Making goals for yourself at work Seeking professional development opportunities for continuous improvement
Problem-solving	<ul style="list-style-type: none"> Identifying problems Working out how to fix a problem using problem-solving processes Reviewing the outcome
Initiative and enterprise	<ul style="list-style-type: none"> Recognising opportunities to develop and apply new ideas Generating ideas by thinking of new ways to do something Making suggestions to improve work
Teamwork	<ul style="list-style-type: none"> Working well with other people by cooperating, collaborating, encouraging and building rapport



Foundation skill area	Foundation skill description
Planning and organising	<ul style="list-style-type: none"> • Planning your workload and commitments • Implementing tasks • Completing work on time • Knowing how to deal with hazards and risks
Self-management	<ul style="list-style-type: none"> • Understanding and applying decision-making processes • Reviewing your behaviour and the impact of your decisions
Technology	<ul style="list-style-type: none"> • Efficiently using digitally based technologies and systems correctly and safely • Accessing, organising and presenting information • Using equipment correctly and safely

Note: Not every unit of competency will contain all foundation skills.

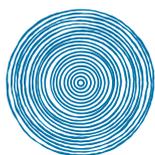
What do you already know?

Use the following table to identify what you may already know. This may assist you to work out what to focus on in your learning.

Topic	Key outcome	Rate your confidence in each section
Topic 1 Establish and maintain an appropriate relationship with people accessing services	1A Establish rapport and ensure the service is appropriate	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1B Communicate effectively to provide quality service	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1C Identify the client's needs and respond appropriately	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1D Act directly to resolve conflict or refer to appropriate personnel	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1E Respond to complaints in line with organisational policy	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident



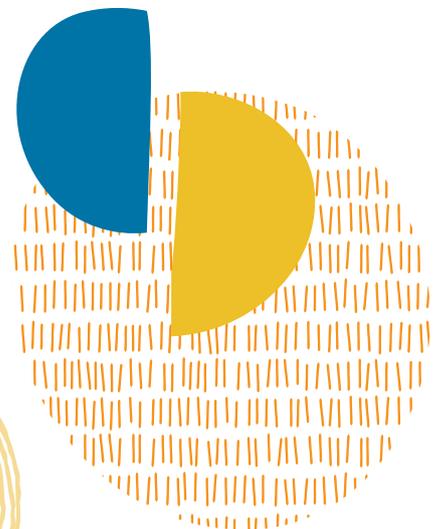
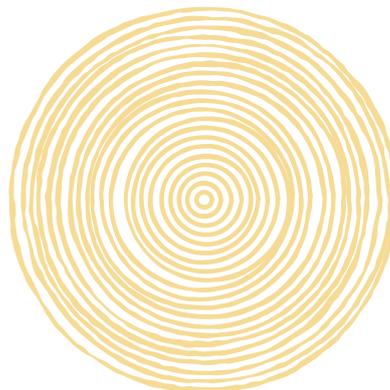
Topic	Key outcome	Rate your confidence in each section
Topic 2 Act in a respectful manner at all times	2A Respect clients as individuals	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2B Respect and maintain confidentiality and privacy	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2C Follow procedures for addressing behaviours of concern	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
Topic 3 Evaluate your work to maintain a high standard of service	3A Monitor your effectiveness in interpersonal interactions	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3B Seek advice and address your performance	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident





Topic 1: Establish and maintain an appropriate relationship with people accessing services

- 1A Establish rapport and ensure the service is appropriate
- 1B Communicate effectively to provide quality service
- 1C Identify the client's needs and respond appropriately
- 1D Act to directly resolve conflicts or refer to appropriate personnel
- 1E Respond to complaints in line with organisational policy



1A

Establish rapport and ensure the service is appropriate

Start building a good relationship with clients from your initial contact.

You may be the first point of contact for the client and be responsible for determining what kind of support the person needs. You may provide support directly to the person, or refer them to someone within or external to your organisation that is able to provide the support they need.

The specific techniques you would use to build a good relationship differ depending on whether the person makes their initial contact by phone or presents in a face-to-face meeting. However, the basic skills are similar. The quality of this interaction can significantly affect the person's level of satisfaction and can lay the foundation for how the relationship continues. Your aim is to assist the person and support them to draw maximum benefit from the service.

Your organisation will have intake and assessment procedures to guide you. You should follow these carefully.

Building relationships

Health and community services organisations exist to support the people who come to them for help. When people in need of support make contact with an organisation, they often require advice. They may be unsure of the process and may not understand the workings of the system or organisation.

Your first task is to create a positive interaction where the person feels welcome and to help them understand the benefits of the support services available to them. The client needs to understand whether the services they are accepting or agreeing to are appropriate for their needs. This kind of discussion helps to build a foundation of engagement and commitment.

The types of services clients require will vary. Your role may be to provide the service directly or to refer the client to the service that will best support their needs.



Types of services	
<ul style="list-style-type: none"> • Aged care • Home and community care • Disability services • Support with alcohol and other drugs • Family and domestic violence support • Mental health services • Allied health services 	<ul style="list-style-type: none"> • Patient services in a hospital • Housing support • Community development • Community work • Youth work and juvenile justice • Children’s services • Child protection • Employment services
<p>Some organisations provide services directly to people, such as providing medical treatment or access to emergency housing. Other organisations exist to provide information and to refer clients to appropriate service providers.</p>	
Types of clients accessing services	
<p>People accessing health and community services include:</p> <ul style="list-style-type: none"> • individuals who are seeking help for themselves; for example, a woman who is experiencing family violence seeking help from a women’s support service • people seeking help for a family member or a friend • individuals requiring a treatment as a result of a referral, such as speech pathology or podiatry services • workers from other health and community services organisations who are seeking information for the people they support • people required to contact your organisation because of a court order or as a requirement to be eligible to receive government welfare payments. 	

Develop rapport

In order to establish a good relationship, it’s important to begin by building **rapport**. This requires you to be personable and kind, and to communicate effectively to reach a shared understanding of each other.

To develop rapport, you need to listen carefully to your client. Whether a client’s needs are relatively simple, or more complex, you must demonstrate that you have heard and understood them, and are interested in supporting them. Use questioning, **active listening** and body language to build rapport with your client.

Here are some things you can do that will assist you to develop rapport. The acronym SOLER was developed by Gerard Egan in his book *People Skills*.

Rapport
A close relationship between two entities that promotes mutual understanding.

Active listening
Concentrated listening and non-verbal encouragement indicating an understanding of what is being said.



S	Sit or stand SQUARELY to the person – usually at a slight angle (i.e., not directly opposite them) so it is less confrontational.
O	Use an OPEN posture at all times (i.e., don't cross your arms) to ensure you do not set up any physical barriers to communication.
L	LEAN slightly toward the person to show you are interested and engaged in the conversation with them.
E	Maintain appropriate EYE contact by considering cultural needs, e.g., making less eye contact with people from some First Nations cultures.
R	Take a RELAXED approach. If you are relaxed, this helps the client to feel relaxed as well.

Ensure the service is appropriate

The intake procedure will vary between organisations and may differ based on the services provided. After initial contact, provide information about the service your organisation offers or the process to enter the service. This could include information on the cost of services, any waiting periods that apply and how to make an appointment. You need to explain the benefits of services, as well as any risks, so clients can give their consent if they wish to proceed. You may also need to collect information from the person to use the service.

Here is some information about intake and assessment processes.

Intake
<ul style="list-style-type: none"> • Intake is the process by which a client is accepted into a service, having met the eligibility requirements. The specific services they will receive have not yet been worked out in detail. The initial intake process will depend on the sector (aged care, disability, etc.) and the protocols of each organisation. • To access funded homecare services through the Commonwealth Home Support Programme (CHSP) and disability services through the National Disability Insurance Scheme (NDIS), clients must make initial contact with centralised intake and assessment services. • My Aged Care (MAC) is the entry point for subsidised aged care services in Australia, including CHSP services. A potential client, their family member or representative, or another professional may contact MAC on behalf of the person. This could be a hospital, the person's doctor or another health practitioner. The person's initial eligibility will be established.



Initial needs assessment

- An initial needs assessment will depend on organisational protocols, but is ideally conducted face-to-face with the client and their support person or representative. In the case of a health appointment, information is collected by asking questions. The client's medical history may need to be accessed, as well as copies of referral letters and medical scans or tests.
- For community services, the assessment information may be provided by central assessment teams, such as MAC or NDIS. Depending on the situation, other stakeholders may also be present.
- An initial needs assessment also involves a screening process to determine the areas of client need. It is a holistic look at the areas of the client's presenting needs, risks, and the level of urgency with which they require services. This phase gives a picture of the client's eligibility and service provision requirements.
- The case coordinator will use this information to get an initial picture of the client's needs, preferences, priorities and aspirations. They need to understand what the client hopes to accomplish through the services they will receive.
- Once this has been established, a deeper assessment process is undertaken to gain a more thorough picture of each of the client's presenting needs.

Example

Establish rapport and ensure the service is appropriate

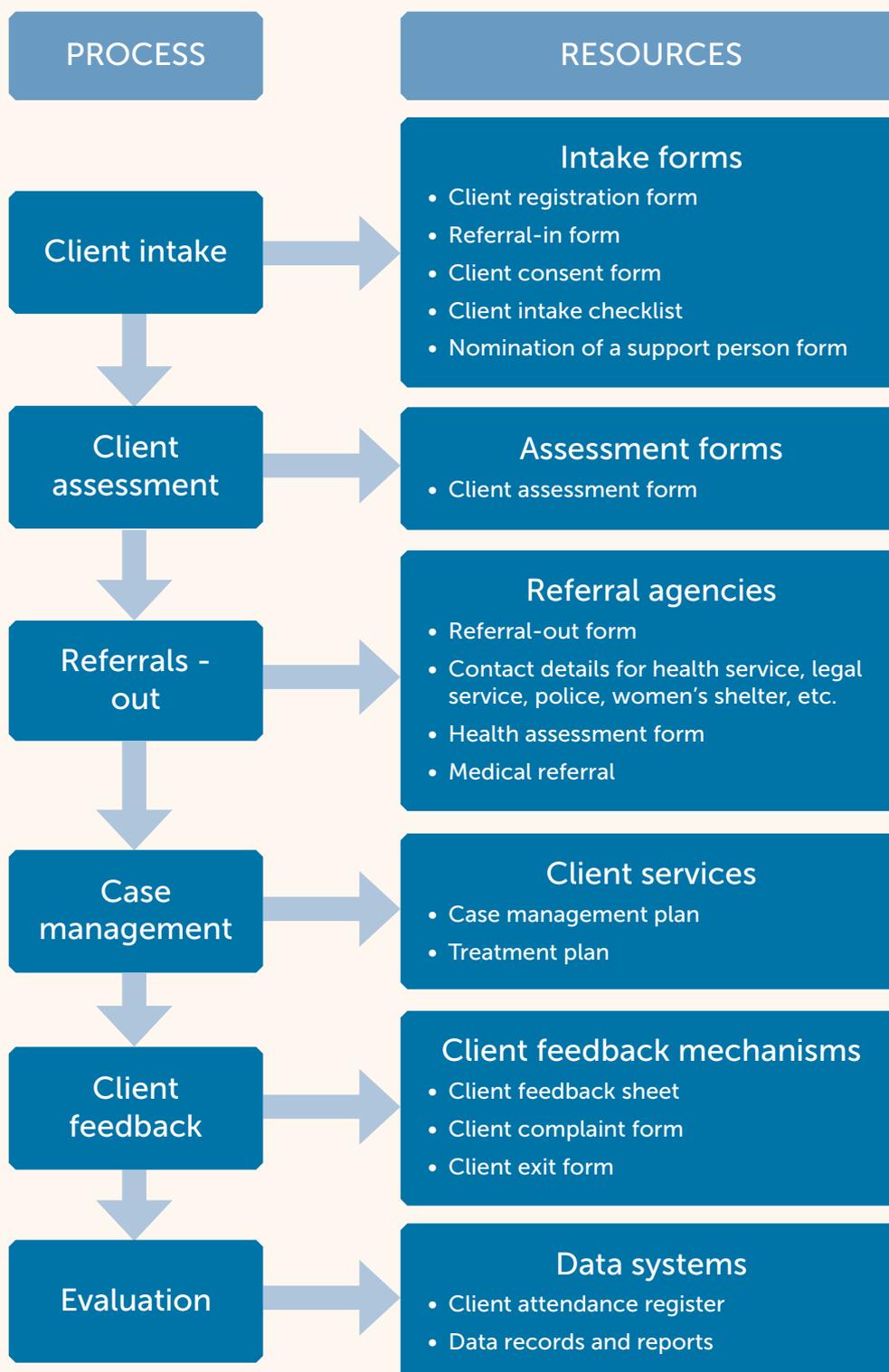
Maree is new to her role as a support worker in a disability organisation that provides day services to clients with mild intellectual disabilities. Her supervisor has given her a thorough induction and she has been shadowing her colleague over the last week to learn about the day program and meet the clients.

Today a potential new client, Simon, is being interviewed. Simon has arrived with his sister and Maree has been asked to conduct the interview. Maree will use the intake process document and collect information on Simon's needs. If Simon decides he wants to join the group, Maree will monitor his progress and record his attendance for her organisation's claims to the National Disability Insurance Agency (NDIA). After a few months, Maree will speak to Simon to determine if he is satisfied with the service and whether it meets his needs.

Here is a copy of the intake process given to her by her supervisor:



Client intake process flowchart





Practice Task 1

Question 1

Explain why it is necessary to build a relationship and make the client feel welcome.

Question 2

Which of the following are communication techniques you could use to help build rapport with your client? Tick all that apply.

- Sit or stand side on to the person.
- Use an open posture at all times.
- Lean slightly toward the person to show you are interested and engaged.
- Maintain appropriate eye contact, considering any cultural needs.
- Take a relaxed approach.

Question 3

Why should you explain to the client the benefits and appropriateness of the services offered by your organisation?

1B

Communicate effectively to provide quality service

Clear and effective communication requires insight into how a person is feeling and thinking.

Communicating effectively means understanding and responding to the emotional cues of clients. You must learn to identify the communication needs of your clients and communicate in a way that meets their individual needs and diverse requirements. Your ability to understand diverse perspectives will help you to develop positive relationships with the people you support.

Communication needs can be influenced by:

- the urgency of their needs – either real or perceived; for example, they may need help immediately or in the next week
- their emotional state; for example, they may be angry or frightened
- their physical state; for example, they may be ill, hungry or speech-impaired
- their previous interactions with services, such as patients who have been attending the healthcare service for some time
- their cultural background – their communication style may be based on religious beliefs and practices or what they consider to be norms of social etiquette
- their English language skills
- their understanding of how your service operates – they may or may not be familiar with the type of support your service can provide.

To meaningfully participate, clients must be assisted to understand the processes involved.

You should make a reasonable attempt to identify and address your client's communication needs as early as possible, and to use the communication methods that are most appropriate to them.

Communication requirements

- using alternative or augmentative communication, such as communication boards or a communication app
- calling on family members or others to support clients with diminished communication abilities
- engaging with a client's guardian (a person who is appointed to make decisions on their behalf)
- inviting a chosen family member to facilitate emotional or cultural safety
- providing information about the client's rights and responsibilities in audio, braille, plain English, Easy Read or another accessible format
- addressing issues involved in obtaining a client's signature, and verifying informed consent

Communication requirements

- arranging a person to interpret using sign language
- organising interpreting services for clients whose English language skills are limited.

Use active listening

Using active and reflective communication techniques will help you develop rapport with your clients by acknowledging them and showing you care. Build rapport by showing **empathy**, interest and understanding.

Active listening means being attuned not only to what a person is saying but also to what they are communicating non-verbally, and what they might *not* be saying. This is about observing and interpreting their demeanour as well as their words. This requires you to:

- pay close attention and focus on what the person has to say
- respond to the speaker, asking them to clarify information if you haven't fully understood
- paraphrase what the person has said to show that you have been listening and have understood
- encourage the speaker to continue
- understand the meaning and feelings being conveyed.

When speaking, always be patient, polite and considerate. Avoid using jargon or colloquial language.

Here are some examples of some active listening phrases.

'Do you mean...'

'Let me see if I understand...'

'Correct me if I am wrong...'

'As I hear it...'

'So, from your point of view...'

'I wonder if...'

Empathy

The ability to understand, share and identify the feelings of others.

Effective communication

Being empathetic does not mean that you always agree with the person, but simply that you acknowledge their situation and care about their wellbeing.

Communicating effectively is one of the key skills you need to master in your job. It will help you to deliver a high standard of service to your clients on behalf of your

You need to be genuine in your desire to help and in your interest in the person.



organisation. You must respect people’s individual differences – including cultural differences – in their communication styles and needs. You may need to adjust your communication style to the situation and individual client needs. For example, some people find it harder to explain their situation without getting emotional or angry, or there may be cultural differences in the protocols they use for giving and receiving information.

Here is a range of communication techniques you can practise in your role as a support worker.

Observe body language	Observing a person’s body language should give you an indication of how they are feeling and their level of comfort. Body language forms between 50 and 80 per cent of human communication. Body language can show many things, such as whether a person is nervous, afraid, angry, anxious or in pain. We can generally tell when someone is happy; that is, they are not feeling any discomfort or concern, and are feeling at peace with their current situation.
Pay attention to tone of voice and other vocal cues	The way a person speaks can provide clues about their emotional state. For example, the tone, pitch, volume, inflection, rhythm and rate of speech can provide useful information about how a person is feeling. Think about how you use your voice when you express sarcasm, anger, affection, fear, happiness or confidence. For example: <ul style="list-style-type: none">• A flat tone may indicate that the person would rather be elsewhere.• An abrupt tone may indicate irritation.• A high pitch can indicate nervousness, excitement, fear or anger.• A low pitch can indicate despair, sadness or loneliness.• A loud voice can indicate anger or aggression.
Get good at asking questions	Learn how to ask the right questions to collect the information you need to assist people with support needs. Asking the wrong types of questions could result in incomplete information, which in turn could mean a person does not receive the support they require. Open questions are used to encourage the other person to keep talking. These questions often start with the words what, why, when, how and who, and are used to encourage the other person to say what they know or feel. For example: <ul style="list-style-type: none">• Why do you think that happened?• How are you feeling?



Get good at asking questions (cont.)

Closed questions are often used to clarify information. They elicit single-word answers – often ‘yes’ or ‘no’. They can be used to constrain the conversation if necessary. For example, when people are angry, they may talk quickly and frantically. By asking a closed question, you can encourage them to stop, listen and focus on facts. For example:

- Has this happened before?
- Do you have anywhere to sleep tonight?

The responses to your questions show their understanding of what you are asking, and may be what the person thinks you want to hear.

When you ask a clarifying question, you demonstrate to the person that you are listening and taking the time to understand their needs. You would usually use a clarifying question in response to something a person says. Examples of clarifying questions include:

- How did that happen?
- Can you give me an example so that I can understand better?

Video: Communicating respectfully

Watch this video from Culturally Directed Care Solutions on how to communicate respectfully with older people:
aspirelr.link/youtube-elderspeak



Example

Communicate effectively and provide quality service

Linda is the receptionist in an allied health clinic. Her principle role is to greet people who come into the office or contact the clinic by phone. She answers questions, provides people with information and suggests who would be the appropriate person to make an appointment with. She also gives information on fees and the schedule of available appointments.

One morning, Linda hears the door opening, so she stops what she is doing and looks up with a warm smile. As a woman enters and walks up to her desk, Linda says, “Good morning, I’m Linda. What can I do for you?”

The woman speaks softly, saying that she’s in pain and would like to see someone who could help her. Linda notices that the woman’s eyes are puffy and bloodshot; she looks as if she’s been crying.



Linda knows from her training that people react and deal with pain differently. Linda gently asks some clarifying questions, such as, ‘Have you been to see any health professional before about your pain?’

Linda’s interaction with the woman is professional and friendly. She gives the woman her undivided attention and acknowledges her concerns, is prepared to listen and asks clarifying questions.

The role of an interpreter or translator

An interpreter or translator can help if there is a communication barrier stopping a client from understanding everything they need to know about their support. An interpreter’s role is to translate the spoken word in a live context, whether that be in a face-to-face setting, over the phone or in a video conference. A translator is responsible for translating written text, usually not in ‘real time’.

Interpreters and translators must understand exactly what is being communicated to the person receiving support.

Having interpreters and translators available means that people you support may be able to direct their own care, self-advocate, make a complaint, a request or a suggestion, or make their own legal, medical and financial decisions more appropriately and effectively.

When using an interpreter:

- always speak to the person you are supporting, not the interpreter
- allow the interpreter to finish before you start talking again
- don’t use medical terms or industry jargon that the interpreter may not understand or be able to explain.

The following groups of people may benefit from the services of a translator or interpreter.

Workers	Workers who support people with limited English language skills may need to use an interpreter to ensure the organisation has the correct information about clients. For example, workers must know each person’s health issues, food preferences, ability to self-direct, mobility needs and any special requirements. When communication is effective (through an interpreter) workers can develop an appropriate support plan.
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Clients	The people you provide support to may benefit from using an interpreter or translating service so they fully understand the service provided to them. Everyone must understand the nature of any documents they need to sign in relation to their care.
Family	Service users' family members and/or carers also need to understand the nature of the service provided to the person, particularly in regard to specific care and/or medication.

Choosing an interpreter

There are many factors to consider when selecting an interpreter for a client. Some of these are outlined below.

Interpreters from the same culture

Workplaces that provide care to people from more than one language group often have a register of interpreters with their names, contact details and the languages they speak. An interpreter from the same culture (in addition to speaking a language they understand) can make a client feel more comfortable.

Interpreters of the same gender

Workplaces usually try to use an interpreter of the same gender as the client. This may help the person relax when personal questions are being asked. For example, a woman who has a urinary tract infection or STI may not want to say this in the presence of a male interpreter.

Allow time

Interviews and conversations take longer when you are using an interpreter, as everything needs to be said twice. Make sure you allow plenty of time and don't try to rush things.

Professional interpreters and translators

Ideally, use interpreters and translators who are fully accredited. The following organisations can help you find accredited interpreters and translators:

- The Translating and Interpreting Service (TIS National) of the Department of Home Affairs can link you with accredited translators and interpreters.
- The Department of Immigration and Border Protection has a translating and interpreting service you can use.
- The Australian Institute of Interpreters and Translators (AUSIT) has over 750 interpreters, who speak over 30 languages.
- The National Auslan Interpreter Booking Service provides sign-language interpreters.

Also consider the costs – using a professional interpreter from an agency may cost money.



Other interpreters

Sometimes a professional interpreter is not accessible, and you may need to ask support from someone else, such as:

- other staff members
- members of a community group
- volunteers
- the client’s friends and family members.

Consider any privacy or confidentiality breaches that may arise from using non-professional interpreters and always seek the client’s consent before asking a friend or family member of theirs to interpret.

Sign language interpreters

People who are hearing impaired and use sign language may benefit from a sign language interpreter to help with communication.

Auslan is the official language of the deaf community in Australia. It is a form of signed communication using hand gestures. Auslan interpreters can be booked by phone or online via the National Auslan Interpreter Booking Service (NABS), which is funded by the Australian Government. People can use the service if they require sign language to communicate and would like an interpreter to book healthcare providers. NABS also provides resources for service providers.

You can access the Auslan interpreting service booking website at: aspirelr.link/nabs

The Auslan Signbank is an online video dictionary: aspirelr.link/auslan-dictionary

When booking an interpreter, keep in mind that some people may use Signed English or another signed language rather than Auslan.

Example
Recognise and support communication needs

Joseph is deaf and uses sign language. Joseph’s 70-year-old mother, Ming, emigrated from China and speaks Cantonese. Both Ming and Joseph use limited English, and in-depth communication can be difficult.



Several significant conflicts have developed between Ming and Joseph, and both have felt confusion and resentment when trying to discuss options for aged care for Ming. Danielle is the support person working with Joseph and his family.

Ming and Joseph agree to have a meeting to resolve some of their difficulties. Danielle books an Auslan and Cantonese interpreter. Danielle allows extra time for the meeting as using two interpreters will mean the meeting will take longer. It will be a complex discussion. There must be enough time for Ming and Joseph to express their views without feeling pressured.

Danielle allows for two and a half hours. The meeting is very successful. Ming says she has never had an opportunity to talk like this before. Both Ming and Joseph express their concerns and fears as well as their needs. The issues are not resolved in this one meeting, but good progress has been made. Some actions are decided on regarding what to do next. Ming and Joseph agree it would be useful to hold another similar meeting. They set a date for the next one.

Practice Task 2

Question 1

Give two examples of communication requirements your clients may present with that require you to adapt your communication method.



Question 2

Which of the following are examples of communication methods that can be employed with clients? Tick all that apply.

- Invite a chosen family member to facilitate emotional or cultural safety.
- Provide information about the client's rights and responsibilities in audio, Braille, plain English, Easy Read or another accessible format.
- Ask another worker to speak to clients that you find difficult to work with because you can't understand them.
- Address issues involved in obtaining a client's signature, and verify informed consent if needed.

Question 3

What is active listening? Provide an example of a phrase that demonstrates active listening.

Question 4

Describe three things you need to consider when engaging an interpreter to help communicate information to a client.

1C

Identify the client's needs and respond appropriately

To meet the legal and ethical requirements of your role, you need to understand your scope of practice and fulfil your responsibilities.

If you do not comply with your legal and ethical responsibilities, you risk breaching your **duty of care** obligations. You may not be responding to situations in a responsible or reasonable manner.

People who provide support to others in the community services sector should not attempt to carry out work that:

- is not specified in their job description
- cannot be performed safely due to lack of training or practical experience
- is unethical, illegal or outside the scope of the organisation.

Generally, support workers are responsible for obtaining and recording information, providing support, personal care or treatments, case management and some kinds of assessments.

Always seek assistance and advice from your supervisor when you are unsure. They can help clarify the boundaries of your role during orientation and refer you to your position description and workplace policies and procedures to follow.

You need to be able to explain your role clearly to your clients to avoid any misunderstandings, and set boundaries that will ensure it remains an honest and professional relationship.

The difference between legal and ethical obligations is described below.

Legal obligations

Legal obligations, including duty of care, require you to adhere to the laws and regulations that govern your area of practice. For example, you should be informed about your health and safety obligations and responsibilities when you start work, and how to address these within your scope of practice.

Ethical obligations

Ethical obligations include ensuring you understand and apply the ethical codes and practice standards that relate to your work. It is important that you understand your ethical obligation to maintain appropriate professional boundaries with service users.

Duty of care

A moral or legal obligation to ensure the safety and wellbeing of other persons.



Client needs and concerns

Part of your role involves identifying why the person has contacted your organisation.

If you are the first point of contact, you are responsible for collecting sufficient information to help the person articulate what their specific needs are. You can then provide information on the next steps or actions to take.

Often people understand they need help, but may be unaware of the types of services available. Sometimes people know exactly what they want or need, and other times they do not. Some clients may not be able to articulate their needs, for example, because of drug use or an intellectual disability. Or a person may discuss one aspect of support they are seeking, without mentioning other support needs.

Observation, listening and questioning skills are used to understand people's needs. The importance of understanding what exactly a person requires is outlined below.

Understand the client's needs
A person may present with an overt need; for example, they may ask for help to find employment. However, when you take the time to understand their needs better, you may realise that they have depression or a drug dependency that needs to be addressed before they can be successful in their job search. A client may have many different needs and it may be difficult to understand which need should be addressed first.
Clarify the client's needs
Your role is to both understand and clarify a person's needs. This may seem straightforward; for example, a client may want to make an appointment to see someone in your service. However, without clarifying what the client wishes to achieve by that appointment, you cannot know whether it will best suit their needs.

Scope of practice

You must not undertake tasks that are the responsibility of other professional or occupational roles. **Scope of practice** refers to the area of practice that people with specific qualifications or experience must stay within. Your scope of practice will be determined by your qualifications and experience and be specified in your position description. If in doubt, check with your supervisor.

If you are working as part of a multidisciplinary team it is crucial that you understand exactly what you are expected to do and your level of authority. You need to respond to your client from your stated level of responsibility. As a worker who provides support to others, you need to be able to recognise situations that are beyond the scope of your role.

Scope of practice

Procedures, actions and processes that a practitioner is permitted to undertake in keeping with the terms of their professional license.



Situations that may be beyond the scope of your role

- A community services worker does not diagnose conditions or provide advice on what exercises to do. These roles belong to other professionals, such as a medical doctor or physiotherapist.
- An allied health assistant does not provide treatments or give health advice without the supervision of a health professional, such as a speech therapist or podiatrist.
- Although many health and community workers receive some training in communication and customer service, this does not mean they are expected to deal with all customer complaints, especially if a client is aggressive and threatening. It is not your role to deal with it. Refer the person to your manager or supervisor.
- If a worker does not have supervisory experience or qualifications, they should not be expected to supervise others, as this may be outside of their scope of practice.
- Providing legal advice to a client is outside a support worker's scope of practice. It needs to be provided by a qualified lawyer or legal practitioner.

Work safely in your role

As a support worker, you are at the front line to offer assistance and provide services to your clients.

Health and safety legislation encompasses both employer and employee responsibilities for keeping safe at work. Your workplace will have work health and safety (WHS) policies and procedures in place and you should know where to find these and familiarise yourself with them. Ask your supervisor about the WHS roles and responsibilities of people in the organisation.

Access the WorkSafe document on working safely in community services here:

aspirelr.link/working-safely-comm-serv

Read more about working safely in people's homes at:

aspirelr.link/worksafe-qld-workplace-risks

You must be aware of and respond to risks that are present in your workplace. A workplace risk is a **hazard** that may cause harm, injury or ill health.

A workplace hazard is something in your workplace that poses a risk to you and/or your work colleagues. Hazards that you could be exposed to include anything that is a source of potential harm. This could include injury, illness, or damage to property or to the environment.

Once you have identified your client's needs, you may become aware of a situation that places you or your client at risk. You have a duty of care to report to your

Hazard

A source or a situation with the potential for causing harm, damaging humans, property and/or the environment.

supervisor when someone’s actions could cause harm to themselves or others, and act to avoid these situations.

Risk assessment

Determining the likelihood a hazard will cause harm, injury or ill-health and determining its possible consequence.

The following is an example of a **risk assessment** matrix that can be used to assess the risk of a potential hazard. Consider the likelihood and impact of a work activity you have been involved in causing harm and use the following matrix to estimate the risk level.

LIKELIHOOD	VERY LIKELY	Acceptable risk Medium	Unacceptable risk High	Unacceptable risk Extreme
	LIKELY	Acceptable risk Low	Acceptable risk Medium	Unacceptable risk High
	UNLIKELY	Acceptable risk Low	Acceptable risk Low	Acceptable risk Medium
		MINOR	MODERATE	MAJOR
		IMPACT		

Refer to your organisation’s policies and procedures for information on how to report risks to your supervisor or WHS officer.

Report your observations to a supervisor

Follow the procedures for reporting your observations after initial contact with a client. You must promptly report/discuss any concerns, problems or risks with your supervisor, either verbally or in writing.

When completing a report, remember that only qualified staff such as psychologists, occupational therapists and physiotherapists can make a full assessment of a person’s situation and provide them with advice or professional treatment.

Here are some examples of information you would need to report/discuss with your supervisor.

Risk of abuse
<p>Community services staff at all levels have a legal and ethical obligation to report known or suspected abuse, according to organisational protocols. This includes mandatory reporting requirements.</p> <p>When you suspect abuse has occurred or you have witnessed abuse, you must act quickly to ensure action is taken immediately to prevent further abuse from happening or escalating. When reporting, follow your organisation’s policies and procedures. Besides verbally reporting to your supervisor, you will be required to document the report.</p>

Mandatory reporting

The legal requirement of people in certain job roles and industries to report suspected or actual abuse to the police.



Unsafe behaviours

Unsafe behaviour is any behaviour that places you, the person accessing your service, or anyone else at risk of physical or emotional harm.

Unsafe behaviours include:

- shouting or having intrusive conversations
- using threatening or abusive language or behaviours, for example, swearing, making offensive remarks or damaging property
- harassing or bullying workers or other service users
- making derogatory, discriminatory or demeaning remarks or gestures, for example, making racial or sexual comments
- using drugs, consuming alcohol or being drug- or alcohol-affected on the organisation's premises
- behaving unlawfully, for example, stealing, drug dealing or being physically violent
- threatening the safety of workers or others.

Work environments

You may be working in a new or unstable environment, such as a client's home. Discuss any safety concerns with your supervisor. They may be able to suggest ways to control the risk such as:

- ensuring that a WHS audit is conducted to identify any hazards before services are delivered
- determining if the environment is appropriate for staff to attend
- determining any control measures/strategies required, such as not attending after hours
- having robust processes in place to ensure that support workers do not enter unsafe environments.

Stress and exhaustion in workers

Stress may result from the emotional and psychological requirements of the role. A supervisor can offer support and advice; they have a duty of care to monitor your health and wellbeing. Stress can result from:

- clients who self-harm
- clients who die
- exposure to family/domestic violence
- ongoing exposure to trauma.

Exhaustion is also something that needs to be monitored and reported. This could be due to:

- working long hours
- having a large case load
- having inadequate human resources (i.e., not enough support workers for the number of clients)
- dealing frequently with contingencies and crises.



Clients at risk

Clients must be protected from hazards and the risk of harm must be controlled. Clients may be at risk from themselves, others or their environment.

Clients with complex needs may experience a range of risks in relation to their physical, psychological and psychosocial safety. Qualified professionals will be needed to identify and respond to these complex risk areas.

If a support worker has any reason to suspect that a client may be exposed to these or other risks, you must respond to them and report them according to organisational protocols.

Clients may be at risk from:

- self-harm
- suicide
- family and domestic violence
- child abuse or neglect
- elder abuse
- medical issues
- harm from alcohol or other drug (AOD) use
- reduced capacity due to physical or mental disability.

Example

Identifying and responding to the person's needs

Chen works in a first-point-of-contact position in a local community service that provides support for homeless young people. Referrals can be made by the individual or by a service on their behalf. Chen notices that a young girl is standing in the doorway. She looks nervous and ready to run. Chen nods at her and mouths 'hello' with a smile, hoping to encourage her to feel comfortable about coming in. This strategy works and the girl approaches Chen and sits down.

The girl appears sullen, scared and anxious. She says in an angry and defiant voice that she is tired of the fights at home, hates her father and has run away from home, but is now sick of living on the streets. Chen notices that she sits with her legs crossed, her arms folded across her body and her whole body hunched up.

Chen reports his observations and discusses his concerns with his supervisor. Chen's role is to determine whether people accessing the service are eligible for emergency housing. In this case, he feels that his observations warrant further support for the girl. When reporting his observations, he refers to his notes, where he recorded the following:



- body language – closed (legs crossed, arms crossed across body, hunched up), thumb-chewing
- demeanour – scared, sullen, anxious
- non-verbal communication – angry/defiant appearance
- verbal communication – swore, mentioned fights, says she hates her father

Chen's supervisor refers the girl to a specialist agency that has experience with vulnerable young people.

Practice Task 3

Question 1

List two things you can do to confirm your level of responsibility for your role.

Question 2

Explain why it is important to clarify the needs and concerns of your client.



Question 3

Give one example of a report you might have to prepare for your supervisor about a client. Why is this report necessary?

1D

Act to directly resolve conflict or refer to appropriate personnel

It is common for different kinds of conflicts to arise in your work with clients.

Your client may need help resolving **conflict** they have with other people, such as partners, family members, their children or their friends. The conflict may be misdirected at you, simply because you are there, or because you are a representative of the service or organisation.

Conflict
A disagreement of opinions or principles.

Your client's emotional state may result in them expressing strong feelings. Your client may experience conflict with you because you have a relationship with the client and that relationship could trigger feelings of vulnerability or anxiety. You could end up on the receiving end of strong negative emotions because you are working at the front line of the person's issues and they may direct their frustration towards you.

The following are some examples of emotional states that a client may present with.

Emotional states	
• Distressed	• Angry
• Fearful or scared	• Confused
• Anxious	• Impatient
• Amused	• Stressed
• Disgusted	• Frustrated

Avoiding conflicts

Whenever you work with people who are distressed, aggressive or who have a cognitive impairment, try to avoid confronting issues that will aggravate, frustrate, confuse or discourage them.

Techniques for avoiding conflict can be useful as a way of delaying or diffusing situations of conflict or potential conflict. These can be used as a temporary measure to de-escalate a situation and buy some time to research or investigate an issue.



Conflict avoidance techniques include:
• changing the subject
• redirecting the conversation
• putting off a discussion until later, including until the person has calmed down
• not bringing up the contentious subject.

Defuse the conflict

Use your communication skills to resolve conflicts with clients, where possible.

Communication is the best response to conflict. This involves sharing appropriate information, listening attentively, and communicating openly and effectively with the person.

Below are key communication skills you will need to develop and use effectively.

Be assertive
Assertiveness is different from aggression. Being assertive means being self-assured and confident. If you are assertive, you are more in control of the situation. Use positive, clear language and maintain positive, open body language. Avoid raising your voice, but speak audibly and clearly. Be clear about your own position. For example, if you are defusing a conflict, you may say, 'Okay, let's step back for a minute and think about this situation calmly. Then we can talk.'
Listen attentively
Listening is at the core of good communication. Listen to the other people involved in the conflict. Encourage each person to share their perspective and encourage all others who are present to listen and pay attention to them. Try not to interrupt; instead, wait for the person to finish speaking. Paraphrase and summarise what you have heard to ensure you have understood and demonstrate you were listening. For example, you may say, 'It sounds like you are frustrated with the service.' Wait for the person to clarify that this is what they meant.
Be empathetic
Empathy is the ability to see a situation from another person's perspective. Be empathetic while you listen. Try to get inside their world and imagine how things look from there. For example, if a person appears angry, you may use empathy to try to understand why they may feel angry, rather than taking it personally and focusing on the fact that they are angry with you.



Allow time

The cause of the conflict may not be immediately apparent, especially if the situation is emotionally heightened. Allow people – and yourself – time to cool down before trying to verbally resolve a situation. When people are stressed and agitated, it's hard, if not impossible to think clearly. Taking a break could involve stepping into another room for a moment, or taking a day to think about what happened before addressing the conflict directly.

Take ownership

If you are involved in a conflict, one of the most powerful things you can do is to take ownership of your part in it. This can be extremely difficult, particularly if the conflict is very present and emotions are high. When you take ownership for your part, however, the situation is likely to defuse, or at least change. When you take ownership, you encourage the other party to take ownership of their part too.

For example, if the conflict is based on a misunderstanding, accept that you may have not spoken clearly enough. Ask if there is any way you can improve the situation.

Encourage win–win solutions

A win–win solution is when all parties are satisfied with the outcome. Help people to say what they hope to achieve from the situation and identify where overlaps exist. Both parties should be involved in identifying possible solutions and both should agree on the solutions before proceeding.

Video: Responding to conflict

Watch this video from the Victorian branch of Relationships Australia about how to manage and respond to conflict:
aspirelr.link/yt-responding-to-conflict



Organise referrals

It may be necessary to refer a client to another organisation that has the skills and expertise to assist them.

To access specialist and publicly funded services, a referral may be required. A referral is a formal document used to introduce a client to an organisation or practitioner as a bridge to them accessing their services.

Clients may enter your service on the basis of a referral from another organisation or practitioner. You may be required to complete a referral form yourself or provide information to your supervisor so they can prepare a referral to other services for your clients.



Information required in a referral
<input type="checkbox"/> The client's name, address, phone number, email address, date of birth and next of kin
<input type="checkbox"/> Details of a representative, advocate or substitute decision-maker (if applicable)
<input type="checkbox"/> The reason for the referral
<input type="checkbox"/> Brief history outlining why the client requires services from the organisation
<input type="checkbox"/> Medications the client takes (if the referral is for medical or other allied health services)
<input type="checkbox"/> Level of urgency with which the client requires the service
<input type="checkbox"/> The referring party's details and relationship to the client
<input type="checkbox"/> Important cultural, religious or personal requirements, such as being looked after by a female staff member
<input type="checkbox"/> Communication needs, such as requiring an interpreter
<input type="checkbox"/> Relevant behavioural issues
<input type="checkbox"/> Details of pending legal matters, such as court orders
<input type="checkbox"/> Power of attorney arrangements (medical, financial, etc.)

Refer to an appropriate service

When the need for a referral has been confirmed, discussed and consented to by the client, the services need to be confirmed.

You may need to determine what services are available for your client and how accessible they are. Some organisations have a database with details of services offered and eligibility criteria. You may also need to consult your supervisor or colleagues and search online for a broader range of service providers.

You may be asked to help access a service and advocate on behalf of your client. People with cognitive, intellectual or sensory impairments, or from culturally and linguistically diverse (CALD) backgrounds, may require additional assistance. You may also need to provide assistance to people who are unmotivated or resistant to planning. In these situations, it may be necessary to contact the service on the client's behalf. This should be with their consent and preferably in their presence.

Clients may need a referral for a variety of reasons, but it is usually because another service agency or professional would be better able to meet the client's needs, due to their expertise or specialisation in a particular set of skills. For example, a person may require:

- medical treatment
- psychological counselling
- personal care support
- help with employment or housing.

The service you are referring your client to may be within your organisation (internal referral) or in another organisation (external referral).



Examples of referral services	
• Mental health services	• Culturally specific services
• Medical services	• Diagnostic or imaging services
• Employment services	• Counselling services
• Criminal justice services	• Financial support services
• Social services	• Drug and alcohol support services
• Housing services	• Welfare services

Example

Working in situations of conflict

Harriet has dementia. She has lived independently with some home support services for the past ten years, but a recent assessment reveals that Harriet requires specialist dementia services because she has become physically aggressive and has started lashing out at her family and support staff.

A meeting is arranged with Harriet and her daughter, Sarah, where the information is presented. The support worker and the assessment team have gathered brochures and documentation about local aged care services, and have information on costs, location and privacy policies.

Sarah and Harriet argue about what each service offers and how each might meet Harriet's needs. Harriet's first preference is private residential care close to where Sarah lives, but Sarah points out that the cost will exceed Harriet's pension. The team do not interfere in the obvious conflict between mother and daughter and after some heated discussion, Harriet decides to access the government-funded aged care home.



Practice Task 4

Question 1

How can conflict avoidance techniques be useful when there is a conflict with a client? Give an example with your response.

Question 2

Describe three examples of communication skills that can help to deal with or resolve conflict.



Question 3

Why is it necessary to refer clients to other professionals or organisations?

A large, empty rounded rectangular box with a thin black border, intended for the user to write their answer to the question.

1E

Respond to complaints in line with organisational policy

Every person who receives a service has the right to make a complaint or report a concern about the service.

Complaint

Communicating something you believe is wrong and asking for it to be fixed.

Having the right to complain confers dignity and respect on clients. Most services have specific policies and procedures for managing **complaints**, both internally and externally. The person making the complaint has the right to explain what they are dissatisfied with. Depending on the service context, a support person may be present; this may be an informal advocate, a family member, friend or a formal advocate. The facts of the situation must be investigated and discussed.

The person against whom the complaint is made has a right to know the nature and wording of the complaint, and must be given the chance to present their side of the story. They may also choose to have a support person present at any interviews. This may include a fellow worker, manager or union representative.

Procedures for making complaints must be transparent and easy for clients and their families to access, regardless of disability, age, financial disadvantage or other difficulty. You must help your clients to access complaint procedures, and never discourage them from making a complaint or treat them differently because they have made one. All community, health and social services must welcome complaints, and must show evidence that they have acted on or responded to complaints appropriately.

Information about making a complaint must be provided in a way that the person can understand, and you must check their understanding after providing the information.

For example:

If the person:	You might:
has low literacy	read the material to them, and ask questions to ensure they have understood
speaks a language other than English	provide the material to them translated into their own language
is a child or has an intellectual disability	access resources to help explain their rights using pictures, easy English words or short videos
has dementia.	explain the person's rights to them in the presence of a family member or advocate.



Video: DHHS out-of-home care

This video was produced to help children understand their right to complain in out-of-home care: aspirelr.link/yt-dhhs-out-of-home



An overview of the principles and processes for best-practice complaints management can be found here: aspirelr.link/betterpracticeguides

Avenues of complaint and appeal

Complaints about services often relate to a failure to meet a service standard.

In many areas of health and community services, the service provider must be registered in order to provide services. Registration requires the service provider to adhere to quality standards in the delivery of service to their clients.

If an organisation is not able to resolve a complaint, they should assist the person to take their complaint to an external body. This is usually the industry regulator (though it may depend on the sector).

Service standards such as the Aged Care Quality Standards provide clear benchmarks for the area of complaints management. For example, Standard 6 requires that organisations have a system to resolve complaints that is accessible, confidential, prompt and fair. The system should also support all consumers to make a complaint or give feedback. Resolving complaints within the organisation can help to build the relationship between the consumer and the organisation.

For more information, go to:

- aspirelr.link/aged-care-quality-standards
- aspirelr.link/ahpra

Similar standards for other areas of health include The National Standards for Mental Health Services 2010. To read more about the standards, go to:

aspirelr.link/national-mental-health-standards

The National Standards for Disability Services (NSDS). There are six revised national standards. More detail can be found here: aspirelr.link/nsds

As part of your work role, you will have to read and interpret organisational policies and procedures. Unlike an act of legislation, which is written into the law, a policy is developed by the organisation itself, and outlines their requirements, processes and rules in keeping with legislation.



Procedures are practical steps or guidelines that staff must follow in performing their duties. They are processes that the organisation feels are the safest and best way to follow laws and regulations on matters such as health and safety, making referrals, responding to behaviours of concern, and fulfilling duty of care and privacy obligations.

Complaints management process when a complaint is made	
1	Raise the concern or complaint with the appropriate person.
2	Resolve the issue internally.
3	Resolve the issue externally. If the complaint cannot be resolved internally, depending on the service context, it may be referred to an external complaints body or advocacy service.

Seek advice to resolve concerns or issues

There are likely to be times when you need to seek advice from someone with more experience in relation to a complaint or issue.

Discussing it with your supervisor or an expert can provide you with insight and enhance your work experiences and skills. This may be an expert within your organisation or external to it. Your supervisor may be able to provide you with information or suggest who or where you can seek the information you require. Use your research skills to search the internet for contacts or consult the referral list used by your organisation. You may need to seek permission from your supervisor, as some experts charge for their advice.

People you may need to seek advice from are outlined below.

Other staff
Your supervisor, experienced staff or staff with specialisations may be able to assist you. For example, they may be trained in behaviour management, have experience working with CALD clients or speak another language.
Consumer groups
These are generally groups of volunteers whose aim is to provide help and support to people with particular needs. There are a range of consumer groups, including support groups for carers, people living with chronic pain, people who need assistance with financial management and people wanting to access playgroups for their children.
Clinical mental health services
Your organisation may have a list of organisations that provide services to people with mental health needs. Consult with clinical and community support services for young people, adults and older people to find out more about standards of practice and service in the mental health sector.



Acquired brain injury services

Acquired brain injury could be the result of an accident, illness or alcohol/drug misuse. There are organisations that provide specialist support to people who have acquired brain injuries. They support mental, emotional and physical wellbeing, and encourage independence and social inclusion.

Specialists

The key specialists in community services organisations are psychologists and counsellors. These people can be critical for people with complex needs, particularly when the specialist knows the person and is involved in their treatment. Many specialist medical practitioners offer different health services. Most community services organisations hold a list of these.

Community-based support services

Community-based support services include aged care and support services, multicultural services, children's services, community health and wellbeing programs, housing, transport, finance and employment support services.

Police

The standard procedure in the event of an emergency is to phone 000 and explain the situation to the operator, who can arrange for the appropriate response. It is good practice to have an established arrangement with the local police station. Some community services organisations have a formal agreement with the police because they frequently require their assistance.

Ambulance

If a person accessing your service is in a critical situation, ongoing communication with an ambulance in transit may be necessary. Many community services organisations have a qualified first-aid officer or nurse on duty who should be on hand to talk to the ambulance staff if required. Your organisation may also have an arrangement with the local hospital to provide advice over the phone.

Example

Respond to complaints in line with organisational policy

Read the following workplace example to see how the concepts you have learned are applied in a real-life situation.



The following is a procedure for responding to client complaints made by phone.

Procedure for responding to a client complaint made over the phone

Follow these steps:

- Ask for their name and write it down.
- Use their name during the conversation.
- Ask what they are making a complaint about and write down the details.
- Let them know you are listening to them.
- Once they have finished, repeat the problem back to them so they know you have heard them and to ensure the details are correct.
- Tell them that you will pass on the information to a supervisor/manager who will be in contact with them shortly.
- Ask for their contact details. Repeat back the details to confirm you have accurately recorded them.
- Apologise for the problem/difficultly they have experienced.
- Confirm again you will pass the information on and that they will get a response as soon as possible.
- Before finishing the call, say, 'Thank you [name] for taking the time to contact us, [the manager] will be in touch very soon'.

Note: The caller may be angry or upset. Remain polite and calm at all times. At the end of the conversation, record the conversation in the complaints register, including the date and time of the call and your name.

Example

Provide information on rights of appeal and avenues of complaint

Angela is 19 years old and is experiencing family violence. She has a three-year-old son, and they are currently living in emergency accommodation. Angela is feeling threatened by one of the workers, whose manner towards her is aggressive and confrontational. On one occasion, the worker pushes Angela out of the way and Angela falls against a wall. Angela mentions this incident to her case manager, who encourages Angela to make an official complaint to the organisation. The case manager shows Angela the policy and assists her with lodging the complaint. Angela is concerned that the worker will find out and threaten her further. The case manager assures Angela that her complaint will be treated confidentially.



Practice Task 5

Question 1

Outline the typical steps of a complaints management policy/procedure.

Question 2

Which of the following are examples of policies that you would need to read and understand as part of your job? Tick all that apply.

- Referral policies
- Policies for dealing with behaviours of concern
- Personal items policies
- Intake processes
- Health assessment policies

Question 3

Give three examples of appropriate sources you could refer to for advice on resolving issues regarding service provision.



Summary

- An initial interaction with a client can significantly affect their level of satisfaction and lay the foundation for how they interact with the service.
- Use your empathy and skills in questioning, listening and positive body language to develop rapport.
- Explain the benefits of the services to the client so they understand and can make the decision for themselves.
- Identify the communication needs of your clients and communicate to meet their individual preferences and requirements.
- Engage an interpreter or translator where needed, so non-English speakers can better direct their own care, self-advocate or make a complaint, and make their own legal, medical and financial decisions.
- Develop observation, listening and questioning skills to better understand people's needs and concerns.
- If you work in a multidisciplinary team, you must understand exactly what you are expected to do and your level of authority.
- Conflict avoidance techniques can be employed as a way of delaying or defusing a conflict.
- Clients usually need a referral because another service agency or professional is better able to meet the client's needs because of their expertise or specialisation.
- Every person who receives a service has the right to make a complaint or report a concern about that service.



Learning Checkpoint 1

Establish and maintain an appropriate relationship with people accessing services

Part A

1. Identify three ways you can establish rapport with clients and make sure the service you are offering is appropriate and in their best interests.

2. Different clients will require different sets of communication skills. Give three examples of the communication needs you may identify in your clients.



3. Which of the following statements about clients benefitting from having an interpreter present are correct? Select yes or no for each one.

a. With an interpreter present, clients may be better able to direct their own support.	Yes / No
b. Interpreters often stop the person from self-advocating.	Yes / No
c. Having an interpreter there means clients may be able to make a complaint, request or suggestion.	Yes / No
d. With an interpreter there, clients can often make legal, medical and financial decisions more appropriately and effectively.	Yes / No

4. Explain what might happen if a worker does something beyond their scope of practice. Give an example that illustrates a WHS risk.

5. Give two reasons why it is good practice to follow guidelines for responding to a complaint and to seek advice about problems a client is having with the service provider.



Part B

Read the case study, then answer the questions that follow.

Case study

Josephine is a 40-year-old with Down syndrome who is being cared for by her mother, Nancy, who is 65 years old. Josephine usually attends a day centre program five days a week, but lately the staff have noticed that her attendance has been sporadic. On the days she does attend, the staff notice that she is grumpy and not her usual friendly, outgoing self. Also, her clothes are often unwashed, and her hair not brushed. The staff know that Josephine and her mother often argue and this conflict has led to Josephine leaving home and moving into respite care on more than one occasion in the past.

Dee is a support worker at the day centre. She knows Josephine well and believes that these changes are out of character for her. Dee discusses her concerns with her supervisor who suggests that she explain the situation at the upcoming team meeting. Dee suggests that an assessment may be needed to determine what factors have contributed to Josephine being unhappy and the lack of personal care.

Dee explains to the team what she knows about the relationship between mother and daughter, but understands that dealing with this directly is outside of the scope of her job. She knows she will need to refer the situation to a more experienced worker.

1. Which of the following are actions Dee took to help resolve the issue she observed? Tick all that apply.
 - She discussed her concerns with her supervisor.
 - She explained the facts to the team.
 - She suggested they visit their home to see first-hand what is happening.
 - She suggested an assessment may be necessary.
 - She planned to refer the issue to a more experienced worker.

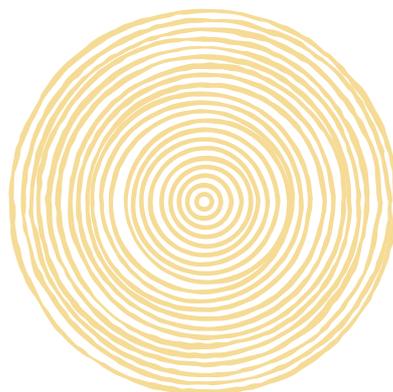


2. Why did Dee identify the need to refer the case to another team member?



Topic 2: Act in a respectful manner at all times

- 2A Respect clients as individuals
- 2B Respect and maintain confidentiality and privacy
- 2C Follow procedures for addressing behaviours of concern



2A

Respect clients as individuals

If you provide direct support services in community services and health contexts, you will meet and interact with a wide variety of clients and their families.

Your organisation's customer service model should detail the standards, policies, procedures and protocols that function together to provide high-quality service to clients.

High standards of service must be consistent and actively employed by all workers. In this way, clients can be sure to receive the information, support and services they need.

Here are some characteristics of excellence for an organisation to aim for in their customer service model.

Behaviours reflecting excellent service

Service encompasses a range of specific behaviours, such as listening actively, communicating and explaining clearly, questioning and summarising information, showing empathy and being positive. It also includes the extent to which the organisation provides services to meet the needs of its clients, and has policies and procedures in place to ensure service is delivered to clients consistently and to the desired standard.

Quality of service

Service is considered to be of a high quality when an organisation treats its clients with courtesy and respect, provides information and advice to meet their needs, offers quality services, refers to others if required and handles complaints fairly, promptly and effectively.

Effectiveness of service

Service is difficult to measure. Often clients become aware of certain aspects of a service when they experience a problem with it. The effectiveness of services offered by an organisation can be measured through surveys and feedback sought from all stakeholders, including service users and other people who interact with the organisation such as IT or HR departments. The organisation can use feedback results to improve their service to clients.



Quality employees

The standard of service an organisation provides is dependent on the quality of its staff.

Every staff member must have the knowledge and skills needed for their role. Think about the range of skills and knowledge required to provide a consistently high level of service to people across all of their interactions with an organisation.

Workers

An organisation interviews and screens people during the recruitment process in order to employ people with the skills required for their different roles.

In addition to qualifications and prior experience, it is vital that workers have other skillsets so clients receive the best possible service. This will vary according to the role, but may include excellent interpersonal and communication skills, thorough knowledge of the organisation and its operations, being a team player and having good decision-making abilities.

Training

All workers should be provided with training to provide a high standard of service. They need to be trained in understanding and using the organisation's policies and procedures, such as how to respond to queries and what communication methods to use in different settings. Ongoing training and professional development should be offered so the skills and knowledge of workers is always up to date and regularly refreshed.

Best practice

Quality service can be achieved when an organisation makes it a consistent, daily priority to ensure that people are treated fairly and offered the best possible service. This means that a commitment to quality service is championed by every area of the organisation.

Show courtesy and respect to all people

First impressions are important. Showing courtesy in all dealings with clients means being polite and showing consideration for their personal situation and circumstances.

This requires demonstrating polite behaviour, such as offering clients a seat and a drink of water. Being courteous also means speaking in a friendly manner that makes clients feel welcome.

Respect is more than just politeness; it is having meaningful regard for someone. Through your interactions you can show all your clients and their support people and carers that you have a good opinion of them, and demonstrate qualities that will build rapport, mutual respect and trust.

Here are some important qualities that demonstrate respect.



Genuineness or congruence

Be genuine in the interest you show in the person you support. You can demonstrate this by being 'congruent' between your verbal and non-verbal messages, that is, your non-verbal communication (body language, demeanour, tone of voice, etc.) matches what you say in words. By being verbally and physically congruent, you can help build trust and communicate clearly.

Unconditional positive regard

Respect the person you are supporting by showing them unconditional positive regard. This means putting your opinions, judgements and biases to the side and simply accepting the other person unconditionally. This is a wonderful interpersonal quality and skill to develop. It helps the person to have better self-regard and to value their own experiences.

Empathy

When you have empathy, it means that you seek to understand the person's perspective or internal frame of reference. It's about putting yourself in their shoes and having kindness and consideration for their situation.

Collaboration

Be prepared to work collaboratively with others, first and foremost with the person you support. This demonstrates to them that you respect their ability to make decisions that best suit their needs. If you do not actively encourage people to participate in decision-making about the services they require, you may disempower them and inadvertently diminish their self-respect.

Collaboration
An approach that involves people working together to accomplish common goals.

Demonstrate respect in your work

When offering a service to someone, you must listen to and respect their perspective. Focus on their capacities and strengths in order to support good outcomes. By seeing each person as a unique individual, with their own life history, personality, experiences, preferences and challenges, you treat them with the respect and dignity they deserve.

Here is a summary of some of the principles and practices used in community services to demonstrate respect. Many of these principles apply to the delivery of services where the patient is involved in decision-making and encouraged to make choices.

Person-centred approach

A **person-centred approach** is designed to promote empowerment. This means ensuring the service meets the person's needs and encouraging them to make decisions about their own lives. It is about respect for people and their values, needs and individual preferences. Person-centred care aims to create a partnership and teamwork between the person, their family and the workers offering support. The client should be at the centre of care, and services should revolve around the client rather than around funding or other factors.

Person-centred approach
Providing tailored support for each person and taking time to learn about their individual preferences, needs and goals.



Consumer-directed care

Known as CDC, consumer-directed care enables people with support needs to make decisions about the support they receive rather than those decisions being made by service providers. It allows for flexibility in the timing and scheduling of services. This approach to service provision and this model of funding is essential if people are to have choice and control over their own lives. It is founded on the premise of person-centred care, but with the added feature that people can use their funding to get the services they need in the ways that suit them.

Flexible service model

This refers to how and where aged care services are delivered. Services can be provided in a range of settings (e.g., transitional care, multi-purpose services and innovative care) as well as providing support at a time that suits the person.

Strengths-based practice

Strengths-based practice (SBP), or a **strengths-based approach** to community services identifies and uses a person's inherent strengths and interests to assist with growth and empowerment. SBP focuses on the client's potential, strengths and capabilities, and engages people with respect and dignity.

SBP strategies include:

- engaging the person in capacity-building
- empowering the person
- recognising the person's strengths, resources and resilience
- affirming and supporting the person's potential.

Social justice and **inclusion** principles

Social justice refers to the equal distribution of wealth, opportunity and privilege in a society. This means that, along with social inclusion, every person should have the same access to community resources and opportunities as others in the community.

These principles recognise that people have much to contribute to their community and that social inclusion supports recovery through formal connections such as employment, as well as through informal networks such as participation in neighbourhood relationships.

Social exclusion can occur when people experience discrimination, unemployment, illness, poverty and family breakdown. For example, mental illness can cause people to be excluded from their community because of difficulty maintaining employment that may then lead to poverty, discrimination and stigma. Poverty can be a significant barrier to accessing social and recreational activities or to obtaining resources and services, such as transport, that people need in order to engage with the community.

Strengths-based approach

Recognises that all individuals are resourceful and resilient experts in their lives, and can progress in a way that enhances their quality of life.

Inclusion

Providing equal access to opportunities and resources for people who might otherwise be excluded or left out.

Human rights

Respecting **human rights** is about recognising the value of everyone, regardless of their age, gender, sexuality, background, abilities, where they live, what they look like, and what they think or believe.

Human rights are based on principles of equality and respect, shared across cultures, religions and philosophies. They are about treating everyone fairly and

Human rights

Fundamental rights and freedoms that apply to all people, setting norms for standards of human behaviour.



giving them the chance to make genuine choices in their daily lives. Respect for human rights underpins the values and principles of health and community services, and should always be applied. This respect allows people to contribute to society and to feel included.

Basic human rights include the right to:

- basic necessities, such as food and water
- freedom from torture and other inhumane treatment
- justice and a fair trial
- free speech
- religious freedom
- freedom from discrimination and abuse
- an adequate standard of living, education and health.

As a person working in the community services or health industry, you are also a human rights worker. This means that as part of your daily work tasks, you are ensuring that the human rights and needs of your clients are being met.

You can read more about Australia’s commitment to human rights here: aspirelr.link/aus-human-rights

Here are some examples of how human rights can be integrated into work practices, procedures and policies.

Practices
The workplace should inherently support people’s human rights and needs. Workplace practices will observe the right to dignity, privacy, security and safety.
Procedures
Workplace procedures are step-by-step instructions that underpin practices. For example, health and safety procedures ensure people remain safe at work.
Policies
Policies inform procedures and practices. For example, an anti-discrimination policy is designed to ensure that all individuals are treated fairly and equally.



Respect individual differences

Community services work is based on a set of core values.

These values state that every person has the right:

- to be treated with respect and dignity
- to have equal opportunity and social justice
- to **self-determination** and to be as independent as possible
- to freedom from **discrimination** – no person should be discriminated against on the grounds of race, ethnicity, colour, age, gender, sexual orientation or disability.

When providing services to people of diverse backgrounds and abilities, consider the following factors.

Social background

- Be aware that a person's personal circumstances may influence their behaviour.
- Treat all people equally and avoid making assumptions, either positive or negative, based on their social background.
- Recognise social disadvantage and work to increase social justice and inclusion wherever possible.

Cultural background

- Cultural and ethnic background may influence behaviour in various ways, for example, in expectations about gender roles and what is considered polite or impolite.
- Learn as much as possible about an individual's cultural and ethnic background so you can provide appropriate services.
- Respect all people's cultural and religious beliefs.
- Use appropriate cross-cultural communication strategies and/or interpreters when necessary.

Physical abilities

- Recognise that most people with physical disabilities do not have intellectual disabilities as well.
- Work with a person-centred focus so the person has the opportunity to make decisions and choices about the services that best suit their needs.
- Focus on what the person can do, not on what they can't do.

Mental abilities

- Treat people with intellectual disabilities with the same respect and courtesy as you would treat others.
- Avoid talking to people in an overly simplistic and patronising way.
- Encourage decision-making and self-determination as much as possible.

Self-determination
A person's right to have control over their own life and make independent choices about decisions that affect them.

Discrimination
The act of excluding or treating a person differently based solely on an attribute such as disability, age, gender, race or sexual orientation.



People from culturally and linguistically diverse backgrounds

Cultural and linguistic diversity contributes to the richness of Australian society.

Australia is often called a multicultural society because there are people from a wide range of cultural backgrounds, speaking many different languages, in the population. You will encounter this diversity among your clients and colleagues.

Legislation and associated government policies and regulations relevant to working with culturally and linguistically diverse people include federal and state anti-discrimination acts, equal opportunity acts and human rights legislation. Current legislation and policies relating to migrants and asylum seekers are also relevant. Individual organisations will have their own policies and procedures for addressing CALD issues and needs, based on relevant legislation and government policy.

Cultural aspects to consider:

- Ethnicity and country of origin; for example, people who have grown up in western cultures may differ in some ways from those from eastern cultures.
- Identity; for example, people who identify as Aboriginal and/or Torres Strait Islander have certain cultural obligations.
- Geographic location – the behaviours and experiences of people in metropolitan, regional, rural and remote Australia may vary.
- Religion – the customs of people from one religion vary from the customs of people who follow a different religion or no religion.

Here are some aspects you need to take into account in your work with clients.

Body contact or gestures
Some cultures are more tactile than others; for example, in some cultures, shaking hands or touching a person’s arm as you speak to them is not unusual, but within others it is considered rude to touch people and offer objects using your left hand.
Eye contact
In some cultures, making eye contact is a sign of respect, while in others it may be considered as a sign of aggression.
Proximity
People from densely populated parts of the world may be used to having less personal space than those from sparsely populated places (such as Australia), and may therefore sit or stand more closely than what other people are used to. People from some areas and cultures may require a large amount of personal space to feel comfortable.



For further information, see The Cultural Atlas. It provides comprehensive information on the cultural background of Australia's migrant populations:

aspirelr.link/sbs-cultural-atlas

Cultural competence

As a worker offering community service, you must work effectively and respectfully with clients from a range of backgrounds.

The ability to express one's cultural traditions is a key factor in maintaining emotional and psychological wellbeing. It is therefore vital for clients' holistic wellbeing that they receive services that are culturally appropriate.

Anti-discrimination laws and regulations make it illegal to discriminate against anyone because of their cultural, religious or racial background (among other things).

Cultural competence is more than simply accepting differences. It is also about having awareness of one's assumptions and cultural biases, an attitude of respect and inclusion, knowledge of other cultures and skills to embody these in word and action. Community services organisations will have policies and procedures that require clients to be provided with culturally competent support.

Cultural competence
Having awareness, respect and understanding of the cultural diversity around you.

Cultural competence involves:

- genuinely valuing diversity, with the aim that all clients experience cultural and emotional safety
- factoring cultural needs into support services in a genuine and meaningful way
- not expecting clients to relinquish their cultural beliefs and practices in order to receive services
- not stereotyping people based on their cultural backgrounds
- practising self-reflection in relation to your own attitudes, biases and prejudices.

Video: Cultural competence

Watch this video from SBS's Cultural Competence Program, about avoiding making assumptions: aspirelr.link/yt-cultural-competence-sbs





Example

Respecting clients as individuals

Sophie will soon be working in a clinic with families from a range of cultural backgrounds, including refugees and Aboriginal and Torres Strait Islander people. She wants to be well prepared for her appointments, so begins researching online about how to show respect for the groups she will be working with.

She finds and notes down the following information:

- Australia accepts thousands of humanitarian entrants into the country. Most are refugees fleeing war and political instability.
- Nearly all migrants experience some form of 'culture shock', as almost everything is new and unfamiliar to them.
- Usual practices and accepted norms of behaviour will be different for different cultural groups.
- Aboriginal and Torres Strait Islander peoples are diverse, and come from many different places, contexts, language groups and experiences of culture.
- Many First Nations Australians have experienced intergenerational trauma through the impact of colonisation, the stolen generations, government interventions, poverty, displacement from their lands, languages and culture, and other hardships.
- To work effectively with Aboriginal and Torres Strait Islander people, you need to understand the impact of their history, culture and current issues. This understanding needs to be developed as the foundation on which all communication is built.



Practice Task 6

Question 1

Identify three ways you can display respect and courtesy for all clients you work with.

Question 2

Which of the following are examples of how organisations can ensure they provide excellent service? Tick all that apply.

- Encourage specific behaviours among staff, such as listening actively, communicating in plain English and explaining information clearly.
- Ensure staff are undertaking their own training outside of work so they can provide a high standard of service.
- Ensure workers treat clients with courtesy and respect.
- Employ the right people with the skills required for their particular role.
- Ensure that clients are treated fairly and offered the best possible service.



Question 3

Provide two examples of how human rights can be applied in your workplace.

Question 4

What are three ways in which cultural competence can be put into practice in the workplace?

2B

Respect and maintain confidentiality and privacy

Confidentiality is critical to work in the community sector.

In the course of your work, you are likely to have access to privileged and sensitive information about the people you work with. The way you manage confidential information can have a significant impact on a client's dignity, rights and choices, opportunities, self-concept, self-esteem and wellbeing. It is your legal and ethical responsibility to keep their personal information confidential.

Confidentiality

The principle of keeping personal information private, unless the person consents to sharing the information with other parties.

Confidentiality and privacy

Confidentiality refers to managing access to private information and data.

Confidentiality provisions restrict an individual or organisation from using, storing and disclosing information about a person that is outside of the scope for which the information was collected. It refers to both written and verbal information. Maintaining confidentiality is part of respecting a person's **privacy** and upholding their individual rights.

In practice, confidentiality means not discussing or passing on someone's personal information unless the person has given their consent for this to happen. Confidentiality and privacy overlap; much of an individual's private information will be labelled confidential, and should be treated as such.

Privacy

A fundamental human right designed to protect people from intrusion and allow them to selectively express themselves.

The following table outlines the 13 National Privacy Principles that organisations must adhere to when collecting, using and storing people's information.

Privacy principles on the collection, use and storage of personal information	
1	Open and transparent management of personal information Organisations must manage personal information in an open and transparent way.
2	Anonymity and pseudonymity Organisations must give people the option of not identifying themselves, or of using a pseudonym. Some exceptions apply.
3	Collection of solicited personal information This outlines when an organisation can collect personal information that has been solicited (requested). More rigorous standards apply to the collection of sensitive information.



Privacy principles on the collection, use and storage of personal information	
4	Dealing with unsolicited personal information This outlines how organisations must deal with unsolicited personal information, in other words, when a person has volunteered personal information about themselves.
5	Notification of the collection of personal information This outlines when and in what circumstances an organisation that collects personal information must notify an individual of certain matters.
6	Use or disclosure of personal information This outlines the circumstances in which an organisation may use or disclose personal information that it holds.
7	Direct marketing An organisation may only use or disclose personal information for direct marketing purposes if certain conditions are met.
8	Cross-border disclosure of personal information This outlines the steps an organisation must take to protect personal information before it is sent or communicated to someone overseas.
9	Adoption, use or disclosure of government-related identifiers This outlines the limited circumstances when an organisation may adopt a government-related identifier of an individual as its own identifier, or use or disclose a government-related identifier of an individual.
10	Quality of personal information An organisation must take reasonable steps to ensure the personal information it collects is accurate, up to date and complete.
11	Security of personal information An organisation must take reasonable steps to protect personal information it holds from misuse, from interference and loss, and from unauthorised access, modification or disclosure. An entity has obligations to destroy or de-identify personal information in certain circumstances.
12	Access to personal information This outlines an organisation's obligations when an individual requests to be given access to personal information held about them.
13	Correction of personal information This outlines an organisation's obligations in relation to correcting the personal information it holds about individuals.

Video: Privacy principles

For further information on the Privacy Principles, watch this video:
aspirelr.link/yt-privacy-principles





Disclosure of confidential information

There are some situations where you may be legally required to disclose confidential information.

There are exceptional circumstances in which the **disclosure** of private information is permissible – generally when you become aware that someone may be harmed. For example, if a client is being referred for medical treatment, the hospital, specialist or doctor needs to know the client’s history, allergies and personal details.

You must always obtain a client’s informed consent before you disclose their personal information to a third party. You may need to seek advice and speak to your supervisor for instructions.

Disclosure

The act of sharing or releasing private or personal information.

You can, or may be permitted to, disclose private or confidential information:

- when you are compelled by law; for example, the person has a reportable disease or the information is requested by a court of law
- when it is in the client’s best interest and there is a serious risk which justifies breaching confidentiality; for example, when they are at risk of suicide, self-harm or harm to others
- when you have a duty to the public; for example, there is public threat or concern
- when the person has consented to the disclosure.

Example

Respecting and maintaining confidentiality and privacy

Pamela works as a support worker in an aged care home. Doris, who has dementia, is one of her clients. Pamela assists Doris to engage with community groups and other services to meet her needs.

Sylvia is an old friend of Doris’s and regularly comes to the centre to visit her. On one of her visits, Doris doesn’t recognise Sylvia and repeatedly asks her who she is and what she’s doing there. Sylvia seeks out Pamela and asks her about Doris’s condition because she is concerned about her mental health. Sylvia also asks for the contact details of Doris’s daughter. Pamela knows that Doris has had a falling out with her daughter and is unsure whether she wants anyone to contact her.



Pamela responds by explaining that she is not legally able to disclose Doris's private information, including her medical details and her family's contact details, without her consent. Sylvia says she understands and responds by saying that she will ask another friend who still has regular contact with Doris's daughter for contact details so she can let her know how her mother is progressing.

Practice Task 7

Question 1

Give two situations in which disclosure of a client's private information is allowed.

Question 2

Provide three legal requirements related to privacy and/or the access, storage and use of private information.

2C

Follow procedures for addressing behaviours of concern

As part of your role, you must be able to identify and plan an appropriate response to behaviours of concern.

Your organisation's policies and procedures outline how specific behaviours should be managed. Through these, the organisation is able to meet their duty of care and safety obligations, and address the person's behaviours and needs according to planned responses. Knowing these protocols is essential to your role and clarifies the boundary around tasks you should do and those that need to be referred because they are outside of your job role or skill level.

Behaviours of concern

A behaviour of concern is any behaviour that has the potential to cause harm or make people feel uncomfortable, frightened or unsafe.

A **behaviour of concern** is a behaviour that:

- could cause harm to the person behaving in that way
- could harm another person
- could cause damage to property
- could affect the person's quality of life if it were allowed to continue.

Harm can be physical or emotional and can have an ongoing negative impact. A behaviour of concern can prevent the person from being part of the community, or prevent them from interacting with others and learning in the same way as their peers.

Keep in mind that many of these behaviours are attempts at communication; that the client is trying to convey or externalise an emotion such as anger, fear or confusion. They are using these inappropriate forms of communication – which may involve verbal or physical aggression – because they do not know how to communicate their feelings or needs in any other way.

Behaviour of concern

An action that can cause harm, either to the person who presents with the behaviour or to others.



Someone may exhibit a behaviour of concern because:

- they have a cognitive disability
- they are experiencing a mental health issue or crisis
- they have dementia
- they are under the effects of alcohol or other drugs (AOD)
- they have a personality disorder
- they feel frustrated and disempowered and don't have a more appropriate way of expressing it.

Emotional indicators

Be observant of cues that reveal a person's emotional state. You may be able to acknowledge these strong emotions and be able to divert them before they escalate into a behaviour of concern.

There are various observable indicators in a person's demeanour and actions that tell you that something isn't right. It is helpful to become familiar with these indicators and listen to your intuition. The following table has some examples of emotional indicators that suggest the client is emotionally unstable.

Verbal indicators	
<ul style="list-style-type: none"> • Abusive language • Direct threats 	<ul style="list-style-type: none"> • Fast, non-stop talking • Shouting/yelling
Behavioural indicators	
<ul style="list-style-type: none"> • Grinding teeth • Fists clenching and unclenching • An inability to sit still 	<ul style="list-style-type: none"> • Uncontrolled gesturing • Flaring nostrils
Intuitive indicators	
<ul style="list-style-type: none"> • Your sense that there is something wrong • Your feeling of suspicion • Your own fear or apprehensiveness 	

Procedures for responding appropriately

How you respond to distressed people and people expressing behaviours of concern can either reduce or increase the likelihood that it escalates into aggressive or violent behaviour.

Before meeting with a client with known behaviours of concern, take the time to prepare by familiarising yourself with their individualised plan, behaviour support plan, treatment or case notes.



Always seek advice and assistance from a manager or supervisor if required, and work with the client in accordance with established policies and procedures on how you should respond. It is important to always follow your organisation's policies and procedures, including health and safety guidelines, to ensure you respond in a safe and appropriate manner that meets your duty of care obligations.

Organisational policies and procedures may include:

- operational guidelines for handling incidents and/or cases involving behaviours of concern
- protocols for staff debriefing following an incident
- procedures for incident reporting and documentation.

The following table offers guidance for responding to behaviours of concern.

Stay calm
<ul style="list-style-type: none"> • When you are calm, you are better able to calm down someone who is confused, angry or upset. • If you appear anxious, frightened, angry or upset, it can contribute to a dynamic that causes the person's behaviour to escalate. • Avoid quick movements or gestures that may seem threatening to the individual. Give them plenty of personal space. • It's not always easy to stay calm in the presence of someone who is distressed or angry. Staying grounded and present and breathing slowly is a good place to start.
Observe the situation
<ul style="list-style-type: none"> • Observe the situation to help you understand what is happening. • Avoid jumping to conclusions that may be incorrect and unfair. • Remain objective and try to gather as much information about the situation as possible.
Respond appropriately
<ul style="list-style-type: none"> • Past experience and knowledge of an individual may help you to respond to them and de-escalate or divert any typical behaviours of concern they exhibit. • Refer to the person's care/support plan/client notes for information on ways to de-escalate or divert any behaviours of concern.
Be prepared
<ul style="list-style-type: none"> • Be prepared for unpredictable behaviour, particularly if the person is unknown to you. • Reassure the client you are there to help. • Be observant and note their body language.



Stay safe
<ul style="list-style-type: none"> • Keeping yourself, the person and others safe is the first priority. • Clear the area of other people if the behaviour is disruptive or could cause harm. • If possible, take the person to a quiet, safe room, but leave the door open and make sure you can exit the space if you need to. • Prioritise your safety and do not approach the person until you are sure it is safe to do so.
Communicate effectively
<ul style="list-style-type: none"> • The way you communicate, including your body language, and the tone and speed of your voice, will affect how the person perceives you. • Aim to convey calmness, support and safety. • Speak slowly and clearly to reassure the person.
Seek assistance
<ul style="list-style-type: none"> • There are situations that you will not be able to manage on your own. • Use an alarm if necessary to obtain assistance from other staff.

Respond to aggressive behaviour

Some people become verbally or physically aggressive when they are frustrated or frightened by a situation they perceive as being out of their control.

A person's anger is often not a personal attack, even though it may be directed at you. It is likely to be a sign of frustration or displaced emotion about the difficulties they are facing.

Use your communication and problem-solving skills to respond appropriately, staying safe while managing aggressive behaviour.

Verbal aggression	<p>How to manage verbally aggressive behaviour:</p> <ul style="list-style-type: none"> • Acknowledge the person's anger and frustration; for example, 'I can hear how upset you are.' • Rephrase what the person is saying and identify the possible reason for their emotions, for example, 'I can see how upset you are because you feel you are not being listened to.' • Allow the person to vent, get their feelings out and tell you what is upsetting them. • Reduce sensory stimulation by inviting the person into an office or another quiet space to talk. • Be honest about the impact of their behaviour on you, for example, 'When you yell at me I find it hard to listen.' • Ask the person to please move back if they are in your personal space and feel too close. • When the person becomes calmer, problem-solve with them and deal with the core issue.
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<p>Verbal aggression (cont.)</p>	<p>What not to do:</p> <ul style="list-style-type: none"> • Do not get drawn into an argument or begin shouting back. • Do not become hostile or punitive. • Do not describe their behaviour or ask for reasons for it. • Do not look away or ignore the situation. • Do not give away your own right to a safe workplace by compromising your safety.
<p>Physical aggression</p>	<p>How to manage physically aggressive behaviours:</p> <ul style="list-style-type: none"> • Prevent total frustration by quickly and calmly acknowledging the intensity of the situation, by saying, for example, 'I can see you are upset and I want to help you resolve this issue.' • Explain clearly and directly what behaviours are acceptable, for example, 'You have the right to feel this way, but damaging property is not going to help you.' • Remain in an open area where other people are present. • Get help from others, such as your colleagues or supervisor. • Call the police if the behaviour becomes dangerous or threatens the safety of yourself or others. <p>What not to do:</p> <ul style="list-style-type: none"> • Do not ignore warning signs that the person is about to lash out. • Do not ignore threats of violence. • Do not threaten, dare, taunt or push the person into a corner. • Do not touch the person.

Video: Dementia and changed behaviours

Watch this video from Dementia Australia about ways to support people living with dementia who are presenting with changed behaviours: aspirelr.link/yt-dementia-changes-behaviours



Report behaviours of concern

If a person behaves in a way that threatens the safety of themselves, yourself or others around you, you must respond accordingly.

Follow your organisation’s emergency procedures for seeking assistance. The following table outlines how to report your observations, including who you should report to.



Who should you report to?

Typical channels for reporting behaviours of concern include:

- your immediate supervisor or manager
- the person's case manager
- a clinician, e.g., a psychologist
- an authorised representative of another support service.

If a person's behaviour is threatening anyone's safety, including their own, you may need to contact:

- the police
- an ambulance
- a mental health crisis team.

How should you report?

When reporting your observations, ensure that:

- they are accurate and specific to the person, and not clouded by your own values
- you only report what you actually see and hear; do not give your opinion or make assumptions
- the words you use are clear and direct, not ambiguous
- to avoid misunderstandings, explain exactly what the person did or said, and the context of the situation
- you avoid using jargon or language specific to the service you work in to prevent misunderstandings from external people
- your observations are not generalisations based on previous experiences, prejudice or stereotyping.

Example

Understanding role requirements

Karla is new to her role as a case worker in the mental health sector. When she applied for the position, her work tasks were discussed and Karla was required to give evidence of previous work she had done in each of the areas indicated. Karla explained her experience of working with people with complex needs and displays of behaviours of concern, such as aggression and yelling.

At the induction, her supervisor discusses the job description and Karla's role in terms of the hierarchy and management within the organisation. Karla asks lots of questions, knowing she has to understand the organisation's policies and procedures for managing behaviours of concern. She needs to learn the reporting requirements of the organisation and who she should ask for information, support and advice.



Her supervisor takes her through the emergency procedures and they tour the interview rooms. They discuss the layout of furniture, location of other staff and the panic button located in the foyer.

The supervisor makes clear the boundaries of her role and specifies when Karla should seek advice. Karla is given copies of the organisation's policies and procedures, and has to sign a document to confirm she has read and understood them. Her supervisor arranges to meet with her in a week to give her the chance to ask questions or seek clarity.

Practice Task 8

Question 1

Which of the following are indicators that a client might be feeling agitated? Tick all that apply.

- Grinding their teeth
- Clenching and unclenching their fists
- Asking for help
- Being unable to sit still
- Flaring their nostrils

Question 2

Identify three things that are appropriate to do when managing behaviours of concern.



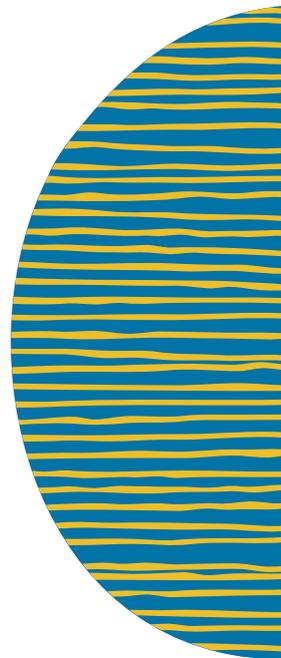
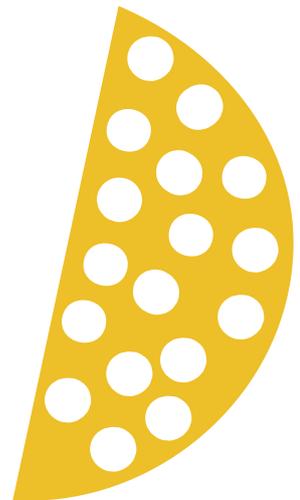
Question 3

Who should you report to if a client becomes aggressive?



Summary

- Standards of service need to be consistent and actively employed by all workers so clients receive the information, support and services they need.
- Show courtesy in all dealings with clients by being polite and showing consideration of their personal situation and circumstances.
- Uphold people's human rights at all times.
- Cultural competency is about being aware of one's assumptions, and having an attitude of respect and inclusion, knowledge of other cultures and skills to embody these.
- How you manage confidential information can significantly affect a person's dignity, rights and choices, opportunities, self-concept, self-esteem and wellbeing.
- Confidentiality means not disclosing an individual's personal information unless they have given their consent.
- Learn to identify the indicators of agitation and plan appropriate responses to behaviours of concern in line with organisational policies and procedures.
- Be observant of cues about a person's emotional state; the way you respond to someone in distress can reduce or increase the likelihood of aggressive or violent behaviour.
- A person's anger is likely to be a sign of frustration or displaced emotion about the difficulties they are facing.
- Use your communication and problem-solving skills to respond appropriately and manage aggressive behaviour.





Learning Checkpoint 2

Act in a respectful manner at all times

Part A

1. Give two examples of an excellent standard of service provided to a client. For each example, explain how the client would benefit.

2. Provide one example of a courteous action you could make towards your client.



3. List three examples of actions you can take with your client that demonstrate respect.

4. Which of the following are examples of upholding a client's human rights? Tick all that apply.

- Allowing the client to speak freely about their opinions without censorship.
- Ensuring the client feels safe, and not intimidated in your company.
- Not stereotyping or discriminating against the client due to their cultural or linguistic background.
- Helping clients access resources for their basic needs, education and health.
- Explaining your religious beliefs to your client so they understand you better.

5. What are two actions an organisation can take to maintain the confidentiality and privacy of clients?



6. Your client with a cognitive disability is behaving aggressively. What three actions could you take to manage the behaviour, ensuring you meet your duty of care and safety obligations?

Part B

Read the case study, then answer the questions that follow.

Case study

Culture derives from the country, region or community a person grew up in.

Each culture has its own unique ways of communicating. The following list offers aspects of communication that can differ across cultures.

- **Personal space:** Some people prefer to stand at least an arm's length away from the person they are speaking with. If someone enters into their personal space, they may feel intimidated or uncomfortable.
- **Touching:** Different cultures have different rules about who can touch whom. For people of some cultures, touching someone who is not a family member is inappropriate and, unless specifically required – such as supporting a distressed person – it should be avoided.
- **Eye contact:** In some cultures, making direct eye contact can be seen as disrespectful, especially if it is prolonged. This can be the case with First Nations Australians and for people of some Asian cultures where avoiding direct eye contact is a sign of respect.
- **Hand gestures:** Gestures that, for you, are friendly or harmless may be considered offensive in some cultures; for example, the thumbs up gesture is considered rude in Middle Eastern cultures.



- **Nodding:** Different cultures attach various meanings to head movements. In some cultures, nodding the head may mean 'no'.
- **Polite conversation:** Conversation styles of different cultures may be direct or roundabout. In some cultures it is acceptable for people to talk over each other.
- **Questioning:** Direct questioning is considered impolite in some cultures and an indirect questioning style is more appropriate.

1. Select two of the examples listed above and explain your style of communication with reference to them.



Topic 3: Evaluate your work to maintain a high standard of service

3A Monitor your effectiveness in interpersonal interactions

3B Seek advice and address your performance



3A Monitor your effectiveness in interpersonal interactions

Seek a variety of ways to obtain regular feedback about your effectiveness in your interpersonal interactions and work practices.

Obtaining feedback is a key element of evaluating and monitoring the service you are providing to clients. Client feedback can give you insight into your interpersonal interactions with them.

Feedback can be gathered via surveys (which may include questionnaires), direct observations or by measuring certain outcomes. For example, you may ask the person about their level of satisfaction and if all of their questions have been addressed. Questionnaires can be online, written or verbal and are useful ways to gather data.

You can encourage clients to provide feedback by:

- making sure the client understands that their feedback is valued and will be acted on
- facilitating an open and transparent culture in which clients feel emotionally safe to share their feedback
- supporting clients and their families/representatives to provide feedback in ways that are accessible and that they feel comfortable with.

Pay attention to the feedback you receive, and think about how you can improve in your practice.

Obtain feedback regarding your effectiveness

Formal feedback is that which is given in an intentional way, for example, from a supervisor as part of a performance appraisal. **Informal feedback** is often shared in the moment by colleagues or clients.

Sources of feedback include:

- your supervisor, manager or senior colleagues
- professional networks
- informal networks.
- a client's family members and carers

Formal feedback

The planned or intentional process of providing a person with feedback.

Informal feedback

Feedback that is given in real time and provided spontaneously, occurring at any time or location.

Formal methods of obtaining feedback include:

- staff appraisals in which there is a performance review
- team meetings where you are required to provide information and explain your opinion
- feedback from clients, either given anonymously or in a formal face-to-face session
- surveys or questionnaires.



Informal methods of obtaining feedback include:

- conversations with a supervisor or colleague about your performance
- seeking clarification from your clients that they understand you and what you have said
- observing the effect your conversation has on your clients by reading their body language and reactions.

There are a number of ways you can identify and monitor the effectiveness of your interactions with clients.

<p>1. Self-reflection</p>	<p>Self-reflection is the process of reflecting on or thinking about your actions and motives and their effects.</p> <p>Professional self-reflection is a form of self-evaluation.</p> <p>Here are examples of self-reflection:</p> <ul style="list-style-type: none"> • Think about how you handled a complex situation with a colleague. Being objective, seek to understand why you took a certain course of action and whether it was the best action in the circumstances. • Keep a journal to make notes about key events and your responses to them, including your emotional responses. You can use an app, or write/type your thoughts in a journal or document. • Consciously acknowledge any discomfort you feel in relation to specific work situations. These may include times when you experienced a lack of confidence, fear or anxiety. Such emotions may indicate that you need additional support or skill development in a specific area.
<p>2. Peer review</p>	<p>You may seek feedback from your peers (those who are at a similar level to you in the organisation) or from higher management.</p> <p>Peer review may involve discussion about workplace situations or dilemmas, including difficulties with staffing or supervisory matters. Your peers may also review your way of working.</p>
<p>3. Performance appraisals</p>	<p>In a 360-degree appraisal, managers, peers and staff who report to you anonymously provide their feedback in a structured and formal manner as part of a performance appraisal.</p> <p>The feedback is analysed and discussed with you to identify strengths and areas in need of development.</p>
<p>4. Clinical supervision</p>	<p>You may need to participate in a clinical supervision session with an experienced practitioner or senior manager. The session provides feedback to help you improve aspects of your professional practice.</p>

Self-reflection

The ability to observe and evaluate one's own thoughts, emotions and behaviours.



5. Formal complaints	Investigating formal complaints lodged by staff, clients, clients’ families or other stakeholders can provide an effective mechanism for self-evaluation. Try not to take it personally, but see it as an opportunity to grow and improve. Examine and analyse complaints carefully and objectively.
6. Critical incidents	If you have been involved in a critical incident , the incident must be investigated to determine what went wrong and who contributed to it. Incident reports provide objective information that can help you evaluate your performance.

Critical incident
Any occurrence that causes severe risk or harm to a person.

Video: Continuous improvement
Watch this video on continuous improvement, and consider how you could implement it in your work: aspirelr.link/yt-continuous-improvement-2



Example

Monitor your effectiveness in interpersonal interactions

Aisha recently started working for the local council as an allied health assistant for a busy clinic offering a range of allied health services. One of her roles is to help coordinate health services so older clients can stay in their homes. Aisha must make sure the people she supports are provided with the support they need, such as medical appointments, physiotherapy, occupational therapy and podiatry appointments. Sometimes she helps her clients with domestic tasks, such as ensuring personal items are within reach.

Aisha enjoys developing relationships with her clients and feels she has a good understanding of their needs. A recent feedback survey she conducted indicated that her clients were very happy with her services. However, it became clear from some of the comments that some clients saw Aisha as a friend rather than as a support worker.

After some reflection and a meeting with her manager, Aisha identifies that while her interpersonal skills are excellent, she has changed the expectations of her clients as to her role by providing services that are not in her job description.



Aisha wants to do a good job and provide exemplary service, but she knows she has been overstepping her role, which has taken time away from her other tasks. Her manager advises Aisha to stop overstepping her professional boundaries and reminds her that although she is capable, she does not have the training or practical experience to complete these tasks safely, and they are outside the organisation's scope of practice.

Practice Task 9

Question 1

Which of the following are ways to get feedback about your effectiveness in interpersonal interactions? Tick all that apply.

- By talking with colleagues
- By taking an online quiz
- Through staff appraisals
- By having conversations with your supervisor
- By observing your effect on others

Question 2

Provide three examples of self-reflection that you can use to gauge the effectiveness of your interactions with clients.

3 B

Seek advice and address your performance

Improving your work practices, skills and knowledge is a requirement of any community services worker.

Everyone providing a service should do their best to make improvements where they can. To continuously improve your performance, regularly seek advice and assistance from your supervisor, colleagues and professional networks.

The advice you seek may be about your role as a worker and relate to your skills and abilities to deal with a client's complex needs. For example, you may need advice on dealing with a client with complex mental and physical health needs or someone who is aggressive.

When discussing concerns or problems relating to a client, you must use your discretion and maintain confidentiality. It is not appropriate to make notes about a person's behaviour in front of them, or to speak about a person's needs in front of other service users or colleagues who do not require the information.

Mentoring

The sharing of knowledge and skills by an experienced person with a less-experienced person.

Staff meetings, **mentoring** sessions and supervision opportunities are all good places to debrief and discuss any issues or concerns you have. It is also helpful to have an approachable supervisor who encourages you to share your concerns, to self-evaluate and to reflect on ways to improve and areas of concern. Plan to meet regularly with your supervisor to discuss your handling of certain situations. Remember, it's important to be both honest and kind with yourself when self-evaluating. Everyone, including you, is doing the best they can.

The information you gather can be used to reflect and improve your work practices.

Ask for support and assistance

Even the most experienced worker can be confronted with a situation that is beyond their scope of practice or area of expertise.

Expert advice can be sought from supervisors or colleagues, particularly in relation to a difficult issue or to review the actions you took. This can be useful for accessing information from experienced and skilled professionals who can offer insight into ways you can improve your handling of a situation.

Depending on the complexity and urgency of the situation, it may need to be taken to upper management or referred to an expert in the field. The following are examples of situations when your manager may escalate a situation to their manager or seek specialised advice.



When disciplinary action is required

- If a worker is subject to disciplinary action, the situation may need to be referred to the human resources (HR) team and/or senior management.
- A referral to the Fair Work Commission or the Fair Work Ombudsman may be required.

When personal difficulties are affecting work performance

- Personal difficulties may require a referral to the HR department and/or senior management.
- The worker may need to be referred to the employee assistance program.

In cases of cultural conflict

- The matter may require escalation to the HR department and/or senior management.
- The matter may need to be referred to a cultural mediator.
- Consultation may be required with community representatives from the different cultural groups.

When a worker is injured while completing their duties

- You may need to escalate the issue and refer it to relevant authorities (such as police or emergency personnel).
- The worker may need to be referred to the relevant workers' compensation authority and later, the return-to-work coordinator.

When a worker requires training or professional development

- If urgent training is required, you may need to escalate the issue and refer to in-service training or refresher training.
- The worker may need to be referred to the HR department and/or senior management.

When employees are in conflict

- If the issue is urgent, you may need to escalate it and refer to the HR department and senior management.
- The employees involved may need to be referred to an external mediator, legal services or the Fair Work Commission.

Improving your practice, based on feedback

Think of feedback as a positive way to grow and develop.

If your supervisor gives you negative feedback, reflect on it and try to make improvements where you can. Your role is to work towards the best service outcomes for your clients, and your capacity to deliver this will be enhanced by improving your skills and knowledge.



You may receive feedback as part of a performance review in which your manager or supervisor discusses how they think you could improve your performance. You may also receive feedback from people using your services, family members, advocates, network members or other workers within your organisation.

Reflect on what you do well and how you may improve in the future. Aspects of your job you might reflect on include how you can improve in particular aspects of your job, your interactions with clients and colleagues, and your skills in communicating with and supporting clients.

Here are some areas of your performance in which there might be room for improvement.

Problem-solving
Community and health services work presents many opportunities to use problem-solving skills. They include: resolving issues related to work tasks; dealing with situations; challenging interactions with colleagues; and time and resource management. Being good at problem-solving takes time and practice, and there are some specific skills that can assist you in becoming a better problem-solver, including helpful technology to adopt, and ways to think clearly and effectively about an issue.
Communication
You will need to communicate with different groups of people in varying contexts. Sometimes you will have time to plan and consider your communication in advance. In other situations, you will need to respond spontaneously, in the moment. Ensure your communication is precise, clear and understood (by confirming with the person, if necessary). Good communication is a skill that can be learnt and developed over time.
Technical skills
Fulfilling your day-to-day tasks often requires technical skills. Depending on your level of responsibility, the technical skills you need may include those related to client support, first aid or working with and leading groups of people. You need to stay current in your competency in performing these skills, and in some cases will need to undertake regular training or refresher courses, particularly in relation to emergency management.
People-focused skills
In order to offer excellent client service, you need the skills to work directly with people. It takes skill and knowledge to be able to think in a way that places your client at the centre of your focus. Ongoing professional learning, reading, attendance at training sessions and conferences, mentoring and participating in networks all help to build people-focused skills, and a person-centred approach.



Improve your work practices

Once self-evaluation and areas in need of improvement have been identified, measures can be developed to meet these gaps in your professional and practical skills.

Practise incorporating the advice you have been given. If a particular area of improvement is identified, you can develop your skills by seeking opportunities to:

- pair up with a mentor or experienced colleague
- access off-site or on-site training
- join networks of other workers in your area or industry
- access support from a manager or supervisor.

Example

Seek advice and address your performance

Rhiannon manages up to four clients at a time in a local community services organisation. She is hard-working and dedicated to her job.

Rhiannon enjoys the many challenges of her role, but lately she has been feeling stressed, finding that she can't get to all of the tasks waiting for her. She is struggling to get everything done. In the past month, two different clients have lodged complaints against her, claiming that she didn't follow up on matters she said she would take care of.

Rhiannon often works late so that she doesn't fall behind, but she is starting to feel overloaded. She is looking forward to her scheduled session with the manager, Peter.

Rhiannon shares her concerns with Peter, who asks her to evaluate what is happening and to interpret what the recent events mean. Rhiannon thinks objectively about how she has been managing her time. She acknowledges that she could be seeking help from colleagues and referring her client with more complex needs to a specialist service. Rhiannon tells Peter she will review this.

After the supervision session, Rhiannon's self-reflection leads her to realise that she needs to stop doing unpaid overtime and work more reasonable hours. This means asking for more help and referring her clients to specialised services when supporting them is beyond the scope of her role. She is feeling better about her situation and a lot less stressed, and feels confident she can address these issues.



Practice Task 10

Question 1

List two reasons why you should seek advice from supervisors and colleagues to improve your performance at work.

Question 2

Provide three examples of how you can incorporate advice you have been given and develop your skills.

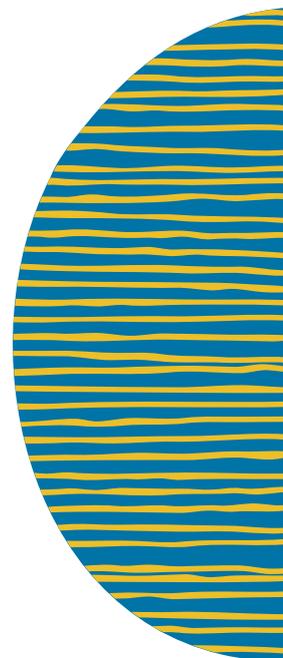
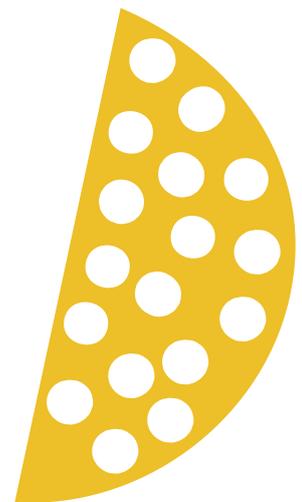
Question 3

Explain why people-focused skills are needed to maintain a high standard of service.



Summary

- Seeking feedback on your work practices and interactions is an excellent way of continuing to improve and giving your clients the highest possible level of service.
- Various protocols and processes are in place to monitor and evaluate staff performance to identify strengths and areas in need of improvement.
- Client feedback by way of conversations, surveys and questionnaires, as well as self-reflection, peer review and performance appraisals can give you insight into interpersonal interactions.
- To practise continuous improvement, seek advice and assistance from your supervisor, colleagues and other sources such as experts and support groups.
- Even the most experienced worker will be confronted with situations that are beyond their scope of practice or area of expertise.
- Areas of performance that can be reviewed include interactions with clients, communication skills, problem solving and working in challenging situations.
- Seek advice from a mentor or experienced supervisor, or access training or support networks.





Learning Checkpoint 3

Evaluate your work to maintain a high standard of service

Part A

1. Outline two examples of formal methods of receiving feedback on your work performance.

2. Which of the following are informal methods of monitoring and evaluating your work practices? Tick all that apply.
 - Undergoing a 360-degree appraisal
 - Conversations with a co-worker about your performance
 - Seeking clarification from your clients that they understand what you have said
 - Reading your client's body language when you communicate with them
 - Undertaking a six-monthly performance appraisal



3. Explain how a health and safety incident involving a client can be used as an evaluation of your performance.

Part B

Read the case study, then answer the questions that follow.

Case study

Logan has recently started a new job as a support worker at Diorama disability services. He has just finished his orientation week, where he has been working alongside his team leader, Lilijana. As this is his first job since receiving his Cert IV in Disability Support, he is a bit nervous and finds that he has been speaking very quickly to clients and rushing through tasks rather than taking the time to ask what the client would prefer.

At the end of the week, Lilijana suggests they have a coffee at a nearby café to chat about how the week has gone. He tells her that he has enjoyed the work, but is worried his nerves have affected his performance. They talk about some of his previous jobs in customer service, and how that training can help him in his new role. They discuss how good communication is key to providing good service to their clients. He also mentions that this is his first time working with behaviours of concern with clients.



- 1. Give one example of an adjustment Logan could make after receiving advice on how to improve areas of his work.**

- 2. How could training assist Logan in meeting any gaps in his professional and practical skills?**



Glossary

Active listening

Concentrated listening and non-verbal encouragement indicating an understanding of what is being said.

Behaviour of concern

An action that can cause harm, either to the person who presents with the behaviour or to others.

Collaboration

An approach that involves people working together to accomplish common goals.

Complaint

Communicating something you believe is wrong and asking for it to be fixed.

Confidentiality

The principle of keeping personal information private, unless the person consents to sharing the information with other parties.

Conflict

A disagreement of opinions or principles.

Critical incident

Any occurrence that causes severe risk or harm to a person.

Cultural competence

Having awareness, respect and understanding of the cultural diversity around you.

Disclosure

The act of sharing or releasing private or personal information.

Discrimination

The act of excluding or treating a person differently based solely on an attribute such as disability, age, gender, race or sexual orientation.

Duty of care

A moral or legal obligation to ensure the safety and wellbeing of other persons.

Empathy

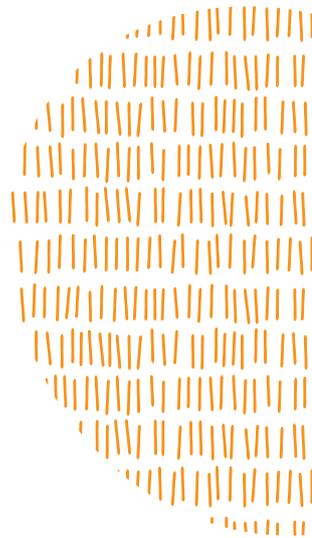
The ability to understand, share and identify the feelings of others.

Formal feedback

The planned or intentional process of providing a person with feedback.

Hazard

A source or a situation with the potential for causing harm, damaging humans, property and/or the environment.





Human rights

Fundamental rights and freedoms that apply to all people, setting norms for standards of human behaviour.

Inclusion

Providing equal access to opportunities and resources for people who might otherwise be excluded or left out.

Informal feedback

Feedback that is given in real time and provided spontaneously, occurring at any time or location.

Mandatory reporting

The legal requirement of people in certain job roles and industries to report suspected or actual abuse to the police.

Mentoring

The sharing of knowledge and skills by an experienced person with a less-experienced person.

Person-centred approach

Providing tailored support for each person and taking time to learn about their individual preferences, needs and goals.

Privacy

A fundamental human right designed to protect people from intrusion and allow them to selectively express themselves.

Rapport

A close relationship between two entities that promotes mutual understanding.

Risk assessment

Determining the likelihood a hazard will cause harm, injury or ill-health and determining its possible consequence.

Scope of practice

Procedures, actions and processes that a healthcare practitioner is permitted to undertake in keeping with the terms of their professional license.

Self-determination

A person's right to have control over their own life and make independent choices about decisions that affect them.

Self-reflection

The ability to observe and evaluate one's own thoughts, emotions and behaviours.

Strengths-based approach

Recognises that all individuals are resourceful and resilient experts in their lives, and can progress in a way that enhances their quality of life.