



CHCDIS015

Develop and
provide
person-centred
service responses



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and provide
person-centred
service responses**

Release 1

Learner Guide

Aspire Version 1.1

CHCDIS015 Develop and provide person-centred service responses, Release 1

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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 *CHCDIS015 Develop and provide person-centred service responses*, 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 Work collaboratively to develop person-centred responses	1A Work together to meet the person's needs, rights, aspirations and preferences	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1B Support the person's use of assistive technologies	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1C Support the person to communicate their needs to family members, carers and others	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1D Ensure support information is accurately recorded, maintained, applied and stored	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1E Access and provide resources	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
Topic 2 Review and monitor person-centred responses	2A Review, measure and improve the effectiveness of responses	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2B Meet the person's changing needs and preferences by modifying services	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident



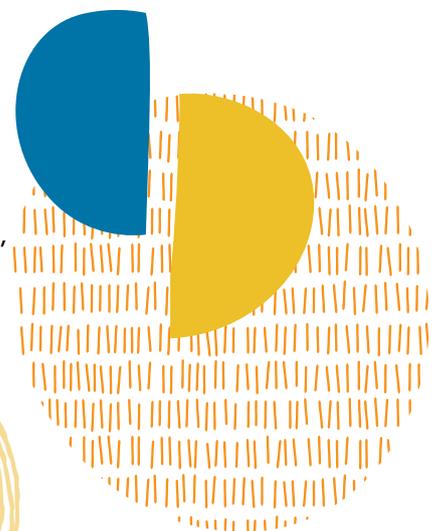
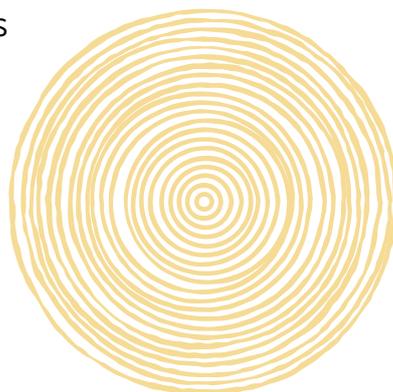
Topic	Key outcome	Rate your confidence in each section
Topic 3 Deliver services within a quality framework	3A Follow policies and procedures in line with the organisation's quality system	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3B Review policies and procedures for service delivery	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident





Topic 1: Work collaboratively to develop person-centred responses

- 1A Work together to meet the person's needs, rights, aspirations and preferences
- 1B Support the person's use of assistive technologies
- 1C Support the person to communicate their needs to family members, carers and others
- 1D Ensure support information is appropriately recorded, used, maintained and stored
- 1E Access and provide resources



1A

Work together to meet the person's needs, rights, aspirations and preferences

Person-centred practice means seeing a person as the expert on their own life.

Person-centred approach

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

A **person-centred approach** places the person with disability at the centre of service planning and delivery. This approach allows the person with disability to lead and direct the services they use.

When you respond to someone in a person-centred way, you focus on their individual aspirations, needs, rights and preferences.

Person-centred care requires collaboration between the worker, the person with disability and other people involved in their life and care, such as family members, friends and carers.

The principles of person-centred practice

When you work in disability services, all the work you do should be informed by a person-centred approach.

The principles of person-centred practice include:

- respect for individuality, diversity, difference and ability
- focusing on the whole person rather than their perceived problems
- working with respect, compassion and empathy
- collaborating with others to provide the best possible care
- empowering the person
- being led by the person and prioritising their choices and goals.

The following table outlines what these principles mean in practice.

Principles of a person-centred approach	What this principle means in practice
Respecting individuality, difference, diversity and ability	<ul style="list-style-type: none">• Finding out what matters to people and listening to and respecting their individuality and different viewpoints, beliefs, values, preferences and abilities• Providing support that is responsive to individual needs



Principles of a person-centred approach	What this principle means in practice
Focusing on the whole person rather than their perceived problems	<ul style="list-style-type: none"> • Recognising that individuals are more than the sum of the problems they experience – they are whole people with past experiences, strengths, challenges and hopes for the future • Acknowledging the different aspects of a person’s life such as spiritual beliefs
Working with respect, compassion and empathy	<ul style="list-style-type: none"> • Listening to and acknowledging people, showing concern, and attempting to see things from another’s perspective
Collaborating with others	<ul style="list-style-type: none"> • Building collaborative relationships with clients, carers and other services to provide the best possible service • Seeing family members and communities as partners rather than peripheral to a person’s life
Empowering the person	<ul style="list-style-type: none"> • Recognising that individuals are experts on their own lives • Sharing power and decision-making
Being led by the person	<ul style="list-style-type: none"> • Developing outcomes based on what matters to a person and what is meaningful to them • Respecting people’s choices

Source: www.qualityhealthcare.com.au/post/2019/09/17/what-is-person-centred-support

Principles of disability services work

The principles that underpin disability services work are based on respect, fairness and inclusion.

These overlap with the principles that underpin disability services work, such as empowerment, human rights, a strengths-based approach, and access and equity. Here is a description of these principles.

Empowerment	<p>When people are empowered, they have choice, influence and control over events in their lives.</p> <p>When you empower someone, you:</p> <ul style="list-style-type: none"> • uphold and promote their rights • are respectful and non-judgmental • support, encourage and respect their decisions about their own life • build a relationship that allows them to communicate their feelings, preferences and wishes • provide them with the information and resources they need to build their confidence and take control of their lives.
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<p>Human rights-based approach</p>	<p>A human rights-based approach acknowledges the value of every person, regardless of background, appearance, thoughts or beliefs. Basic human rights include the right to:</p> <ul style="list-style-type: none"> • life • free speech • justice and a fair trial. <p>Human rights-based approaches are based on fundamental human rights, including the right to be treated fairly and to make genuine choices about one’s life. When human rights are upheld, everyone can contribute to society and feel included.</p> <p>The Australian Government supports and respects the Universal Declaration of Human Rights, including the United Nations (UN) Convention on the Rights of Persons with Disabilities (CRPD).</p> <p>This UN CRPD is an international convention that outlines the rights of people with disability, such as the right to:</p> <ul style="list-style-type: none"> • freedom from exploitation, violence and abuse • freedom of expression and opinion, and access to information • live independently and be included in the community • education, health and employment. <p>These rights provide a framework for all your workplace procedures and activities.</p>
<p>Strengths-based approach</p>	<p>A strengths-based approach involves focusing on what someone can do (rather than what they cannot do) and acknowledging their aspirations.</p> <p>A strengths-based approach is not about ignoring the challenges a person is facing. Rather, it involves using and building on a person’s strengths to enhance their skills and confidence and provide them with a sense of empowerment and hope.</p> <p>When you use a strengths-based approach, you acknowledge the challenges a person is facing, but you don’t define them by those challenges.</p>
<p>Access and equity</p>	<p>The principles of access and equity are related to fairness.</p> <p>To be accessible, services need to be flexible and responsive to people’s individual needs. For example, information might need to be provided in a range of languages and formats and buildings might need to be modified.</p> <p>Equity is not the same as equality. Equality means everyone receives the same treatment. Equity means some people receive extra support.</p>

Access
The ability to use or obtain something or to physically enter a place.

Equity
When everyone is treated fairly, according to their needs.



<p>Social and emotional wellbeing (SEWB) framework</p>	<p>Many Aboriginal and Torres Strait Islander peoples use the term social and emotional wellbeing (SEWB) to describe the social, emotional, spiritual and cultural wellbeing of a person. The term recognises their connection to land, sea, culture, spirituality, family and community; these are often incredibly important to people, who believe that taking the time to recognise the significance of each can have a positive impact on their wellbeing. It also recognises that a person’s SEWB is influenced by policies and past events.</p> <p>Programs that use this framework often support culturally appropriate, community-led, primary mental health services for Aboriginal and Torres Strait Islander peoples.</p>
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Sources: www.health.nsw.gov.au/mentalhealth/psychosocial/principles/Pages/empowerment.aspx;
www.iriss.org.uk/resources/insights/strengths-based-approaches-working-individuals;
<https://humanrights.gov.au/our-work/disability-rights/united-nations-convention-rights-persons-disabilities-uncrpd>

For more details about the UN CRPD see: aspirelr.link/uncrpd

Legal and ethical considerations

Various laws and ethical considerations are relevant to disability services work.

Commonwealth laws are applicable to everyone in Australia, and additional state- and territory-based laws are also relevant to disability services work.

As someone who works with people with disability, you need to familiarise yourself with relevant laws and follow any updates from your organisation about changes in the law.

Ethical considerations are different from laws because they are not enforceable. Industry groups, associations and organisations create ‘codes of ethics’ and ‘codes of practice’ to outline the ethical standards that underpin their work.

The following table outlines some of the key concepts around access and equity.

<p>Discrimination</p>	<p>To ‘discriminate’ means to treat a person or group of people unfairly based on their background or identity, such as their age, sex, race or disability.</p> <p>Direct discrimination occurs when a person is treated less favourably than another person because of their background or identity.</p> <p>Indirect discrimination occurs when a rule or policy that is the same for everyone has an unfair effect on people who share a specific attribute.</p>
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Discrimination
 The act of excluding or treating a person differently based solely on an attribute such as disability, age, gender, race or sexual orientation.



<p>Discrimination (cont.)</p>	<p>For example, a factory requires all workers to start at 8am, otherwise their pay will be docked. If workers in a wheelchair can only access the factory floor via a lift, and the lift is broken, this has an unfair effect on workers who use wheelchairs and constitutes indirect discrimination.</p> <p>Discrimination laws</p> <ul style="list-style-type: none">• Australia’s federal anti-discrimination laws state that is unlawful to discriminate against someone based on their:• age• disability• race, skin colour, nationality, ethnic origin or immigrant status• sex, marital or relationship status, family responsibilities or being pregnant or breastfeeding• sexual orientation, gender identity or intersex status. <p>In Australia, the following areas of life are covered by disability discrimination laws:</p> <ul style="list-style-type: none">• employment• education• access to premises• provision of goods services and facilities• accommodation• buying land• activities of clubs and associations• sport• administration of Commonwealth Government laws and programs. <p>Federal anti-discrimination laws are generally similar to those of states and territories; however, there may differences in how the laws are applied.</p>
<p>Duty of care A moral or legal obligation to ensure the safety and wellbeing of other persons.</p>	<p>According to the requirements of duty of care, staff must take reasonable care to avoid causing injury to someone in the workplace as a result of their actions or omissions (failure to act or things you don’t do).</p> <p>Everyone in the community service environment has a duty of care towards themselves, the people they care for, visitors and each other.</p> <p>In a working context, duty of care only applies to those areas that are relevant to the circumstances of the care. For example, a doctor has a duty of care regarding the medical treatment they provide but does not have a duty of care regarding a patient’s finances.</p> <p>The laws around duty of care vary depending upon your work role and the type of service you provide, as well as the state/territory where you are working. Your workplace will have a specific duty-of-care policy that you must follow.</p> <p>You can read an example duty-of-care policy at the following site: aspirelr.link/csisa-quality-standards</p>



<p>Dignity of risk</p>	<p>Dignity of risk is the legal right to determine one’s own actions (within in the law), even those that entail a degree of risk. It is based on an acknowledgment that life comes with risk, and that we must support people to experience success and failure.</p> <p>With many activities, it is not possible to eliminate risk altogether. Risk is a part of our daily lives, and it is through risk, trying something new and sometimes making mistakes that we learn.</p> <p>The legal requirement of dignity of risk means that workers need to find a balance between duty of care and the inherent right of a person to decide what level of risk they are comfortable with.</p> <p>You can read more about dignity of risk here: aspirelr.link/dignity-of-risk</p>
<p>Mandatory reporting</p>	<p>Mandatory reporting is a legal requirement of people in certain roles to report known or suspected cases of abuse or neglect.</p> <p>Mandatory reporting laws apply to cases of child abuse and neglect, as well as abuse and neglect of vulnerable adults, such as adults with disability and older people.</p> <p>Mandatory reporting laws differ by state/territory. For example, the number of occupations that have mandatory reporting responsibilities differs significantly by jurisdiction.</p> <p>Your workplace will have mandatory reporting procedures that you must follow. As these vary, it is important to know your workplace’s procedure for reporting (that is, who to report to, when and in what circumstances). If in doubt, speak to your supervisor.</p>
<p>Work health and safety</p>	<p>Work health and safety (WHS) involves managing risks to health and safety in the workplace.</p> <p>Each state and territory in Australia has its own body for regulating and enforcing laws (e.g., SafeWork NSW, WorkSafe ACT).</p> <p>Everyone in the workplace has WHS responsibilities. For example:</p> <ul style="list-style-type: none"> • Individual workers need to take care of their own health and safety and take care not to do anything that might harm or hurt another person. • Organisations have a responsibility to provide a safe work environment and safe ways of working. <p>People who work in the health care and social assistance sector, including allied health professionals and support staff in disability services, are a key risk group for workplace hazards.</p> <p>This is because the work they undertake can be physically demanding and repetitive. They are also at risk of workplace stress and violence.</p> <p>For information about different aspects of WHS in the health care and social assistance sector, see: aspirelr.link/swa-healthcare-social-assistance</p>

Dignity of risk
 A person’s right to dignity and choice, upheld in legislation and service standards, to ensure that duty of care or safety are not used as reasons to limit a person’s freedom of personal choice.

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

Sources: <https://business.gov.au/risk-management/health-and-safety/work-health-and-safety>;
<https://www.safeworkaustralia.gov.au/law-and-regulation>;
www.safeworkaustralia.gov.au/safety-topic/industry-and-business/health-care-and-social-assistance



For more information about discrimination see: aspirelr.link/human-rights-discrimination

Collaboration

Collaboration is when people with diverse expertise work together to accomplish common goals.

When you, as a support worker, collaborate with people with disability, it means making sure that they are actively involved in the decisions that will impact their life. After all, they are the expert in their own life and have to live with the consequences of these decisions.

When working with people with disability, there are a range of people you might collaborate with, in addition to the person themselves. This includes:

- the person’s family and friends
- the person’s carers
- other support people
- other service providers.

Any of these people might have useful expertise. Expertise in this sense doesn’t just mean professional or ‘book-based’ expertise; it might also mean expertise in terms of knowledge and understanding of the person, such as:

- knowing their history and background
- understanding that person’s needs, likes and dislikes
- insight into their goals and aspirations.

Collaborating with people who have this type of expertise will help you understand the needs, preferences and aspirations of the person you are working with. When you work collaboratively with others you can draw upon the combined knowledge and expertise of everyone to ensure you are responding in a person-centred way.

It is considered best practice to seek the consent of the individual who is receiving the service before you collaborate with their family, friends, carers and others. If you are sharing personal, sensitive or health information with others, you need act in accordance with Australia’s privacy legislation.

The following table provides more information about your collaborations with different people.

Person with disability	Collaboration with the person you are supporting is essential to person-centred care. You are working with the person, based on a foundation of mutual respect.
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Family, friends and carers	The family, friends and carers of the person you are supporting are important collaborators because they can provide information about a person's background, needs and preferences.
Colleagues	Your colleagues (including supervisors and managers) are important collaborators because of their practical experience and knowledge and their understanding of organisational policies and procedures.
Professionals from different agencies and sectors	At times, you will need to collaborate with professionals from different agencies and sectors to ensure a person's needs are met. This might include allied health professionals, such as occupational therapists and physiotherapists. Professionals from different agencies and sectors are important collaborators because of their specialist skills and knowledge and their understanding of and access to resources.
Community members	People with support needs are valued members of their communities. Collaborating with community members and groups to improve the person's access and inclusion is vital.

Catering to individual needs, preferences and aspirations

Person-centred practice places the individual's needs, preferences and aspirations at the centre of service provision.

Person-centred practice is different from service/system-centred practice, which place the structure and requirements of the service or system at the centre of service provision. Person-centred practice, on the other hand, keeps the person being supported at the centre of service provision.

Here are some other key differences between person-centred and service/system-centred practice.

Person-centred practice	Service/system centred practice
Talking with the person	Talking about the person
Planning with the person	Planning for the person
Focusing on strengths, abilities, skills	Focusing on labels/diagnosis, deficits
Finding solutions that work for everyone and are preferably community based	Creating supports based on what works for people with 'that diagnosis'
Doing things in such a way as to best support the person	Doing things in the way that is easiest for the staff or the service
Family and community members are seen as true partners	Family and community members seen as peripheral

Source: www.ndp.org.au/images/factsheets/346/2016-10-person-centred-approach.pdf



To understand an individual's needs, preferences and aspirations you need to work *with* them, not *for* them.

In collaboration with the person and important others, you can develop responses that are based on their individual choices as well as the other aspects of their identity and culture that are important to them such as their:

- age
- gender
- culture
- heritage
- language
- faith
- sexual identity
- relationship status.

Respect for and responsiveness to diversity are recognised as critical aspects of quality service provision in the National Standards for Disability Services.

For information about what respect means when working with people with disability see: aspirelr.link/disability-etiquette

Video: Disability etiquette

Watch the following video about the key features of disability etiquette: aspirelr.link/ia-disability-etiquette

Pay particular attention to the communication techniques and strategies highlighted and think about how you could apply this to your support and care work.



Example

Work together to meet the person's needs, rights, aspirations and preferences

Kylie is Kadira's new senior disability support worker. Kylie states her name clearly and explains where she is from, reminding Kadira of their appointment. Kadira is wearing dark glasses and a medical alert badge that says, 'I have low vision'.

Kadira shows Kylie to her kitchen and offers her tea. Kylie accepts and gets out her paperwork as Kadira deftly makes tea, knowing where everything is located. As they settle at the kitchen table, Kylie thanks Kadira for the tea and compliments her on her home. Kadira smiles but doesn't say much. Kylie takes her time, making small talk and building rapport as they sip tea together. Kylie notices a large pile of CDs on a shelf and they begin to talk about music.



Kadira opens up and soon they are laughing and sharing music recommendations. Kylie asks Kadira more about herself, her goals and what she would like to get out of their work together. As she listens, Kylie takes a few notes and reflects back what she hears, validating what Kadira is saying and offering supportive words. While Kadira was initially hesitant about expressing herself, Kylie's gentleness and willingness to listen encourages her.

Kylie clearly says that she recognises Kadira's capacity and is only here to help her reach her goals. She will support Kadira to make decisions about the care and support she needs. Kylie makes it clear that Kadira is in charge and says she is looking forward to supporting her in any way that she can. She asks Kadira if she feels comfortable about them working together in the future. Kadira nods and they both lean over the table, getting to work.

Practice Task 1

Question 1

Identify two principles of person-centred practice.



Question 2

Match each term to its definition.

Access	Having choice, influence and control over events in one's life
Social and emotional wellbeing (SEWB) framework	Acknowledging the value of every person, regardless of their background, appearance, thoughts or beliefs
Empowerment	Focusing on what someone can do rather than what they cannot do, and acknowledging their aspirations
Human rights-based approach	Ensuring that everyone has the opportunity to find and use resources and services
Strengths-based approach	People who are disadvantaged receive beneficial treatment so they can enjoy the same rights as others
Equity	Used by many Aboriginal and Torres Strait Islander people to describe the social, spiritual, emotional and cultural wellbeing of a person

Question 3

List two ways to apply the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) in your work with people with disabilities.



Question 4

Which of the following statements are correct? Select yes or no for each one.

a. Discrimination based on a person's level of education is unlawful according to federal anti-discrimination legislation.	Yes / No
b. A café owner asks a woman with a speech disorder to leave because the way she speaks is upsetting other customers. According to federal anti-discrimination legislation, could this be unlawful?	Yes / No
c. Duty of care can apply to actions that a worker doesn't take.	Yes / No
d. Dignity of risk only applies in situations where there is no duty of care requirement.	Yes / No
e. Regardless of the state or territory where someone is based, mandatory reporting requirements are the same.	Yes / No
f. There is one national body in Australia that regulates and enforces WHS laws.	Yes / No

Question 5

List at least three ways you could collaborate with the person with disability to ensure their needs, rights and preferences for support and care are met.

Question 6

Briefly outline why it is important to collaborate with the person's family, friends and/or carer when developing person-centred responses.

1B

Support the person's use of assistive technologies

Assistive technology

Technology that enables a person to maintain or improve their capability of performing a task.

Assistive technology is a device or system that helps a person undertake a task that they would otherwise struggle to do.

A vast range of assistive technologies are available to people with disabilities for every facet of daily living. Some of these tools rely on advanced digital technology whereas others are relatively simple in their design.

Assistive technologies help people with disability to maintain their independence and participate in the activities and events that are important to them.

Assistive technologies can also benefit the people who provide informal care to a person with disability. Safety-related technology, such as sensors that give an alert when the gas has been left on or when the person has fallen, can reassure carers.

As someone who works with people with disabilities, be familiar with various assistive technologies. Here are some examples that the people you work with might use and the various domains of life where they can be used.

Life domain	Assistive technologies used in this domain
Self-care, continence and hygiene	<ul style="list-style-type: none">• Shower chairs• Robot vacuum cleaners• Waterproof mattress protectors• Toilet seat raisers• Moisture detection sensors that can be used with continence aids to alert the carer when they become wet• Machines that exercise the pelvic floor muscles to help with bladder control
Daily living	<ul style="list-style-type: none">• Large print reading materials• Sock and stocking applicators and removers• Wi-fi enabled switches that allow users to control devices with a smart phone or similar device
Communication	<ul style="list-style-type: none">• Communication boards• Speech output software• Voice amplification systems



Life domain	Assistive technologies used in this domain
Mobility, transferring and pressure management	<ul style="list-style-type: none"> • Manual handling equipment such as ceiling hoists and standing machines • Electric wheelchairs and scooters with power drive controllers • Mobile pressure care chairs • Timers and alarms to alert carer to perform pressure care • Electronic mattress overlays that send waves of air or movement through the mattress
Cognition and memory loss	<ul style="list-style-type: none"> • Memory jogger technology sends an audio message to remind people of tasks and appointments • Item finders can help people locate important items • Talking photo albums allow people to record voice messages about photos held in a flip-style album
Vision and hearing	<ul style="list-style-type: none"> • Mobile phones with large buttons • Home digital hubs can be voice activated to turn on devices, create a shopping list, phone or text people, read the news or set reminders • Vibrating alarm clocks • Apps such as Be My Eyes, which helps connect people who are blind and have low vision with volunteers who provide visual assistance • Hearing aids • Teletext phones
Recreation and leisure	<ul style="list-style-type: none"> • All-terrain powered wheelchairs • Adapted gardening tools • Audiobooks
Education and employment	<ul style="list-style-type: none"> • Screen reading software • Speech-generating devices • Electronic sit/stand desks and workstations
Home and other environments	<ul style="list-style-type: none"> • Voice-activated electronic devices • Doorbell with flashing light alert • Plastic rain cape that fits over a wheelchair or scooter
Eating and drinking	<ul style="list-style-type: none"> • Plate guards • Sipper cups • Electric carving knives • Ring-pull can openers and jar openers



Life domain	Assistive technologies used in this domain
Carer support	<ul style="list-style-type: none"> • Videoconferencing technology such as Skype or Zoom to maintain contact with others • Stairlifts to help carers support a person to navigate their home environment • Online communities and social media platforms to support carers to meet other carers and find information • The Dementia Friendly Home app to help the carer design a safe environment

For more information about the vast range of assistive technologies see: aspirelr.link/at-aust-assistive-tech

The role of assistive technologies

Assistive technologies help people with disability live more independently and allow them to participate in the networks and communities that are important to them.

Here are some examples of how assistive technologies can help support the life activities of people with disabilities.

Maintaining and promoting independence	<ul style="list-style-type: none"> • Ramps and rails can help people move in and out of their home and other buildings in their community. • Kitchen aids such as pot stabilisers, plate guards and weighted cutlery can help a person with tremors safely prepare and eat their own food. • Swivel car seats and cushions can help people get in and out of their car.
Enabling inclusion and participation	<ul style="list-style-type: none"> • Mouth sticks and head pointers can help people with limited hand use turn pages, draw and use keyboards. • Screen review software that sends text from a computer screen to a speech synthesiser can help people with vision impairment participate in study and work. • Assistive technologies for pet care, such as hands-free leads and quick-fit harnesses, can make it easier for people to exercise with their dog in their local neighbourhood.

Sources: www.who.int/news-room/fact-sheets/detail/assistive-technology;
https://at-aust.org/assets/11_Solutions_for_Vision_Impairment.pdf;
https://at-aust.org/assets/19_Tremors.pdf;
https://at-aust.org/assets/12_Vehicle_Transfer_Aids.pdf



Video: Computers as assistive technology

Watch the following videos to learn about how computers can assist people with learning disabilities.

aspirelr.link/yt-comp-asst-1

aspirelr.link/yt-comp-asst-2



Support the use of assistive technologies

As with any aspect of person-centred practice, you should respect a person's preference to use (or not use) the assistive technologies that work for them.

You should also learn about and respect the etiquette related to certain assistive technologies. For example, touching or pushing a person's wheelchair without their permission is considered disrespectful and an invasion of personal space.

Here are some other things you can do to support a person's use of assistive technologies.

Share information with the person with disability (and the other people involved in their life and care) about assistive technologies.

Identify activities that a person has difficulty with and, where appropriate, discuss assistive technologies that may be useful to them.

Provide information about where assistive technologies can be purchased (some basic and low-risk assistive technologies are available from pharmacies, hardware shops and supermarkets).

Demonstrate how to use 'low-risk' assistive technologies (e.g., shoehorn, zip puller, tap turner). These are readily available, inexpensive, simple living aids that are unlikely to cause harm and do not require training to operate.

Participate in training on how to use specific assistive technologies safely and correctly.

Support the person with disability to access funding for assistive technologies. In some circumstances, people who receive support through the NDIS can receive funding for these.

Monitor the use of assistive technologies to determine whether they continue to meet individual needs.

Seek out services that can help people with disability choose the technology that best meets their needs or review their technology needs, such as occupational therapists and assistive technology advisors.

Source: www.jlaustralia.org.au/docs/default-source/keepable/an-introduction-to-low-risk-at---pt1.pdf?sfvrsn=85d60d2f_2



Keep in mind that some assistive technology products need to be professionally fitted and adjusted. In some cases, a trained professional will need to assess which assistive technology will best meet a person’s needs. Make sure you check your organisation’s policies and procedures about how to safely support someone’s use of assistive technologies.

For more information about funding options, see: aspirelr.link/ndis-asst-tech

Example

Identify and support the person’s use of assistive technologies

Dashiell is a senior personal care assistant. He provides in-home care to numerous people with disability, including Cara. Cara has multiple sclerosis and uses a wheelchair. She has a robot vacuum cleaner to help keep the floors clean and uses some simple, low-risk assistive technologies in the kitchen.

Dashiell supports Cara’s use of assistive technologies. He respects wheelchair etiquette by not touching or pushing Cara’s wheelchair without her permission. When he learns about new assistive technologies that he thinks Cara might benefit from, he talks with her about them.

Sometimes Cara is interested in the new technologies that Dashiell has learned about, but other times she says that she doesn’t think it will suit her needs, preferences or lifestyle. Dashiell respects Cara’s decisions around assistive technologies. He talks about how the technology might help her but respects her right not to trial or purchase the technologies if she doesn’t want to.

Practice Task 2

Question 1

Match each assistive technology to the activities it helps support.

Talking photo album
Hands-free dog-walking lead and quick-fit harness
Plate guards, sipper cups
Stairlifts

Recreation and leisure
Eating and drinking
Carer support
Cognition and memory loss



Question 2

Provide two examples of assistive technology that can be used to support a person's:

- vision

- hearing

- hygiene, continence and self-care

- communication

- mobility

- pressure management.



Question 3

Identify two ways that workers can empower people with disability around the use of assistive technologies.

Question 4

Suggest two examples of assistive technologies that could help a person with disability maintain their independence at home.

Question 5

Explain how a specific assistive technology could support participation and inclusion in education or employment for a person with disability.

1C

Support the person to communicate their needs to family members, carers and others

Whether they have a disability or not, many people find it difficult to communicate their needs in certain situations.

For someone living with a condition that affects speech, comprehension or social skills, it can be particularly challenging to communicate their needs.

Communication difficulties can go both ways, however, where someone might dismiss what a person with disability is trying to say because they assume he or she cannot properly express themselves.

At times, you may need to support a person with disability to communicate their needs to people such as members of their family, carers, medical professionals and other service providers.

It is important to remember that your role is not to communicate *for* the person with disability. Rather, you are *consulting with* them so they can communicate their needs. You should always be led by them and support them in their preferences, needs and aspirations.

For more information about the experiences of people with disability with communication, see: aspirelr.link/cda-can-comm-barr

We cannot have our needs met if we are unable to communicate them. However, this isn't always easy. For example, we might find it difficult to communicate our needs in specific situations, such as when we are afraid of being a burden or need to have a challenging conversation with a specific person, such as an intimidating boss.

Source: www.betterhealth.vic.gov.au/health/healthyliving/relationships-and-communication

Barriers faced by people with disability communicating their needs

People with disability can face particular barriers when it comes to communicating their needs.

The barriers may be related to their disability; for example, a person with cerebral palsy might know what they want to say but struggle to coordinate the muscles required for speech. Someone else with a mental health condition may have a lot of anxiety around identifying and communicating what they need.



Barriers faced by a person with disability when it comes to communication can also relate to negative beliefs, attitudes and assumptions of other people and a lack of resources and services.

Communication is a two-way process; it is only effective if the message is clear and the person receiving it is willing to listen.

For more information about different ways of communicating apart from speech, see: aspirelr.link/scope-aust-comm

Barriers to communicating one's needs	Barriers to being open to communication
<p>Difficulties with speech</p> <p>Someone with a speech disorder may have difficulty articulating their thoughts. Their speech may also sound slurred or distorted.</p>	<p>Negative judgments</p> <p>The receiver assumes that someone who has difficulties with speech is incompetent, mentally ill or affected by drugs or alcohol.</p>
<p>Difficulties with comprehension</p> <p>Someone with a learning disability might find it difficult to answer questions intended to clarify their needs.</p>	<p>Lack of time</p> <p>The receiver is unable or unwilling to spend more time with the person to ensure they are able to clarify their needs.</p>
<p>Lack of access to resources</p> <p>If someone does not have the resources they need to communicate (e.g., an augmentative and alternative communication [AAC] device), they will not be able to communicate their needs.</p>	<p>Lack of skills</p> <p>The receiver has not been trained in how to communicate with someone who uses an AAC device.</p>
<p>Past history</p> <p>Someone who has tried to communicate their needs in the past and has been consistently overlooked, ignored or disrespected may feel that there is no point trying.</p>	<p>Assumptions</p> <p>The receiver makes assumptions about the person's ability or disability (e.g., assuming a person who doesn't speak is deaf, or speaking to someone in a condescending and childlike way).</p>

Consulting with a person

Your support can help a person with disability communicate their needs to different kinds of people. Here are some general guidelines for consulting with people with disability and supporting them to communicate their needs. Remember to check and follow your own organisation's policies and procedures and remain within your scope of practice.



Tips for consulting with people with disability

- Speak clearly and at a reasonable pace.
- Use clear terms that are easy to understand without being patronising.
- Avoid jargon and technical terms.
- Explain concepts, terms and acronyms.
- Use practical examples to explain concepts.
- Break down information into stages and statements, and make each point brief and to the point.
- Check in with the person to make sure they understand you.
- Present information in a clear order.
- Be prepared to listen and take people seriously.
- Give people time to contribute. Don't jump in if they are slow to respond.
- Be aware that individuals may be afraid of expressing their viewpoint.

Tips for supporting a person with disability to communicate their needs

- Ask the person what support they need from you. Don't make assumptions about they can or cannot do.
- Ask the person what has helped them to communicate their message in the past.
- With the person's consent, speak with their family, friends and carers to find out more about how they communicate.
- Encourage and facilitate the use of augmentative and alternative communication aids, such as community request cards and visual schedules.
- If helpful, provide information on communication, relationships and communicating feelings. Make sure the information is appropriate to the situation and in a format that is appropriate to their needs.
- Work together to find a quiet and private place for them to communicate with the other person or people (noises and distractions can make communication more challenging).
- If the person is not sure what they want to say, ask them to indicate what topic they want to focus on (e.g., friends, weekend BBQ, new job) and then work with them to narrow it down.
- Use objects, visuals or pictures to assist communication.
- If you don't understand what the person has said, be honest. If you pretend to understand someone you might miss important information.



Tips for supporting a person with disability to communicate their needs

- Respect and support the person’s independence. Don’t speak for them, and ask them if they need your help before you step in.
- Encourage family, friends and others to communicate directly with the person with disability rather than communicating with you.
- Use a strengths-based approach – focus on what the person *can* do rather than what they can’t do.
- Respect diverse methods of communication.
- Acknowledge the importance of people’s connections to their family, friends and chosen communities and the role you can play in building and maintaining those connections.

Sources: <https://theconversation.com/we-can-all-help-to-improve-communication-for-people-with-disabilities-101199>;
<https://www.thebraintumourcharity.org/media-centre/news/support-news/helping-someone-with-communication-difficulties/>;
<https://www.scopeaust.org.au/blog/communication-access/what-makes-a-good-support-worker/>;
<https://nda.ie/nda-files/-Ask-Me-Guidelines-for-Effective-Consultation-with-People-with-Disabilities1.pdf>

Here are some examples of websites that provide information about communicating needs:

Information for young people: aspirelr.link/headspace-comm-feel

Information about relationships and communication: aspirelr.link/better-health-rel-comm

Tips for having difficult conversations: aspirelr.link/difficult-conversations

Tips for communicating with people with different types of disability:
aspirelr.link/ndco-comm-effct

Tips for communicating with people with intellectual disabilities:
aspirelr.link/idrs-comm-intellectual-disability

Example

Support the person to communicate their needs to family members, carers and others

Nineteen-year-old Liz, who is a wheelchair user, has been working with Carly to improve Liz’s access to the community. Liz’s mother usually drives her where she wants to go, but it is quite an effort to transport Liz and her wheelchair. Liz feels bad asking too often and so doesn’t get out of the house nearly as often as she would like.



Carly has been supporting Liz to gain more independence and become more social. Liz has been hesitant to tell her mother, Frida, as she's worried that her mother will feel rejected. "You need to be able to talk to other people about what you need," Carly explains to Liz. "I can be there when you have the conversation, if you'd like. Just let me know if you'd like me chip in."

A few days later, Carly is visiting Liz in her home. Liz is looking nervous, and Frida looks worried. The three women sit down together.

Liz explains to Frida that she and Carly have found out about a volunteering opportunity at the local library for people who want to read stories to children. Carly smiles at Liz to reassure and encourage her. Liz explains that she can access funding to get to and from the session in a taxi.

Frida asks why Liz doesn't want her to drive her to the library. "Carly, can you help me here?" Liz asks. Carly explains that Liz has talked about how she needs more independence. She's getting older now and wants to do some things on her own.

Frida nods and Carly asks her how she feels about the plan. Frida says she knows Liz needs more independence now that she's getting older. She thanks Carly for supporting Liz and gives her daughter a hug and tells her she's proud of her.

Practice Task 3

Question 1

List at least four things you can do to support a person with disability to communicate their needs.



Question 2

What should you do before you step in to help a person with disability communicate with another person?

1D

Ensure support information is accurately recorded, maintained, applied and stored

Ensure you are familiar with your organisation's policies and procedures about recording, maintaining and storing information.

Organisational policies and procedures specify how information about service users and service delivery should be collected, where it needs to be stored and how often it needs to be reviewed. These policies and procedures are informed by legislation and standards regarding **privacy**, **confidentiality** and **disclosure**. Most organisations have a policy that requires written documents to be signed and dated.

The information you collect about the person you are supporting needs to be accurate and complete. This will help other workers cater to that person's individual needs and preferences.

By accurately recording information, making sure it is complete and maintaining it appropriately, you are also helping to ensure the efficient delivery of services.

Your workplace will have a range of different types of documents and reports you need to complete and maintain. Here are some examples.

Individual plans	<p>Individual plans are a record of a service user's needs, goals and other relevant information. An individual plan includes information about service delivery, such as which supports are currently provided.</p> <p>Individual plans need to be updated on a regular basis; the timing will depend upon your organisation's policies and procedures.</p> <p>Individual plans need to be stored in a way that meets the requirements of privacy legislation and organisational policies and procedures.</p>
Forms and reports	<p>There are a range of forms and reports you may need to complete in the course of your work.</p> <p>These include referral forms, funding requests and hazard and injury reports.</p> <p>Forms and report templates are usually available on an organisation's intranet, along with organisational policies and procedures about how to complete and store these documents.</p>
Notes	<p>You need to make sure that any notes you write about service users are kept secure so they cannot be read by people who are not authorised to access them.</p> <p>Your notes should be legible and clear because you and others may need to refer to them later.</p>

Privacy

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

Confidentiality

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

Disclosure

The act of sharing or releasing private or personal information.



When collecting information from service users, employ the skill of active listening. This shows respect to the person and demonstrates that you care. It also helps you to concentrate properly and ensure the information you record is accurate and complete. Active listening involves making a conscious effort to hear what another person is saying. It involves:

- paying attention
- deferring judgment
- showing you are listening
- providing feedback
- responding appropriately.

For more information about active listening, see: aspirelr.link/syn-active-listening

It is also helpful to actively clarify what the person has said by paraphrasing it back to them and asking questions if you don't understand or need further information.

Here are some other strategies for collecting accurate information and ensuring service delivery is appropriate, safe and complete.

- Record the information as it is provided to you or soon as possible after the interaction.
- Focus on the facts and avoid emotive language.
- Do not use abbreviations or jargon.
- Record all relevant information.
- Try to avoid errors and omissions. If you do make a mistake, you might need to follow a specific guideline for making an amendment (e.g., signing and dating the change).
- Write legibly and enter data correctly for electronic records.
- After you've finished, scan what you've written so you can correct any spelling mistakes or add a missing word.

People's needs, goals and preferences change over time. That means you need to maintain documents by updating and amending them regularly. Organisational policies and procedures will outline the process for maintaining records relating to service users and service delivery.

When updating and amending records, follow the guidelines above to maintain information and ensure its accuracy.

As well as recording and maintaining information about a person's support needs, you also need to apply that information. This means using the information to guide your responses and future activities. Documents such as individual plans provide you with an outline and a reminder of a person's needs, preferences and aspirations.

Having that information recorded accurately and properly maintained helps to ensure efficient service delivery. It also helps other workers providing support to that



person in the future because it provides them with up-to-date information about that person's needs, preferences and aspirations.

Privacy, confidentiality and disclosure legislation

Legislation regarding privacy, confidentiality and disclosure is especially relevant to the process of recording and storing information.

In Australia information collected about individuals is regulated by the *Privacy Act 1988* (Cth).

The Act outlines the legal requirements of agencies and organisations when handling personal information, including how that information is:

- collected
- used
- disclosed
- stored.

Here are some useful definitions relating to privacy, confidentiality and disclosure.

Privacy	Privacy is the right not to have information about yourself disclosed or made public. It relates to all information that is personal or sensitive in nature.
Confidentiality	Confidentiality relates to data or information (both verbal and written). When something is confidential, it means there is limited access to private information. Confidentiality restricts an individual or organisation from using, storing and disclosing information about a person that is outside of the scope (purpose) for which the information was collected.
Disclosure	Disclosure is the act of sharing or releasing of personal information with another person or making that information public. Examples of disclosure include: accidentally emailing someone's personal information to an unintended recipient, publishing someone's personal information online or telling someone's personal story to another person who does not need to know.

In addition to the Commonwealth law regarding privacy, most Australian states and territories have their own privacy legislation. Guidelines, such as the *NDIA Operational Guide*, outline the obligations of service providers when collecting, using, disclosing and storing a person's personal information.

For more information about the *Privacy Act 1988*, see: aspirelr.link/oaic-privacy-act

Personal, sensitive and health information

According to the *Privacy Act 1988* (Cth), there are three different types of information: personal information, sensitive information and health information.



Here is a description of each.

Personal information	This includes a person's name, address, contact details (such as phone number or email), date of birth and gender.
Sensitive information	This is a special category of personal information and is subject to stricter legal requirements for collection, storage use and disclosure. It includes information or an opinion about a person, such as their racial or ethnic origin, political opinions, religious or philosophical beliefs, sexual preferences or practices, or criminal record.
Health information	This is sensitive information about a person's physical and mental health, disability, health preferences, use of health services and genetics.

Within the Act, a higher level of protection is given to health information and sensitive information, such as information about religious affiliation, sexual orientation and criminal record.

Storing information

According to the *Privacy Act 1988 (Cth)*, an organisation must take reasonable steps to protect the personal and sensitive information it stores.

Organisations must ensure that the personal and sensitive information they are storing is not:

- misused
- interfered with
- lost
- accessed by an unauthorised person
- modified
- disclosed.

Organisational policies and procedures outline how documents are to be stored in alignment with privacy legislation. For example, organisations might have policies requiring workers to:

- use passwords to protect information that is stored electronically
- keep hardcopy personal information in a locked file or cabinet
- log off when they walk away from their computer
- place computer screens out of the view of people who are not authorised to see the information.



Example

Ensure information is accurately recorded, maintained, applied and stored

Eimear is a behavioural support officer. She has just started working with Connie, a 26-year-old woman with an intellectual disability and a mental health condition. She visits Connie in her home where she lives with her parents.

Eimear, Connie and her parents are talking about Connie's needs, preferences and aspirations. Eimear is taking notes as they talk. This will help her accurately record the information that Connie and her parents are providing.

Eimear looks at Connie and her parents when they are talking and provides subtle verbal encouragements, such as 'okay' and 'I see.' She nods her head and leans forward slightly to show Connie and her parents that she is listening to what they are saying.

When she is in the office later that day, Eimear types up these handwritten notes. She makes sure she focuses on facts and avoids using jargon.

Eimear is in the habit of logging off her computer when she leaves her desk. People come in and out of the office all the time, and Eimear wants to make sure that her clients' privacy is protected.

Practice Task 4

Question 1

Which of the following is a strategy for collecting accurate and complete information in a conversation?

- Action listening
- Adjusted listening
- Augmented listening
- Active listening
- Alternative listening



Question 2

List two circumstances where you might need to update a person's support information.

Question 3

Match each term about privacy legislation to its definition.

Personal information
Sensitive information
Privacy
Confidentiality
Disclosure

Managing access to private information
The act of sharing or releasing of private or personal information with another person or making that information public
Information about a person's name, address, contact details, date of birth and gender
A special category of information about a person that is subject to stricter legal requirements for collection, storage use and disclosure
The right to not have information about yourself disclosed or made public

Question 4

According the *Privacy Act 1988* (Cth), what are three things an organisation must not do (or allow to be done) with respect to personal and sensitive information?



Question 5

Identify a policy that supports the secure storage of electronic information.

Question 6

Explain what it means to 'apply' the information documented in an individual plan.

1E

Access and provide resources

To ensure a person's needs are met, you may need to access resources from other workers or agencies.

Colleagues, supervisors, professional networks, community groups, other service providers, government bodies and businesses all may be able to provide information, services or resources that the person needs.

To access and provide resources that meet a range of needs, you need to find out what services are available within the community, have some understanding about the processes involved in accessing services and be able to establish and maintain good professional relationships.

Most people with disability will have at least some needs relating to their disability – such as the need for assistive technologies or specialist health care.

Here is some more information about the types of resources that a person with disability might need.

Need	Examples of resources
<p>Physical accessibility</p> 	<ul style="list-style-type: none">• modifications to the home (e.g., wider doors, ceiling hoists)• mobility aids• disability parking permit
<p>Education</p> 	<ul style="list-style-type: none">• information about education options• literacy skills tutoring• adult education short courses
<p>Employment</p> 	<ul style="list-style-type: none">• job search tools and training• work-ready skills• careers counselling
<p>Transport</p> 	<ul style="list-style-type: none">• car pooling• volunteer community transport services• driver's licence



Need	Examples of resources
<p>Social and community connections</p> 	<ul style="list-style-type: none"> • sporting clubs, teams and facilities • cultural and religious groups • special interest groups (e.g., chess, online gaming, gardening)
<p>Advocacy</p> 	<ul style="list-style-type: none"> • professional or citizen advocate • legal advice • connection to groups that advocate for social change
<p>Information</p> 	<ul style="list-style-type: none"> • information in different formats • translation services
<p>Accommodation</p> 	<ul style="list-style-type: none"> • information about housing options (e.g., supported independent living, co-residency) • property listings • housemate matching services
<p>Financial support</p> 	<ul style="list-style-type: none"> • financial counselling • financial literacy support • government payments (e.g., pensions, allowances, supplements)
<p>Health care</p> 	<ul style="list-style-type: none"> • pharmacy home delivery services • specialist health care • allied health care (e.g., physiotherapist, occupational therapist)
<p>Mental health services</p> 	<ul style="list-style-type: none"> • counselling and psychology • family mental health support services • online and digital mental health services and forums



Making resources available

You may be able to access the resources that someone needs relatively easily and without external support.

The person you are supporting might need a new mobility aid that you can easily access through your organisation. In cases such as these, making resources available to meet the person’s needs will be relatively straightforward.

However, there will be situations where you don’t have the skills, knowledge, resources or qualifications to meet a person’s support needs. When this occurs, you will need to seek out services from other workers and agencies, such as your colleagues, supervisors, professional networks, community groups, government bodies and businesses.

Here are some examples of relevant workers, agencies, networks and services workers you might need to seek out to meet a person’s needs.

People from your organisation and networks – and what they could provide	
<ul style="list-style-type: none"> • Experienced colleagues • Manager/supervisor • Informal professional networks 	<ul style="list-style-type: none"> • Information and advice about local resources and services • Specialist support (e.g., social worker)
Charities and not-for-profit organisations – and what they could provide	
<ul style="list-style-type: none"> • Not-for-profit social and public welfare agencies • Education charities • Health charities 	<ul style="list-style-type: none"> • Literacy tutoring • Financial counselling services • Social groups and support groups • Vocational education • Life-skills education • Home-delivered meals
Advocacy groups – and what they could provide	
<ul style="list-style-type: none"> • Disability advocacy organisations • Organisations led by people with disabilities 	<ul style="list-style-type: none"> • Information about human rights • Help with negotiating complaints and legal action • Citizen and professional advocacy services • Campaigning and leadership opportunities



Government departments and agencies – and what they could provide	
<ul style="list-style-type: none"> • Local council • State-based government agencies • Commonwealth government agencies (e.g., Centrelink) • National Disability Insurance Scheme (NDIS) 	<ul style="list-style-type: none"> • Local council volunteer community driver service • Information about local social groups and networks (e.g., book clubs, special interest groups) • Public housing • Licensing services (e.g., driving) • Government payments • Funding for disability supports and services
Training providers and educational institutions – and what they could provide	
<ul style="list-style-type: none"> • Adult education services • Vocational Education and Training • Universities and private colleges 	<ul style="list-style-type: none"> • Short courses • Job skills training • Preparation for university study • Tertiary (university) education
Medical professionals and health care practitioners – and what they could provide	
<ul style="list-style-type: none"> • General practitioners • Crisis assessment and treatment teams (CATT) • Allied health professionals • Private health insurance companies 	<ul style="list-style-type: none"> • Primary health care • Specialist health care • Emergency mental health treatment • Occupational therapy • Physiotherapy • Counselling and psychotherapy • Private health insurance
Other services – and what they could provide	
<ul style="list-style-type: none"> • Tradespeople • Local pharmacies • Sporting and games organisations 	<ul style="list-style-type: none"> • Home modifications • Pharmacy home delivery services • Sporting teams • Special interest groups (e.g., chess clubs, birdwatching group)

Seeking out services and resources

When seeking out services and resources, it is important to follow organisational policies and procedures and legislative requirements.

In some cases, seeking out resources and services will simply require you to make a phone call, send an email or organise an appointment with another professional.



When providing or seeking out services and resources you need to follow your organisation’s policies and procedures, such as:

- reporting and documentation policies (e.g., how to complete referral forms)
- codes of conduct (e.g., operating in a professional manner)
- conflict of interest policies.

You also need to adhere to relevant legislative requirements, such as:

- laws regarding privacy, confidentiality and disclosure
- duty of care (e.g., that a resource or service is not going to cause a person harm).

Here are some tips that may make it easier for you to seek out resources and services from other workers and agencies.

Know what’s available	<ul style="list-style-type: none"> • Research what services are available in your local community, as well as state/territory and Commonwealth services.
Make connections	<ul style="list-style-type: none"> • Sign up for newsletters, updates and bulletins from agencies you might need to contact in the future • Participate in formal and informal networking opportunities. When you develop personal relationships with other professionals, it will be easier to reach out when you need them.
Stay updated and do your research	<ul style="list-style-type: none"> • Regularly check your contacts to ensure that they are up to date and research new services and resources.
Document and follow procedures	<ul style="list-style-type: none"> • Follow your workplace’s referral procedures and document your actions.
Build relationships of trust and mutual respect	<ul style="list-style-type: none"> • Positive professional relationships are based on trust and mutual respect. • Let your contacts know about resources and services you find out about. • Tell your colleagues about useful contacts you have made.

Example

Access and provide resources

Matt is feeling frustrated. He is Jon’s support worker and is new to the job. Jon is in hospital, recovering from a fall in the shower. Luckily, Jon was not badly hurt, but Matt has undertaken a risk assessment of Jon’s home and found that his flat needs numerous adjustments to ensure he can move around safely.



Corinne, Matt's co-worker, notices Matt's frustration and asks if she can help. Without breaching Jon's privacy, Matt outlines the situation. He explains that his client will be in hospital for a few days, and he needs to get some equipment installed in his flat as soon as possible.

Corinne has developed a good relationship with a local tradesperson who regularly helps with basic home modifications of the type that Jon needs. She explains that she can help Matt to organise the home modifications. Because she has a good relationship with the local tradesperson, she thinks she might be able to get him to prioritise the job.

Practice Task 5

Question 1

A worker is supporting an adult client with a disability who wants to do further study and find a job. Identify at least one resource that the worker could make available to the client to help meet their educational needs and one to help meet their employment needs.

Question 2

Provide examples of at least three external services that a worker might seek in the community to meet the needs of a person with disability.



Summary

- A person-centred approach places the person with disability at the centre of service planning and delivery so they can lead and direct the services they use.
- Person-centred care requires collaboration between the worker, the person with disability and their family members, friends and carers.
- Collaborating with a person with disability as well as other people involved in their life and care will help you understand the person's needs, preferences and aspirations.
- A vast range of assistive technologies for every facet of daily living are available to people with disability.
- Assistive technologies help people live more independently and allow them to participate in the networks and communities that are important to them.
- A person with disability may need support to communicate their needs to other people such as members of their family, carers and other service providers.
- Communication difficulties can stem from the person sending the message and the person receiving the message.
- The information you collect about the person with disability needs to be accurate and complete.
- People's needs, goals and preferences change over time, so it is important to update documentation regularly.
- In Australia information collected about individuals is regulated by the *Privacy Act 1988* (Cth).
- You may need to access resources from other workers or agencies to meet the needs of the person you are supporting.



Learning Checkpoint 1

Work collaboratively to develop person-centred responses

Part A

1. Identify two differences between a person-centred approach and a service- or system-centred approach.

2. Which of the following statements are correct? Select yes or no for each one.

a. Providing someone with information and resources can be a way of empowering them.	Yes / No
b. Having the ability to make choices in one's daily life is a fundamental aspect of a human rights-based approach to service delivery.	Yes / No
c. A strengths-based approach involves helping someone acknowledge the challenges they are facing and how they can overcome them.	Yes / No
d. The principle of accessibility requires services to make their premises wheelchair-friendly.	Yes / No
e. Equality and equity are essentially the same concept.	Yes / No
f. A social and emotional wellbeing (SEWB) framework recognises the importance of Aboriginal and Torres Strait Islander peoples connection to land, sea, culture, spirituality, family and community.	Yes / No



3. Identify two rights outlined in the United Nations Convention on the Rights of Persons with Disabilities and explain how you can uphold each right in your support work.

4. Describe how collaboration can help workers better meet the needs, preferences and aspirations of a person with disability.

5. Identify three assistive technologies that can be used to meet the individual needs of a person with disability across the following life domains:

- Daily living

- Recreation and leisure



- Education and employment

- Home and other environments

6. Identify one assistive technology that can assist a person with a hearing impairment to communicate.

7. What are you legally required to do under mandatory reporting legislation?

8. Identify three areas of life that are covered by Australian disability discrimination law.



9. Pippa is 19 years old and has an intellectual disability. She asks her support worker if he'll go with her to the local skate bowl so she can try out the skateboard she got for her birthday.

When the support worker reminds Pippa that skating in the bowl can be dangerous, Pippa says she already knows that but still wants to try it.

Explain how the support worker can uphold his duty of care towards Pippa as well as respect her dignity of risk.

10. Using one example, explain the role of assistive technologies in maintaining and promoting the independence of a person with memory loss.

11. Using one example, explain the role of assistive technologies in enabling inclusion and participation for a person with a vision impairment.



12. Which of the following are WHS responsibilities for individual workers? Tick all that apply.

- Taking care of their own health and safety
- Monitoring the health of workers in the workplace
- Taking care not to do anything that might hurt another person
- Maintaining adequate facilities
- Identifying WHS training opportunities

13. You support Kieran, a 36-year-old man with an acquired brain injury that has left him needing support with physical tasks, such as showering and dressing. For each of the following, give an example of an assistive technology that could help you care for Kieran.

- Technologies that could help him be more independent with self-care

- Technologies that could help him eat and drink more independently

- Technologies that could help you transfer him between bed and chair safely

- Technologies that could help you manage his incontinence

- Technologies that can reduce the chance of Kieran developing pressure injuries



Part B

Read the case study and answer the questions that follow.

Case study

Elias is a community care worker. He has been working with Blake, a 29-year-old man with an acquired brain injury, for the past few months.

Blake lives at home with his parents. Some of his strengths are his commitment to his part-time job, his thoughtful and caring attitude and his love of nature. Some challenges he faces are that he can be forgetful and sometimes he has difficulty paying attention. When Blake is tired, his speech becomes slurred, which can make it difficult for him to communicate with others.

Blake's parents are loving, supportive and very protective of their son. They drive Blake to and from work and prefer for him to stay at home on the weekend or at his sister's place in a suburb close by.

Blake tells Elias that he really wants to meet people of his own age, become more independent and perhaps get a girlfriend, but he doesn't know how to broach the issue with his parents.

1. Blake has identified some goals that he wants to achieve. Suggest what Elias could say or do next to help Blake take steps towards his goals.



- 2.** Elias is taking some handwritten notes to record what Blake is telling him about the support he needs. Elias doesn't understand a point that Blake is trying to make. Suggest what Elias should do at this point to ensure his notes are accurate and complete.

- 3.** Identify two things Elias can do to help Blake communicate his needs to his parents.

- 4.** Blake asks Elias for help to connect with people his own age. Elias isn't very familiar with the area where Blake lives. List the people and services Elias could contact for information about social groups and networks where Blake can meet people his own age. Provide three examples.



- 5. Elias is back at the office and using the handwritten notes he took to update Blake's electronic records.

Identify a policy that Elias might need to follow to ensure the information he is entering into the computer is securely stored and kept private and confidential.

- 6. Elias has found a local social group that may provide Blake with opportunities to make friends his own age. After he gets Blake's consent, Elias calls the facilitator of the group, who asks for some more information about Blake and his circumstances.

Identify two factors relating to privacy that Elias needs to consider before he discloses information about Blake to the facilitator.

- 7. When it comes to applying Blake's support information, briefly explain why it is important for Elias to make sure the information is recorded accurately and properly maintained.



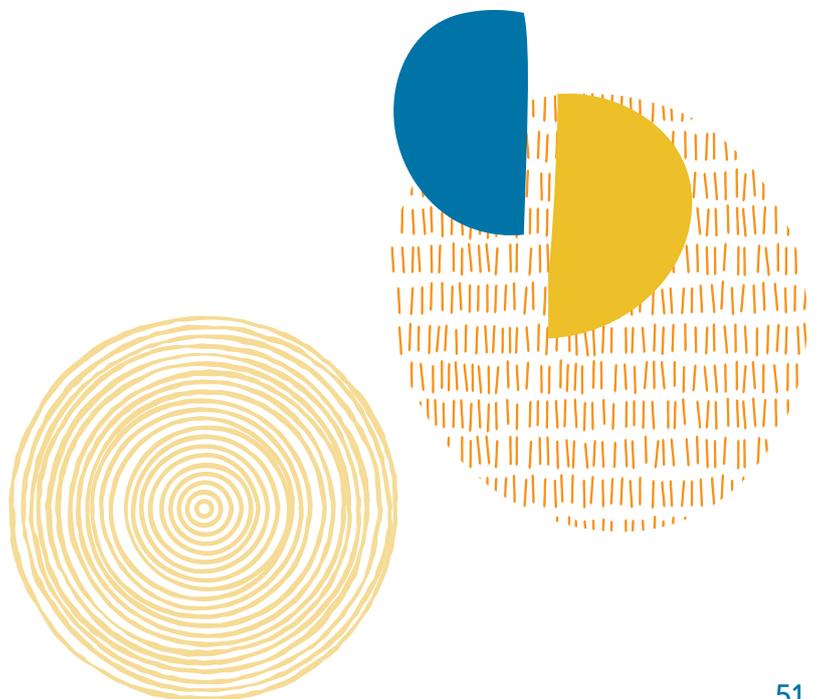
8. List three ways Elias can ensure Blake's information is accurately recorded.

A large, empty rounded rectangular box with a thin black border, intended for the student to write their answer to question 8.



Topic 2: Review and monitor person-centred responses

- 2A Review, measure and improve the effectiveness of responses
- 2B Meet the person's changing needs and preferences by modifying services



2A Review, measure and improve the effectiveness of responses

Meeting the needs and preferences of the person you are working with requires you to review and measure the effectiveness of the service provided to them.

The person with disability and other important people in their life and care should be involved in the process of monitoring and reviewing the service provided and identifying and taking action to improve it.

Organisations have their own policies and procedures for reviewing and monitoring service effectiveness, including for how feedback is collected and recorded.

By consulting with the person – and other people involved in their life and care – you can identify what’s working, what’s not working and what improvements need to be made.

As with all processes of a person-centred approach, monitoring and reviewing the effectiveness of a service involves consultation and collaboration with the person receiving the service and others involved in their life and care. For organisations that support people with disabilities, this is considered essential to quality service provision.

Here are some important terms related to the process of reviewing, monitoring, measuring and improving the effectiveness of service delivery.

Monitor	An ongoing process that involves regularly collecting information to assess whether outcomes are being achieved
Review	A formal or informal process to determine what changes are necessary to ensure outcomes are achieved
Output	An activity or service that is delivered to someone to achieve an outcome; outputs are measurable (e.g., number of social events)
Outcome	The end result of the activities or services provided; when using a person-centred approach the outcomes are person-centred (e.g., a person finds employment)
Indicator of change	An indicator of change shows progress towards the achievement of an outcome; it must be measurable and observable
Continuous improvement	The ongoing efforts of an organisation to improve services, systems, process or products to maximise benefits for clients

Sources: www.nds.org.au/images/resources/an-introductory-framework.PDF;
www.deakin.edu.au/_data/assets/pdf_file/0011/275690/Dr-Erin-Wilson.pdf;
www.dss.gov.au/our-responsibilities/disability-and-carers/standards-and-quality-assurance/new-national-standards-for-disability-services/national-standards-for-disability-services-evidence-guide



Processes for monitoring and reviewing

Always follow your organisation's policies and procedures when monitoring and reviewing services.

Policies and procedures relating to monitoring and reviewing services are informed by legislation and standards such as the National Standards for Disability Services. Some organisations use specific tools for planning and monitoring outcomes for individuals receiving supports and services.

Source: <https://nda.ie/Publications/Disability-Supports/Disability-Services/Outcome-Measurement-in-evaluating-the-Quality-of-Disability-Services1.pdf>

Best practice person-centred approaches require the person with disability – and others involved in their life and care – to actively participate in these decisions. You may also need to work together to decide how often you will review progress.

During the first stages of individualised planning, you should also explain how your organisation goes about monitoring and reviewing the effectiveness of the services they provide. Organisations typically have multiple mechanisms that clients can use to provide feedback, including verbal feedback, feedback forms and meetings.

Organisations that adhere to best practice principles facilitate and encourage regular monitoring and review of the services they provide. In practice, this means that workers need to consult with the people they are supporting on a regular basis to determine whether their needs are being met and their preferences accounted for.

Source: <https://nda.ie/Good-practice/Guidelines/Guidelines-on-Person-Centered-Planning/Guidelines-on-Person-Centred-Planning-format-versions/7-Monitoring-and-evaluation/>

The people you are supporting should be actively and directly involved in this process. Remember to talk *with* the person rather than talking *about* them. If a person's needs are not being met or their preferences are not being accounted for, you need to work out how this can be done better, in collaboration with the person and the other people involved in their life and care.

Here are some ways you can encourage people to provide feedback on what is and isn't working about the services they are receiving.

Talk to the people you provide support to about the importance of providing feedback and encourage them to share their thoughts and ideas.

Provide the people you are supporting – as well as their family, friends and carers – with information about how they can provide feedback on the services they are receiving from your organisation.

Let people know that working with them to identify and act on improvements is part of your role.

Find everyday opportunities to seek feedback from the person you provide support to, as well as their family members, carers and other relevant people.

When you are working with a person with disability, decisions about how the services provided to them will be monitored and reviewed are typically made during the first stage of individualised planning.



Collect and record the feedback and ideas that the person, their family and carers share.

Ensure people can provide feedback by catering to their communication and language needs.

Make sure the physical environment is not a barrier to connecting with people and talking about their experiences – you may need to find a private place for conversation.

Be aware of the power imbalance between you and the person you are providing support to; provide information about the feedback process in a non-threatening and inclusive way.

If it is difficult for the person you are supporting to communicate what is or isn't working for them, you may need to use alternative methods of assessing whether services are meeting their needs and aligned with their preferences. For example, photos and videos of the person engaged in activities can indicate whether someone is enjoying an activity.

Source: www.scopeaust.org.au/wp-content/uploads/2020/03/Toolkit-Part-1.pdf

Another tool that can assist with the process of monitoring and reviewing services is a 'learning log'. The learning log gives workers a process for recording what they learn when they are working with someone.

For more information about the learning log, visit: aspirelr.link/hsa-learning-log

Person-centred approaches

The process of monitoring and reviewing services should not be onerous or disruptive for the person you are supporting.

Like all person-centred processes, it needs to be undertaken in a way that meets the individual preferences and abilities of the person you are supporting.

One tool that can assist with this process is the 'What's working/not working' tool. The tool can be used to review whether a person is being supported in a way that makes sense to them, based on multiple perspectives (including the perspective of the person themselves).

For more information about the What's working/not working tool visit: aspirelr.link/hsa-person-centred-tools

Here are some other examples of person-centred approaches to monitoring and reviewing in practice.



Listen to what the person with disability says about what is and isn't working, and respect their viewpoint.

Build relationships of trust so people feel comfortable to talk about what is and isn't working.

Approach conversations about what is and isn't working in a way that reflects the needs and preferences of the person with disability (rather than your own needs and preferences). This might mean:

- choosing a good time to have the conversation, such as a time of day when the person is relaxed and not tired
- letting the conversation go on for longer than you intended
- talking about issues that you did not intend or expect to be talking about
- respecting the person's decision not to have a conversation at that point in time.

Measure effectiveness

To evaluate whether a person's needs are being met, some form of measurement is required.

A measurement indicates whether the service provided is meeting the person's needs.

Your organisation will have its own processes and procedures for measuring the effectiveness of the services provided. Methods to collect this information include feedback forms, surveys and **validated tools**.

Best practice is to use person-centred, outcomes-focused measures to assess the outcome of a service provided. In other words, the individual receiving the service is at the centre of the process.

A measure that is *outcomes* focused is different from a measure that is *output* focused. A measure that is output focused tells you about 'how much or how many' – such as how many times or how much time a person spent participating in an activity. Although this might be useful for administrative purpose, it tells you nothing about whether a service has met a person needs or whether it aligns with their preferences.

Some tools used to measure effectiveness are for individuals, whereas others are used for services. A tool used to measure service effectiveness brings together information from multiple service users and is used to improve the entire service. A tool used to measure the effectiveness of a service for an individual focuses solely on the outcomes for that person and is used to improve service provision for that individual specifically.

Validated tool
A tool that has been scientifically tested to ensure it is reliable and accurate.

Sources: www2.health.vic.gov.au/hospitals-and-health-services/patient-care/older-people/comm-topics/person-centred-practice/pcp-measuring;
<https://nda.ie/Publications/Disability-Supports/Disability-Services/Outcome-Measurement-in-evaluating-the-Quality-of-Disability-Services1.pdf>



Identify and take actions to improve responses

Like all person-centred approaches, the process of identifying actions to improve responses, and taking those actions, should be a collaborative process.

The NDIS has developed a conversation tool that can be used to identify potential improvements to service delivery. The tool is based upon the six National Standards for Disability Services. Here are some examples of questions included in the conversation tool.

National standard	Questions to identify potential improvements
Rights	How in control do you feel about your supports and services?
Participation and inclusion	Are we helping you do the things you want to do?
Individual outcomes	How do you think the service supports you to reach your personal goals?
Feedback and complaints	How could we better support you to provide feedback?
Service access	Do you have all the information you need to understand which services you can use?
Service management	Do you feel that workers know their duties and are helpful and supportive of you?

Source: www.dss.gov.au/our-responsibilities/disability-and-carers/standards-and-quality-assurance/new-national-standards-for-disability-services/national-standards-for-disability-services-conversation-tool

Your organisation might have other tools you can use to identify potential improvements. Additional tools include ‘What’s working/not working’ and ‘4 + 1 questions’.

For more information about the 4+1 questions tool, see: helensandersonassociates.co.uk/wp-content/uploads/2015/02/fourplusone.pdf

Once you have decided on the improvements to act upon, you need to follow your organisational policies and procedures about recording and documenting those changes. For example, you need to record:

- what the improvements are
- the timeframe for improvements (to ensure accountability)
- how feedback from the person with disability and other people involved in their life and care has been considered and used.

Keep in mind that some changes will be urgent, thus need to be acted upon immediately.



Considerations

Any actions undertaken to improve the delivery of services need to be decided upon in collaboration with the person and the other people involved in their life and care.

You may have your own ideas about how improvements can be made based upon your own knowledge and experience. Sharing ideas and coming up with solutions together is part of the collaborative process.

Some improvements will be relatively easy for you to implement and within the scope of your job role, responsibilities and qualifications. Other improvements will require changes that are beyond the scope of your job role, responsibilities and qualifications.

If you are unsure whether you can make a change to the service you are providing, check your job description and your organisational policies and procedures. If you are still unsure, check with your supervisor.

When making decisions about changes to service delivery, you need to be aware of the various frameworks, requirements and standards that apply to changes to service delivery. Any changes you make need to align with the following.

Legislative and procedural requirements

- Legislative requirements are the laws that organisations need to follow. Organisations that deliver services to people with disability need to follow a range of laws, such as the *Disability Services Act 1986* as well as other Commonwealth and state- and territory-based laws.
- Policies and procedures are the mechanisms organisation's use to ensure they and their staff are adhering to legislative requirements.
- For example, an organisation's privacy policy will be based on privacy legislation. When workers follow that policy, they are adhering to the legislation that informs it.
- It is important for workers to follow the policies and procedures set out by their organisation and to be familiar with the legislative requirements that are relevant to the work that they do.



Policy frameworks	<ul style="list-style-type: none">• A policy framework incorporates all the policies that underpin an organisation's operations and functions.• These policies inform organisational procedures as well as supporting documents such as guidelines, manuals and handbooks.• Policy frameworks help to ensure organisations comply with legislation, quality standards, codes of conduct and other requirements.• You need to be familiar with your organisation's policy framework and stay updated on changes made to it.• When you change any aspect of service deliver, you need to make sure it aligns with your organisation's policy framework and maintains quality standards.
Budgetary frameworks	<ul style="list-style-type: none">• A budgetary framework provides information about the financial resources required, available and projected to be available for service delivery.• Before making any changes to service delivery, you need to make sure those changes are within your organisation's budgetary framework, while maintaining quality standards.• Make sure you familiarise yourself with the financial procedures used in your workplace and always obtain appropriate permissions before assigning funding.• You may need to provide detailed costings for proposed changes and be able to demonstrate the likelihood of the change being effective for meeting the person's needs. If several options are available, the differing costs of each option is likely to play a role in decision-making.

Sources: www.effectivegovernance.com.au/page/knowledge-centre/news-articles/do-you-need-a-policy-on-policies#Reference%201%20Bottom

Example

Review, measure and improve the effectiveness of responses

Marianne has been Claire's disability support worker for six months. Claire has an intellectual disability.

Marianne is reviewing Claire's participation in a day program. The intended outcome was to increase Claire's social circle by introducing her to other people of the same age with similar care needs.



Marianne has spoken to Claire, Claire's mother and the program director to gain their ideas about what is working and what could be changed. Claire has identified that she enjoys the program, that she's making friends and that she wants to continue attending (especially swimming). Rachael confirms this and reports that Claire comes home happy and energised. Rachael is grateful for the respite and is pleased that Claire has begun making her own breakfast. She also mentions that Claire wants to set up an email address and Facebook account so she can communicate with her friends during the week.

The program director reports that Claire appears to get along well with the other participants and she particularly enjoys the physical activities.

From this consultation, Marianne has identified that this support activity is working well for Claire in most respects, although two clear areas of improvement are identifiable:

- Claire needs to be offered more training or specific assistance in setting up an email address and Facebook account. This should be offered reasonably quickly to ensure that Claire can keep up with her newfound skills and that her friendships are supported.
- The possibility of increasing Claire's participation in the program needs to be considered (for example, could she attend three days per week and are there more physical activities that could be included?). This needs more careful consideration, planning and consultation.

Identify gaps in assistive technology needs

Identifying gaps in assistive technology needs is one way of supporting and meeting a person's needs.

Consult with the person you are working with, as well as other people involved in their life and care, about aids and technology that are not meeting their needs. For example, perhaps a person's electric wheelchair requires more room than is available on a minibus used to transport their sports team to events.

The person you are working with could also have a device or piece of equipment that needs to be adjusted or is no longer suitable for them. If this is the case, a health professional such as a physiotherapist or occupational therapist may need to conduct an assessment to identify the issue and recommend a change.

Some people with disability will have an excellent understanding of the range of assistive technologies available. They may already know which device or piece of equipment they need. In other cases, you may need to provide information about



the options or seek out a service provider or agency that can provide professional assessment and advice.

If you have observed that a person you are working with is facing barriers to having their needs met or fulfilling their aspirations, and you think that assistive technologies might be beneficial, you could talk about this with the person and their family members and carers.

Remember to use a person-centred approach when discussing your observations or any gaps in assistive technology needs. For example, perhaps the person does not see the challenge that you have observed as a major problem. Share what you know and what you have observed, listen to the person's viewpoint and respect their choices and decisions.

Once you have consulted with the person (and other relevant people in their life) and worked together to identify gaps in assistive technology needs, you will need to report these gaps to your supervisor according to your organisation's policies and procedures.

Reporting an issue could be urgent if the equipment is unsafe or there is a risk to the person or other people involved in their life and care.

Practice Task 6

Question 1

Briefly explain what it means to review the effectiveness of a service.

**Question 2**

Explain why you would consult with the person with disability and others involved in their life and care when you are reviewing the effectiveness of a service response.

Question 3

Briefly describe the difference between a measure that is outcomes focused and a measure that is output focused.

Question 4

Which of the following frameworks and legislative requirements need to be considered when making improvements to service delivery? Tick all that apply.

- Privacy legislation
- Disability Services Act 1986* legislation
- Fair Work Act 2009* legislation
- Your organisation's policy framework
- Your organisation's budgetary frameworks



Question 5

Identify one step you could take to identify gaps in the assistive technology needs of a person with disability.

2B

Meet the person's changing needs and preferences by modifying services

There are a range of situations where you might be required to modify specific aspects of the services you deliver.

Situations where you might need to modify the services you deliver include where:

- the person's needs are not being met or their preferences are not being accounted for
- the person's needs and preferences have changed
- your organisation's policies and procedures have changed
- legislation has changed.

Wherever possible, support and encourage the person you are working with to meet their own changing needs. One way you can do this is by working with them to identify potential training opportunities they might benefit from.

Meet changing needs and preferences

Everyone's needs and preferences change over time, regardless of whether they have a disability. The change can come about for a range of reasons, including changes in health, financial situation, family circumstances or simply the evolution of one's tastes, goals and aspirations. A person's needs and preferences can change at any time during their life.

Here are some examples of people whose needs and preferences have changed.

Jake lives with his parents. Since turning 21, he's decided he wants more independence. He's ready to move out into his own place.

Eva has multiple sclerosis and has been working full time for 10 years. Recently, she has been getting tired much more easily. She's decided to switch to part-time work.

Daniel has always been pretty healthy but since turning 50, he's started having some health problems. He knows he needs to check in with his GP more often.

Poh has a condition that means her vision is gradually deteriorating. She needs some new assistive technologies to help her safely navigate the environments where she lives, works and socialises.



Haneul has recently come out as non-binary. Haneul would prefer people to use the pronoun 'they' rather than 'he.' Haneul is feeling isolated and wants to find a support group for non-binary people.

Gillian has early-onset dementia and has recently agreed to stop driving for her own safety and that of other road users. She needs an alternative way of getting around her local neighbourhood.

Processes for responding to changing needs and preferences

Organisations have their own processes for responding to the changing needs and preferences of the people who they provide services to.

These processes need to be followed, even in situations where a review comes from externally, such as when family members request a review of a person's needs. Changing needs can also be identified through a formal review process.

You also need to respond to the changing needs of the people you are working with as and when they occur. This is part of a person-centred response: you are responding to the needs of the individual rather than responding to a service-based requirement (e.g., the need for an annual review).

The person with disability should be involved as much as possible in any decisions related to their changing needs and preferences. You need to work with the person with disability – and other people involved in their life and care – to modify the service you provide to meet their changing needs and preferences.

Having regular conversations with the person about what is and isn't working and listening to find out what matters to them will help you to recognise their changing needs and preferences.

Here are some examples of aspects of service delivery you may need to modify because a person's needs and preferences have changed.

What change has occurred?	Modifications to service delivery based upon changing needs
They have increased or decreased mobility	Using new equipment (e.g., ceiling hoist) and supporting people to participate in new activities (e.g., aquatic exercise)
They have new skills	Reducing the level of support provided to undertake specific activities (e.g., cooking, shopping)



What change has occurred?	Modifications to service delivery based upon changing needs
They have new assistive technology	Communicating with people in new ways (e.g., a person with a hearing impairment using speech-to-text app to participate in one-on-one or group conversations)
They have a new routine	Providing services at a different time, on a different day or in a new environment
They are living in new home environment	Communicating with people involved in the person's life and care in new ways (e.g., using videoconferencing technology to communicate with the person's family members)
They have new care arrangements	Working with and including new people in the consultation and collaboration process
They have new interests	Working with the person and providing support and encouragement to them to participate in new activities that reflect their new interests

NB: These are examples only; the modifications you make to the services you provide need to be based upon the specific circumstances of the person you are working with and your organisation's policies, processes and procedures.

Responding to legislative changes

Legislation is the term used to refer to a law or a collection of laws. Legislative changes are changes in the law.

In Australia, laws are made by politicians and judges. Some laws only apply to a specific state or territory (e.g., Victorian Acts apply to people living in Victoria). Commonwealth laws apply to the whole of Australia.

Source: www.legallaid.vic.gov.au/find-legal-answers/courts-and-legal-system/how-laws-are-made

A range of laws are relevant to people with disability and disability service providers. Here are some examples.

Commonwealth laws	State/territory laws
<i>Disability Discrimination Act 1992</i>	<i>Disability Services Act 1991 (ACT)</i>
<i>Disability Services Act 1986</i>	<i>Disability Inclusion Act 2014 (NSW)</i>
<i>Social Security Act 1991</i>	<i>Disability Act 2006 (Victoria)</i>
National Disability Insurance Scheme 2013	

Sources: <https://raisingchildren.net.au/disability/disability-rights-the-law/law/disability-law>; <https://www.odsc.vic.gov.au/about-us/legislation/>



Changes to legislation can affect how you work with a person with disability, such as how you:

- respond to a person's needs
- engage with clients
- conduct yourself in the workplace (e.g., treating people fairly regardless of their age, race, sex, etc.)
- record, share and store information about the people you are working with
- manage client safety
- ensure your own safety in the workplace
- work with specific groups of clients (e.g., children, Aboriginal and Torres Strait Islander people, people from culturally and linguistically diverse backgrounds).

Legislative changes will typically lead to changes in your organisation's policies and procedures. For example, if there is a legislative change regarding privacy, an organisation's privacy policies and procedures will also need to change.

Responsibilities

If there is a legislative change, employees at all levels of an organisation have specific responsibilities to ensure this legislation is implemented.

Responsibilities vary depending on a person's position and experience within the organisation. For example:

 Senior staff	Senior staff are typically responsible for developing new policies, procedures and guidelines to ensure legislative changes are implemented.
 Managers	Managers are typically responsible for ensuring policies, procedures and guidelines related to the legislative changes are implemented.
 Workers	Workers are responsible for implementing policies, procedures and guidelines in the day-to-day delivery of services. They are accountable to their managers through performance management systems, codes of conduct and other mechanisms.



Depending upon the type and scope of the legislative change, training may be offered by your organisation on the new legislation. It would include information about:

- why the changes have been introduced
- how the changes relate to your role
- your responsibilities
- any new tools you need to use (e.g., checklists, plans).

Here are some simple things you can do as a worker to ensure you respond adequately and appropriately to legislative changes.

- Familiarise yourself with the relevant legislation (remember that there may be legislation specific to your state or territory).
- Understand your responsibilities under the relevant legislation.
- Ensure you follow organisational policies, procedures and guidelines.
- Follow up with your manager if you have questions about the legislation or any of the associated policies, procedures and guidelines.

Identify potential training opportunities

A key aspect of a person-centred approach is to empower the person to reach their goals.

One way you can empower someone is by supporting them to meet their own needs. Training opportunities can help people in this respect.

For example, a person who is gradually losing their vision might benefit from training opportunities to support people with low vision, such as using a white cane or working with a guide dog.

Training opportunities need not only relate to the person's disability. In fact, it is important to recognise the broad range of opportunities that may be relevant and useful to the person you are supporting. This is part of a person-centred approach where you focus on the whole person.

Here are some other examples of training opportunities for people with changing needs.

Transition to work	Transition to work (TTW) programs include group programs and individualised support to assist people to transition into the workplace from school or after acquiring an injury or disability.
Supported employment	Some services are available to assist people in gaining meaningful employment in a supported environment. In other cases, employers, staff and the people themselves can be given training to assist the person to retain their current employment.



Home support	Training may be needed to support a person to remain in their home, to access shared or group living for the first time or to make a move to live independently.
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A person’s interest in specific training opportunities could be included in their individual plan. Make sure training goals are clear, achievable and set with a specific timeframe in mind.

Working together

Part of your role is to work with the person you are supporting to identify potential training opportunities to meet their changing needs.

Some of the ways you might do this include:

- discussing the types of training opportunities that might be useful
- talking to other people, such as the person’s friends and family members as well as your colleagues, about training opportunities they have pursued or heard about
- signing up to receive news and updates from service providers relevant to the person’s needs, preferences and interests, or encouraging them to sign up to these services.

Example

Changes based on new legislation

Nesim is a senior disability worker at an agency that provides a range of services and supports to people with disability.

In the state where Nesim lives, the legislation regarding mandatory reporting of child abuse and neglect is changing. Nesim is not sure what that means for him, but the agency is providing a half-day training session on the legislative change to inform staff about what the change will mean for them and the organisation.

During the training session, Nesim learns that when the new legislation comes into effect, he will have mandatory reporting responsibilities, whereas previously he did not. Nesim learns that the new legislation was introduced in response to a recent inquiry, which indicated that these changes would provide additional protection for vulnerable and at-risk children.



During the training session, Nesim and his colleagues are provided with a fact sheet about the legislative changes, the implications of these changes for the agency and staff and when the legislative changes come into effect. Nesim reviews the information about the legislation and his new responsibilities.

When the new legislation comes into effect, Nesim makes sure he follows the new organisational policy regarding mandatory reporting. This means that if he suspects that a child he is working with is being abused or neglected, he has a legal duty to report it to his state's child protection authority.

Practice Task 7

Question 1

Suggest when it is the right time for workers to respond to the changing needs of the person they are supporting.

Question 2

List two ways workers can modify aspects of service delivery to meet the changing needs of the person they are supporting.



Question 3

Provide examples of how can adopt a person-centred approach when working with the person to identify potential training opportunities that meet their needs.

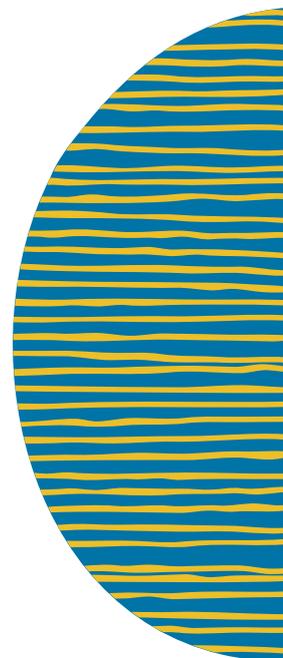
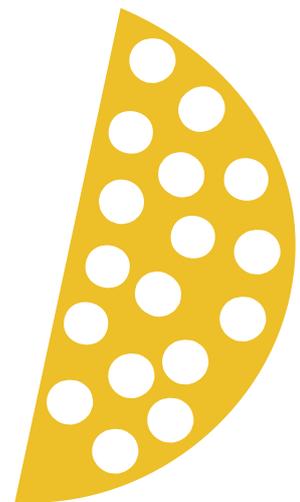
Question 4

Describe the responsibility of a worker (who is not a manager) when legislation relating to disability service provision changes.



Summary

- To ensure you are meeting the needs and preferences of the person you are working with, you will need to review and measure the effectiveness of the service provided to them.
- By consulting with the person – and other people involved in their life and care – you can identify what’s working, what’s not working and what improvements need to be made.
- Workers need to follow their organisation’s policies and procedures when they are monitoring and reviewing services.
- If a person’s needs are not being met or their preferences are not being accounted for, you need to work out how this can be done better, in collaboration with the person and the other people involved in their life and care.
- Like all person-centred approaches, the process of identifying and taking actions to improve responses should be a collaborative process.
- As a worker you need to respond to the changing needs of the people you are working with as and when they occur.
- According to a person-centred approach, people with disability should be involved as much as possible in decisions related to their changing needs and preferences.
- Changes to legislation can affect how you work with a person with disability.
- When legislative changes occur, employees at all levels of an organisation have specific responsibilities to ensure this legislation is implemented.
- One way you can empower someone is by supporting them to meet their own needs; training opportunities can help people in this respect.





Learning Checkpoint 2

Review and monitor person-centred responses

Part A

1. List two modifications you could make to respond to the changing needs of a person with disability (identify the **change** and the **modification**).

2. Explain how workers demonstrate accountability when it comes to responding to legislative changes.

3. Identify two ways you could work with a person with disability to identify potential training opportunities to meet their changing needs.



4. Which of the following statements about frameworks, requirements and standards are correct? Select yes or no for each one.

a. There are twelve standards in the National Standards for Disability Services.	Yes / No
b. Changes to service delivery must reflect the 'individual outcomes' standard in the National Standards for Disability.	Yes / No
c. Legislative requirements are a mechanism for ensuring staff adhere to organisational policies and procedures when making changes to service delivery.	Yes / No
d. Policy frameworks dictate how changes to service delivery are to be made.	Yes / No
e. You only need to consider budgetary frameworks when proposed changes would require more government funding.	Yes / No

5. Describe what a person-centred approach looks like when you are working with a person to identify gaps in assistive technology.

6. Identify one tool that could be used by a worker and a person with disability to identify areas for improvement in service provision.

7. Identify one method that organisations use to collect information so they can determine the effectiveness of the services they provide.



Part B

Read the case study and answer the questions that follow.

Case study

Fatima works as a day support disability officer at a centre that provides activities for NDIS participants, including music therapy, card making, acrylic painting, dance therapy and cooking lessons.

Rodrigo is 44 years old. He has an intellectual disability. He grew up in a violent household and has had counselling to deal with some of the trauma he experienced as a child. He lives in a share home and receives independent living support from a disability service.

Rodrigo has been attending the centre for a few weeks. He has a passion for music and has been a regular participant in the centre's music therapy program.

Fatima has gotten to know Rodrigo and wants to make sure that the services provided at the centre are meeting his needs and preferences. But she knows Rodrigo has difficulty communicating his needs and, because of his childhood experiences, is worried about speaking out in case it creates conflict.

1. Identify three things Fatima could do to encourage Rodrigo to talk about what is and isn't working for him at the activity centre.



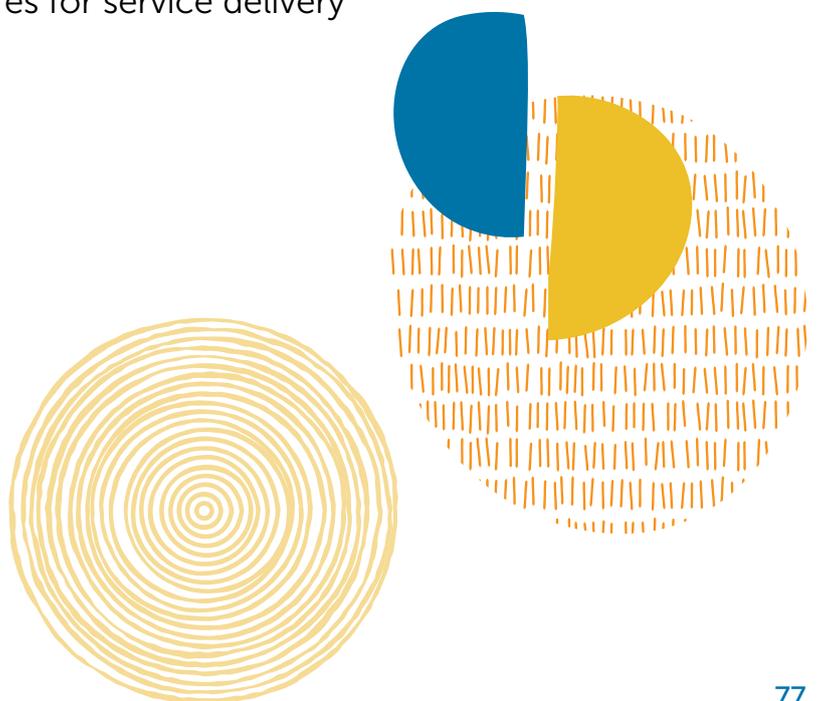
- 2.** Identify how Fatima should check in with Rodrigo to review the effectiveness of the services he is receiving.

- 3.** Identify two things Fatima could do to make sure her discussions with Rodrigo about the effectiveness of the services are done in a person-centred way.



Topic 3: Deliver services within a quality framework

- 3A Follow policies and procedures in line with the organisation's quality system
- 3B Review policies and procedures for service delivery



3A Follow policies and procedures in line with the organisation's quality system

An organisation's quality system creates a framework for service delivery.

Quality system

The coordinated activities used by an organisation to ensure it provides the best outcomes for service users.

A **quality system** provides an organisation with:

- a foundation for the functions and tasks undertaken by the organisation
- a framework for systematically assessing and evaluating the quality and effectiveness of their services
- a way of ensuring their practice aligns with relevant legislation and standards
- a guide for responding to feedback
- a guide for resolving issues affecting the delivery of services.

A quality systems includes all the organisational policies and procedures that ensure the quality of their services. It is used to assess and demonstrate an organisation's alignment with relevant frameworks, including **best practice standards** and Commonwealth and state/territory quality frameworks. For example, continuous improvement processes are used to evaluate whether an organisation aligns with Commonwealth and state/territory frameworks.

Here are some examples of Commonwealth, state and territory quality frameworks for disability services.

Best practice standards

Codes of practice and ethical guidelines that service providers can use to assess themselves.

Commonwealth	<ul style="list-style-type: none">• The NDIS Code of Conduct – which applies to workers and service providers delivering NDIS services and supports. See: aspirelr.link/ndis-code-of-conduct• NDIS Practice Standards – which are the quality standards that must be met by registered NDIS providers who provide services and supports to NDIS participants. See: aspirelr.link/ndis-practice-standards
State/territory	<ul style="list-style-type: none">• NSW Quality Framework for Disability Services: aspirelr.link/nsw-dis-serv-frame• Human Services Quality Framework: aspirelr.link/framework-overview• Victorian Code of Conduct for Disability Support Workers: aspirelr.link/vdwc-coc

An example of best practice standards is the NDIS Practice Standards set by the NDIS Commission.



Best practice standards can change over time as new knowledge, experiences and evidence bring to light more effective, appropriate or ethical approaches to service delivery. Quality systems can be used to ensure organisations are providing services that reflect changing practice standards.

Continuous quality improvement (CQI)

Most organisations use a system of continuous improvement to help them increase the quality of the services they provide on an ongoing basis.

Continuous improvement is the basis of a quality management process.

Organisations have different procedures for achieving continuous improvement; however, one common procedure is the plan-do-check-act (PDCA) cycle. In the PDCA cycle there are four steps;

- Plan: gather information about what is and isn't working and develop a plan for improvement.
- Do: test the improvement by putting it in place.
- Check: evaluate the results of what you tried by measuring what's changed.
- Act: if what you tried was successful, inform others about the new approach. If you what you tried wasn't successful, analyse what could be done differently next time and go through the cycle again.

The PDCA cycle is continuous. In other words, it doesn't just happen at a certain time in the year or when a problem arises; it happens continuously, as part of everyday organisational operations.

There are various ways you could contribute to the CQI process your organisation uses for quality improvement including:

- providing feedback on what is and is not working for the people you are supporting
- encouraging the person with disability (and others involved in their life and care) to share feedback with you and the organisation
- reflecting on what you have learned and sharing your reflections with your colleagues, manager and other staff
- collecting, recording and maintaining information for the purposes of evaluation
- participating in training relating to your organisation's quality system and/or CQI process.

Your responsibilities with regard to the continuous improvement process should be outlined in your job description and the policies and procedures relevant to your role. If you are unsure about your responsibilities, check with your supervisor.



Video: Continuous improvement

Watch the following video to see how continuous improvement is carried out at a disability support service: aspirelr.link/yt-continuous-improvement

Pay particular attention to how the organisation applies continuous improvement to its own operations and within the disability sector as a whole.



Identifying barriers to delivering high-quality services

Barriers to delivering high-quality services can occur at any level of service provision. Here are some examples.

<p>Structural and systemic barriers</p>	<ul style="list-style-type: none"> • A lack of funding for resources and equipment can make it difficult for workers to meet the needs of people with disability • Inflexible eligibility requirements for services can make it difficult for workers to access services for people with disability • Factors that make it difficult for services to collaborate with each other can undermine their ability to provide coordinated supports to people with disability
<p>Organisational barriers</p>	<ul style="list-style-type: none"> • Workplace bullying and harassment can negatively affect staff morale and productivity • Workforce planning issues such as a lack of available, qualified staff can put pressure upon workers • Poorly thought-out policies and outdated procedures can make it difficult for staff to work effectively and efficiently
<p>Individual barriers (for the worker or the person with disability)</p>	<ul style="list-style-type: none"> • Socioeconomic disadvantage can make it difficult for people with disability to access resources and services that are not funded by existing programs • Language and cultural barriers can make it difficult for workers and families to communicate effectively • Myths and stereotypes about people with disability can affect how workers provide services

Identifying and reporting barriers

By identifying and reporting barriers to delivering high-quality services, you can help to ensure the needs of people with disability are met.



Legislation, standards and quality frameworks provide a benchmark against which barriers to high-quality service delivery can be identified.

In other words, something that impacts on your ability to deliver services in a way that aligns with relevant legislation, standards and frameworks is most likely a barrier to high-quality service delivery.

For example, if best practice standards recommend that workers collaborate with other professionals to provide quality services, but you are unable to collaborate with a professional because there is not enough time, this would be a barrier to high-quality service delivery.

Organisational policies and procedures should reflect legislation, standards and frameworks. They ensure that the everyday work practices of staff align with legislation, standards and frameworks. Policies and procedures relate to domains such as:

- work, health and safety
- manual handling
- incidents
- complaints
- quality and continuous improvement
- restrictive practices
- duty of care
- code of conduct
- confidentiality and privacy
- risk management.

If it is difficult for you to implement one or more policies and procedures, this could also indicate that there is a barrier to high-quality service provision.

When you have identified a barrier, you need to report it to your supervisor. Your organisation will have its own procedure for how and when to do this. For example, you might need to use a specific form or template to make a report, or you might need to report barriers in a regular meeting with your supervisor and/or your colleagues.

Use the mechanisms described previously for ensuring the information you report to your supervisor is accurate and complete.

You will not be able to resolve every barrier you encounter. Barriers that relate to structural and systemic problems, for example, require an organisational or sector response. You can help to address these barriers by participating in continuous improvement processes or advocacy. For example, an advocacy initiative might involve multiple organisations working together to change a government policy that poses a barrier to high-quality service delivery.

However, in some circumstances there will be barriers that you can address. For example, if cultural barriers are making it difficult for you to effectively communicate with a person, you could address it by learning and applying techniques for communicating with people from different cultural backgrounds.



When making changes to address barriers related to your own practice, follow the procedures outlined previously for modifying aspects of service delivery. Any changes you make to address barriers to high-quality service provision need to align with legislative and procedural requirements and policy and budgetary frameworks.

Example

Identifying barriers

Yuri is a behavioural support worker providing support to Kader and his family. Kader is 17 years old and has autism and an intellectual disability.

Kader and his mother arrived in Australia one year ago on humanitarian visas. The upheaval in Kader's routine has left him highly anxious. Kader's mother worries about taking him out of the house in case other people judge him, and as a result she is becoming socially isolated.

Kader and his mother are learning to speak English, but when Yuri is trying to explain some simple techniques to manage Kader's anxiety, he notices that neither Kader nor his mother seem to fully understand what he is saying.

Yuri suspects that Kader and his mother are pretending to understand because they are ashamed of not speaking fluent English. The language barrier makes it difficult for Yuri to consult with Kader and his mother about better meeting their needs.

Yuri reports this barrier to his supervisor during their next one-on-one meeting. Yuri explains that Kader and his mother's inability to understand what he is saying is stopping him from providing a high-quality service to the family.

Yuri's supervisor reminds him that they have information sheets in many different languages outlining the techniques that Yuri wants to teach the family. This would be a low-cost way of addressing the barrier. Yuri reminds his supervisor that Kader and his mother are illiterate in their own language and in English.

Yuri's supervisor then recommends taking an interpreter with him the next time he visits Kader and his mother. He reminds Yuri to review the organisation's policies and procedures regarding working with interpreters.



Practice Task 8

Question 1

Briefly describe what is meant by an organisation's quality system.

Question 2

Which of the following are best practice standards? Tick all that apply.

- Laws that inform organisational policies and procedures
- Codes of practice and ethical guidelines that disability services can use to assess themselves
- State- and territory-based quality frameworks
- Common agreements among workers on the best way to provide services
- Standards for disability services that are enforced by government agencies

Question 3

Identify one state or territory quality framework relevant to disability services.

Question 4

List the four stages in the PDCA cycle.



Question 5

Identify two ways that you might contribute to your workplace's continuous quality improvement process.

Question 6

Identify one document or resource that could be used by workers to identify a barrier to high-quality service delivery.

3B

Review policies and procedures for service delivery

Organisations need to regularly review their policies and procedures to ensure they are up-to-date and aligned with best practice and relevant legislation.

As industry best practice and legislation is updated, and as the needs and expectations of communities change, organisational policies and procedures must also be updated.

Policies are guiding principles that have widespread application across an organisation. Procedures are the detailed steps involved in accomplishing particular tasks or outcomes.

Your organisation's review of policies and procedures might occur yearly or more frequently, according to internal and external circumstances. You can contribute to these processes and undertake your own reviews to ensure that your work practices are up-to-date.

One of the standards of best practice service delivery is service management. Best practice service management standards require organisations to regularly review their policies and procedures.

These reviews are undertaken to ensure that organisational policies and procedures reflect industry best practice, legislative changes and changing needs and expectations of people with disability.

By regularly reviewing their policies and procedures, organisations can also be more flexible and responsive to requirements, expectations and community needs.

Workplace reviewing procedures are undertaken at a set time by the specific people who are responsible for that task. For example, reviews of WHS policies and procedures might be undertaken by a WHS committee every six months.

The outcome of reviews of organisational policies and procedures are reported to relevant stakeholders, along with recommended changes.

You can contribute to the process of reviewing organisational policies and procedures by:

- regularly providing feedback to your supervisor and management on issues relating to service delivery



- responding to requests for feedback on specific policies and procedures
- making sure documentation is complete, accurate and stored in the correct place.

Individual review processes

Reviews of policies and procedures are undertaken at an organisational and individual level. In other words, you also have responsibilities to review organisational policies and procedures to ensure they align with best practice, legislative changes and changing aspirations, needs and preferences of people with disability.

Here are some ways you can do this.

Participate in professional networks (e.g., online communities of practice and informal networks) to stay updated on best practice standards.

Participate in training and information sessions related to legislation and legislative changes.

Talk to your colleagues about organisational policies and procedures – what’s working and what’s not working?

Reflect on how feedback from individuals about service provision relates to organisational policies and procedures – for example, if multiple people are frustrated with a specific aspect of service delivery, does a policy need to change?

Report it appropriately if work practices are not compliant with legislation or best practice standards.

Another way you can review organisational policies and procedures is to regularly reflect upon your own experiences providing services to people with disability.

Here are some questions to assist with this process. The answers to these questions could inform your feedback to supervisors and managers on policies and procedures relating to service delivery.

Reflection questions to review service delivery policies and procedures:

- Have the person’s needs been met and their rights upheld?
- Is there a way services could be provided more efficiently?
- Have potential changes to outcomes, goals and needs been projected and planned for?
- Have any delays, barriers or inefficiencies been encountered?
- What have I learned about providing services from this case?

When you reflect upon the services you provide, you could reflect upon patterns you have noticed in the changing needs, preferences and aspirations of people with disability.

For example, perhaps you have noticed that multiple people with disability that you are working with identify as non-binary. This might mean that your organisation needs to adjust their policies around the terminology used in documentation. Forms and surveys might need to include options for people to identify as female, male or non-binary.

Example

Review organisational policies and procedures for service delivery

As part of her professional development activities, Maria is reviewing her work activities. She logs on to her computer and brings up a file named 'monthly review'. In it, she finds a checklist that she prints out and follows. The checklist is as follows:

- Connect with professional network (read and contribute to forums, check articles and posts).
- Assess feedback received and address any concerns.
- Check currency of legislation and National Standards for Disability Services by researching online and ensure work practices are compliant. Inform management/report appropriately if anything is not compliant.
- Look for training opportunities (are any conferences or online classes coming up?).
- Self-reflection: Am I providing the best possible services to people?
- Ask for feedback (from people with support needs, families/carers and supervisor).
- Set goals for next month.



Practice Task 9

Question 1

Identify two ways you can contribute to your workplace's review of organisational policies and procedures.

Question 2

Briefly explain how you could review organisational policies and procedures related to service delivery to determine whether industry best practice and legislation were being followed.

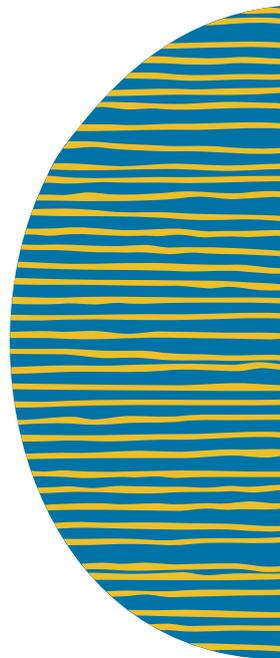
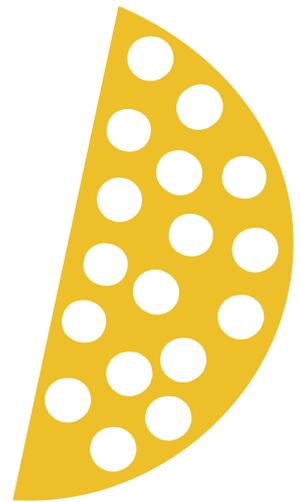
Question 3

Provide an example of the changing needs and preferences of people with disability that suggest a review of organisational policies and procedures might be needed.



Summary

- An organisation's quality system provides a guide for ensuring quality services within that organisation.
- The principles and features of an organisation's quality system are built into its policies and procedures.
- Best practice standards are codes of practice and ethical guidelines that disability services seek (and are expected) to follow.
- Best practice standards change over time as new knowledge, experiences and evidence bring to light more effective, appropriate or ethical approaches to service delivery.
- Most organisations use a system of continuous quality improvement (CQI) to review and adjust the services they provide on an ongoing basis.
- Anything that negatively affects your ability to deliver services in a way that aligns with your organisation's quality system or policies and procedures is a barrier to high-quality service delivery.
- You will not be able to resolve every barrier you encounter; barriers that relate to structural and systemic problems, for example, require an organisational or sector response.
- Organisations regularly review their policies and procedures to ensure they are up to date and aligned with best practice and relevant legislation.
- Reviews of policies and procedures are undertaken at an organisational and individual level.





Learning Checkpoint 3

Provide service delivery within a quality framework

Part A

1. You work for a registered NDIS provider in Sydney. Which of the following frameworks and standards does your organisation need to align with as part of their quality system? Tick all that apply.
 - NSW Continuous Improvement Framework
 - The NDIS Code of Conduct
 - NDIS Practice Standards
 - NSW Quality Framework for Disability Services
 - National Standards for Disability Services
2. Identify the organisational resources that could be used to assess whether something is a barrier to high-quality service delivery.

3. Provide at least three examples of areas of work where policies and procedures within an organisation's quality system must be followed when supporting a person with disability.



Part B

Read the case study and answer the questions that follow.

Case study

Carson is a senior disability worker at an agency based in a regional area that provides services to adults with disability. He is a valuable informal mentor to junior staff at the agency, who often ask him for advice, guidance and direction.

Carson is passionate about ensuring that the services his agency provides reflect the needs, preferences and aspirations of people with disability. He regularly reminds junior staff that just as they need to be flexible and adaptable in their work, so too does the agency need to be flexible and adaptable in their policies, procedures and processes.

'Best practice standards change and evolve over time,' he tells them. 'That's how we stay up to date. Legislation changes too, to make sure the rights of people with disability are upheld.'

One of Carson's mentees asks him about what she can do, as an individual worker, to ensure the agency's policies and procedures reflect the changing needs, standards and laws that inform the sector.

1. Identify three things Carson could recommend his mentee do to support the review of organisational policies and procedures to ensure they reflect the changing needs of people with disability as well as industry best practice and legislative changes.



- 2.** Provide examples of three questions Carson’s mentee could reflect upon in relation to her own experience of providing services to an individual client.

- 3.** Identify three ways Carson’s mentee could contribute to organisational reviews of policies and procedures.



Glossary

Access

The ability to use or obtain something or to physically enter a place.

Assistive technology

Technology that enables a person to maintain or improve their capability of performing a task.

Best practice standards

Codes of practice and ethical guidelines that service providers can use to assess themselves.

Confidentiality

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

Dignity of risk

A person's right to dignity and choice, upheld in legislation and service standards, to ensure that duty of care or safety is not used as a reason to limit a person's freedom of personal choice.

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.

Equity

When everyone is treated fairly, according to their needs.

Mandatory reporting

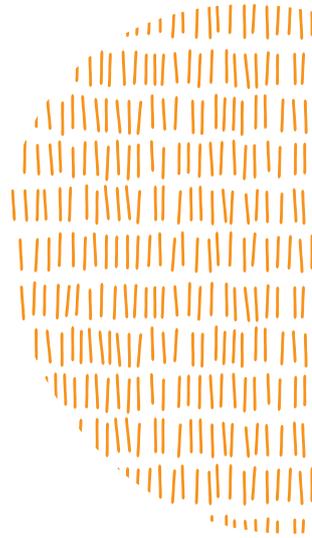
The legal requirement of people in certain job roles and industries to report suspected or actual abuse to the police.

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 to selectively express themselves.





Quality system

The coordinated activities used by an organisation to ensure it provides the best outcomes for service users.

Validated tool

A tool that has been scientifically tested to ensure it is reliable and accurate.