

CHCCCS015

Provide individualised support

Release 1

Learner guide

Aspire Version 1.2



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Version control and modification history

Version	Release date	Modification
Release 1, version 1.1	April 2017	First release
Release 1, version 1.2	January 2019	Minor corrections as part of our continuous improvement program

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Before you begin

This learner guide is based on the unit of competency *CHCCCS015 Provide individualised support*, Release 1. Your trainer or training organisation must give you information about this unit of competency as part of your training program. You can access the unit of competency and assessment requirements at: www.training.gov.au.

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. The features of this learner guide are detailed in the following table.

Feature of the learner guide	How you can use each feature
Learning content	<ul style="list-style-type: none"> ▶ 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 and case studies	<ul style="list-style-type: none"> ▶ Examples of completed documents that may be used in a workplace are included in this learner guide. You can use these examples as models to help you complete practice tasks and learning checkpoints. ▶ Case studies highlight learning points and provide realistic examples of workplace situations.
Practice tasks	<ul style="list-style-type: none"> ▶ Practice tasks give you the opportunity to put your skills and knowledge into action. Your trainer will tell you which practice tasks to complete.
Video clips	<ul style="list-style-type: none"> ▶ Where QR codes appear, learners can use smartphones and other devices to access video clips relating to the content. For information about how to download a QR reader app or accessing video on your device, please visit our website: www.aspirelr.com.au/help 
Summary	<ul style="list-style-type: none"> ▶ Key learning points are provided at the end of each topic.
Learning checkpoints	<ul style="list-style-type: none"> ▶ There is a learning checkpoint at the end of each topic. Your trainer will tell you which learning checkpoints to complete. These checkpoints give you an opportunity to check your progress and apply the skills and knowledge you have learnt.

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.

The following table outlines specific foundation skills noted for your learning in this learner guide.

Foundation skill area	Foundation skill description
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 and making goals for yourself at work ▶ Seeking professional development opportunities for continuous improvement
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
Teamwork	<ul style="list-style-type: none"> ▶ Working well with other people by cooperating, collaborating, encouraging and building rapport
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
Making decisions	<ul style="list-style-type: none"> ▶ Understanding and applying decision-making processes ▶ Reviewing the impact of your decisions
Problem-solving	<ul style="list-style-type: none"> ▶ Identifying problems ▶ Working out how to fix a problem using problem-solving processes and reviewing the outcome
Innovation and creation	<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

Foundation skill area	Foundation skill description
Technology and digital literacy	<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

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 outcomes	Rate your confidence in each section
Topic 1 Determine support needs	1A Clarify own role in implementing individualised plan	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1B Confirm individualised plan details	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1C Ensure the person is aware of their rights and complaints procedures	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1D Support the individualised plan	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1E Prepare for support activities	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident

Topic	Key outcomes	Rate your confidence in each section
Topic 2 Provide support services	2A Conduct exchanges with the person in a manner that develops and maintains trust	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2B Provide support according to the individualised plan	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2C Assemble equipment as and when required	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2D Include the family and/or carer	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2E Provide support according to duty of care and dignity of risk	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2F Provide assistance to maintain a safe and healthy environment	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2G Provide assistance to maintain a clean and comfortable environment	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2H Respect individual differences	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2I Seek assistance when it is not possible to provide appropriate support	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
Topic 3 Monitor support activities	3A Monitor own work	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3B Involve the person in discussions	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3C Identify aspects of the individualised plan that might need review	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3D Support the person's self-determination	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident

Topic	Key outcomes	Rate your confidence in each section
Topic 4 Complete reports and documentation	4A Maintain confidentiality and privacy	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	4B Comply with reporting requirements	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	4C Identify and respond to situations of potential or actual risk	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	4D Identify and report signs of additional or unmet needs	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	4E Complete and maintain documentation	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	4F Store information	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident



Topic 1

In this topic you will learn how to:

- 1A Clarify own role in implementing individualised plan**
- 1B Confirm individualised plan details**
- 1C Ensure the person is aware of their rights and complaints procedures**
- 1D Support the individualised plan**
- 1E Prepare for support activities**

Determine support needs

The function of most community services is to promote independence and participation of people to enable them to have meaningful and valued life experiences. An important role of support workers is to help the person decide what they need support to do, and to support these needs by following individualised plans. These plans are written in consultation with the person and their family to provide instructions to the support worker, and ensure that the support provided is responsive to the person's needs and preferences. The emphasis of an individualised plan is placed on goals, aspirations and activities that foster the person's participation and independence in a meaningful way.

1A Clarify own role in implementing individualised plan

Implementing a plan requires following its instructions carefully. You must always be aware of your own role within a plan and follow the information included in it. In order to provide a quality service to individuals, and to be accountable and professional, a support worker must be aware of their personal and professional limitations and seek support when required.

A plan might include instructions directed at other professionals, such as managers and allied health professionals. There may be information or instructions included that are outside of your job role or training. The first step in following a plan is to seek clarification to ensure that you are working within your job role, experience and training.

Individualised plans

Personalised planning underpins service provision to people receiving individual services. Individualised planning is an ongoing process involving needs assessment, planning for services and implementing services that respond to an individual's needs. Planning processes and protocols vary between organisations and it is important for you to be aware of the specific policies and protocols of any organisation you are working for.



Formal plans

Individualised plans may be formally developed and documented. Plans in the community sector have many different names, such as support plan, lifestyle plan, person-centred plan, individual program plan, individual employment plan and service delivery plan. Formally documented plans must be completed according to the policies of the organisation providing the service, and must include the following details.

Most formal, documented plans include an overview of:

- ▶ individual goals of the person
- ▶ services to be provided on a day to day basis
- ▶ other necessary activities required to meet goals
- ▶ the people responsible for implementation
- ▶ review strategies
- ▶ review dates.

Informal plans

Informal planning and responding to an individual's needs can take place daily in the community sector. It could take the form of asking someone how they want to spend their day, informally reviewing an existing formal plan or simply by asking the person how everything is.

Ongoing informal planning that is responsive to the needs of the individual is essential to providing an integrated and flexible service. Informal planning may not always need to be documented, but it must still occur within the boundaries of organisational policy and procedures.



Work role boundaries

In some organisations, a support worker may have some input into writing and developing individualised plans. In other services, this role will be carried out by a team leader or supervisor, and the support worker's role will be focused just on following the plan.

It is important for you to be clear in your understanding of your own role and the limits of your professional capabilities and responsibilities, and to seek additional support when required. If you act outside of your scope of skills, knowledge, training or job description, you may reduce the quality of the service that is being provided to individuals; you may even fail in your duty of care by causing harm to the person.

Here are some examples of limitations in job roles, and when support might be needed.

Knowledge

A support worker might have a broad understanding of legal issues affecting the community sector and the field in which they work, but may need to seek support about specific legal issues that arise, such as guardianship.

Skills

Different support workers will have varied levels of experience in the role, but you may need to seek support when presented with an area in which you are not familiar, such as using equipment.

Qualifications

You may not be qualified to complete a particular task or advise on the best action to meet an individual's specific goal; an example may be administering medication.

Personal factors

You may need to notify your supervisor if certain aspects of the role make you uncomfortable, such as when a person's cultural, religious or lifestyle practices are in direct and significant conflict with your own, and you feel this might be impacting on the support you can provide.

Job role

You must seek support and advice if you believe that part of the planning or implementation of an individualised plan is outside of your job description, such as contacting a doctor on the person's behalf.

Identify when to seek additional support

You might need to seek support in relation to using and following a plan.

Seek additional support in the following situations.

- ▶ You are new to the job role. You may require help to locate the plan, understand its layout and how to follow it.
- ▶ It is the first time you have supported the person and you are unfamiliar with their support needs, particularly if the person is unable to explain their routines to you.
- ▶ The instructions contained in the plan are unclear or seem out of date.
- ▶ The person you are supporting asks you to do something differently to the way it is described, or that is not included in the plan.
- ▶ You are concerned that the plan contains instructions that are outside of your job role, experience or qualifications.

Seek support

Your direct supervisor is usually your first point of call when seeking support.

Colleagues can also be of help if you work in a team. Here are some of the things you might need to consider when seeking support.

Seeking help and support

Approach or contact your manager or team leader for clarity and advice about your job role.

The skills, knowledge and qualifications of peers in your organisation or team. You might need to check who is responsible for your own area before seeking help.

Review the policies and guidelines of your organisations, so you are clear about the limitations of your role and your organisation.

Options for seeking expertise

If you, your team members or supervisor require support for any aspects outside the scope of their own knowledge, skills or job role, there might be other professionals who can be consulted. There will be processes in place for seeking help outside of the organisation, and this might be the role of your supervisors only. Check first before contacting external professionals or services.

Here are some things to consider when seeking outside assistance.

Seeking expert assistance

The person might need to seek help from their GP when there are medical issues that impact on the plan, or the GP might be contacted on their behalf.

Help lines provide advice and support but should not replace directions from your supervisor. For example, telephone services about reporting abuse or neglect.

Specialised services (advocacy, community legal or community health centres) can advise the person and/or their family.

You might consider further training or updating your qualifications in a particular field such as dementia or acquired brain injury.

Example

Clarify own role in implementing individualised plan

The following example illustrates an individualised support plan.

XYZ Place Activity Centre	
Program: Community Access Program	
Days: Tuesday and Thursday	
Date of support plan: 23/07/2019	
Name: Mr Sebastian Rivers (Seb)	
Goals	
Seb will be able to indicate to staff that he needs to go to the toilet, by pointing at the toilet door, by August 22nd, 2019.	
Actions	Date achieved
The occupational therapist will introduce staff to some training techniques and help to introduce the new sign to Seb	30 July 2019
Seb will be given opportunities to practice every day he is at the service by support workers.	Ongoing
Review by OT regarding his progress and potential to introduce new signs.	15 August 2019
Ongoing needs	
Language and communication skills	Uses only basic language. Is able to communicate his needs and preferences with some prompting
Mobility	Independent
Eating skills/dietary needs	Vegetarian. Has painful teeth and gums and needs food to be very soft with little chewing required. His favourite food is chocolate cake. He dislikes green leafy vegetables.
Continence and toiletry needs	Some urinary incontinence. Uses incontinence pads. Requires prompting and assistance to toilet and change pads.

Activity likes/dislikes	Enjoys card games; needs to use large print cards. Likes television, animals and being around people. Dislikes physical activities and music.
Behaviours/triggers/ strategies	Can become distressed at loud noises or if touched by a stranger (for example; hand-shaking or hugging). Strategies to manage this include reassurance, move to a quiet space, and warn if a loud noise is expected.
Review undertaken by	Mary McNash
Family involvement	Seb's brother, Neville, present at planning meeting
Date	22 August 2019

Practice task 1

1. Give an example of a situation in which you should seek clarification before following a plan.

.....

.....

.....

.....

2. Name one boundary or limitation to your job role that you should not perform when providing support.

.....

.....

.....

3. Who is usually the first point of call when seeking assistance or clarifying the details of the individualised plan?

.....

.....

.....

Click to complete Practice task 1

1B Confirm individualised plan details

An individualised plan might include actions for daily support needs, such as how and when the person is assisted to shower, or it might contain broader goals or aspirations that the individual wants to achieve, and documented actions or activities for how to achieve these goals. For example, the plan might show how the person can be assisted to learn a new skill such as cooking breakfast for themselves.

Whatever the type of plan, it is important that genuine consultation, or partnership, with all stakeholders happens whenever possible. The individual being supported should be considered the most important contributor to the plan and how it is followed, and this can be undertaken in partnership with the support workers, the support team and the person's family. Include the following steps when preparing and confirming an individualised plan.

Confirm an individualised plan

Prepare the plan together, checking continuously with the client

Provide the plan in a relevant language and easy-to-read format

Read the draft aloud to the client and seek clarity

Provide copies of the plan for feedback

Allow time for reflection

Seek input from others in the person's family if relevant (with the person's consent)

Confirm plan details with the person

It is not enough to simply follow the instructions in the plan without talking to the person about what you intend to do first. People's needs and preferences change from day to day and so should your approach to support. Talk to the person about your role, as documented in the plan, so that they feel they are part of the process. Provide them with the opportunity to discuss or even refuse support, rather than assuming that the person will passively accept your help in the same way every day.

Example questions to ask the person before and during planned support

- ▶ Are you happy for me to proceed with what is written in the plan today?
- ▶ The plan says you usually have this task done in this particular way. Is that correct?
- ▶ What are you able to do independently and what tasks will you need assistance with to complete?
- ▶ How do you feel that you are doing in meeting your goals so far?

- ▶ Is there someone else who you would like to be involved in planning or meeting your goals, such as a family member?
- ▶ Does this plan meet your needs? If not, is it time for your individualised plan to be reviewed?

Consult carers and family

Family is often cited as one of the most important parts of our lives, and the same is often true for the people we support as well. Many people will wish their spouse or other family carers to be involved in their planning and support. Family members who live with them and/or provide care are often best placed to know where necessary equipment might be located, when things have changed, or when the support provided is not meeting the person's needs. The family can be a good source of help when you would like to clarify the details contained within the plan, particularly when the person has cognitive or communication difficulties.



Be guided by the needs and wishes of the person themselves – if they appear to want to leave all decisions to a spouse or family member, that is their choice. If they would rather not include family in discussions or decisions, this must also be respected.

Example

Confirm individualised plan details

John has read the individualised plan of Mr Lilley, who has moderate dementia and who he is supporting for the first time. Mr Lilley's individualised plan outlines the requirement to help him to shower, but it does not give details about the level of support needed. John asks Mr Lilley whether he is able to perform some of the showering unassisted. Mr Lilley tells him that he would rather do it alone and does not need help at all. John is a little puzzled by this, but after speaking to Mr Lilley's wife, he finds that her husband has been quite reluctant to receive help, but that he does indeed need someone nearby to supervise and to help him to wash his back and to stand to dry him. John speaks to Mr Lilley sensitively, and reassures him that he will be there for guidance only, and that he will only step in to help when Mr Lilley needs it, or when he is at risk of falling. Mr Lilley seems happy with this, and John stays true to his word, helping only where Mr Lilley agrees.



Practice task 2

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

Case study

Marjorie's individualised support plan includes the following information.

Showering: Marjorie prefers to shower in the morning. She likes the bathroom to be heated before she undresses. She likes the water quite warm. She is able to wash her own body, but needs help to wash her feet and back.

Dressing: Marjorie gets cold quickly. The bedroom needs to be warm. She likes to wear a dressing gown from the bathroom to the bedroom. She prefers to choose her own clothing. She may need some prompting with this task. She may have trouble choosing clothing suitable for the weather. She is able to dress without help.

1. What questions might you ask Marjorie before you start following her plan?

.....

.....

.....

2. Can you give any information to Marjorie's daughter that she asks you for?

.....

.....

3. If Marjorie tells her daughter to choose her outfit for her on this day, how would you respond?

.....

Click to complete Practice task 2

1C Ensure the person is aware of their rights and complaints procedures

The essence of individualised planning is to develop plans for service delivery that focus on the individual person and what they need. In the past, organisations offered a set range of services which individuals could choose from. In many cases, there was little or no flexibility for the person, who often felt they needed to 'do what they were told'. Today, the community sector requires a person-centred response – agencies try to tailor services to what each person needs, rather than requiring the person fit in with what agencies offer. It is now considered the person's right to direct or alter their own support, or even to refuse it if they wish to do so.



Human rights



'Human rights' is a term used to describe the basic rights that all people have, whether they have a disability, are older, or are children. The rights of people who rely on community services to help them meet their needs always include these basic human rights, such as the right to make choices about their own life, the right to access food, shelter, warmth, the company of others and the right to a place in the community without discrimination. It also means the person has the right to make complaints.

Rights of people using services

Sometimes there can be confusion around the rights of a person who is older, or who has a decision making disability. Support workers must weigh up the person's safety and wellbeing with the person's right to make choices for themselves. This can be a complex area, and it is important to clarify with your supervisor if you feel that a person's rights are not being respected. Some of these rights relating to the way you must ensure planning is followed are included in the service standards written for your sector.

Residential aged care

- ▶ In residential aged care, the Aged Care Accreditation Standards outline resident rights that include:
 - having their social, physical, emotional, spiritual, cultural and cognitive needs documented and met in their individualised plan
 - being involved in decision-making
 - practising independence.

Home support

- ▶ The Commonwealth Home Support Programme Standards outline rights that include:
 - giving information about the services
 - speaking with them about any changes to these services
 - respecting their privacy and dignity
 - handling concerns or complaints fairly and confidentially.

Disability services

- ▶ In disability services, The National Standards for Disability Services include rights which focus on:
 - dignity and respect
 - freedom of expression
 - self-determination
 - choice and control
 - confidentiality and privacy
 - freedom from discrimination, exploitation, abuse, harm, neglect and violence
 - the role of families, friends, carers and advocates in the safeguarding of rights
 - comprehensive systems to prevent or promptly respond to any breaches of rights.

Discrimination

Written into our basic human rights are the rights to freedom from discrimination. Discrimination is the act of excluding a person or treating them differently than others based purely on an attribute such as disability, age, gender, race or sexual orientation. There are laws that prohibit discrimination in areas such as employment, accessing services and the use and enjoyment of public places. When implementing any activities that are listed in a person's plan, support workers should avoid any actions that might be discriminatory.

Complaints process

Services are legally obliged to tell people about how they can make a complaint. When a person begins using a service, the person and/or their advocate must receive information from the service on how to make a complaint in a way that is easy for them to understand; for example, in their own language, using pictures or in Easy English (a standardised way to present written information to a person with a cognitive disability). They must be told what action the service will take following the complaint, and what to do if they are not happy with the outcome of their complaint.

When making a complaint:

- ▶ people and/or their advocates need to be sure that services will not be stopped or the quality of support reduced because they have made a complaint
- ▶ people need to be sure the standard of support will only improve after making a complaint.

Complaints and continuous improvement



When people make complaints about an aspect of service provision, it enables services to look at how they can improve their procedures. If a complaint is made about a staff person's inability to do their job, this can be positive if it means that the process for addressing the issue will result in an improvement for the person receiving support. For the staff person and the organisation as a whole, it will highlight a training or professional development need as part of their continuous improvement process.

You can read more about making complaints through the Aged Care Complaints scheme at: <http://aspirelr.link/aged-care-complaints>

Support people to make complaints

Sometimes people may not be happy with an aspect of the services they receive. They may want to make a complaint.

The right to complain about a service is protected by Australian law. All community services must have complaints policies and procedures that outline how to make a complaint and what will happen when a complaint is made.

Ways of making complaints

- ▶ There might be a form that needs to be completed regarding the complaint.
- ▶ The person might complete the form on their own.
- ▶ You may have to help the person complete the form.
- ▶ A person might tell you what they want to complain about and then you complete the form on their behalf.
- ▶ There might be a main contact person at the service who needs to be involved such as a human resource person.
- ▶ A complaint might be made through a resident meeting and then you may have to record it.
- ▶ If the complaint is not addressed, the person can lodge a complaint with external bodies such as the Aged Care Complaints Scheme or the Disability Services Commissioner.

Make complaints

If a person or their family are not satisfied with the way a complaint has been handled by the service, or if they wish to bypass the service to make a complaint (such as if the complaint is very serious, as in cases of abuse), there are other avenues available to help people to do so.

Aged care complaints scheme

Complaints about aged care and community care services can be made via phone, in person or online, and can relate to care, catering, financial matters, hygiene, equipment, security, discrimination, activities, choice, comfort and safety or other matters related to the responsibilities of a service provider. They can refer complaints to other organisations, professional registration boards or other complaints bodies.

Disability services commissioner

Complaints about a disability service can be made in person, in writing, online or via phone so that the person can be assisted to resolve the complaint with the service.

Community visitors

Community visitors are volunteers who are especially trained to visit disability services to help ensure that a satisfactory quality of services is being provided. They can feed back complaints from people with disabilities or make their own complaints about a service. You might encourage someone to speak up to a community visitor if they do not wish to talk to staff.

Advocacy services

Advocacy services are government-funded services in most communities who exist to support people who are vulnerable such as older people and people with disabilities. They can be a way to support a person to stand up for their rights if they feel they are not being listened to.

Example

Ensure the person is aware of their rights and complaints procedures

Here are some examples of the rights people using services have and how they may be affected.

Basic human rights

- ▶ To have unrestricted access to food. You might be breaking the law by locking food away from a person or refusing them food when they wish to eat.
- ▶ To be a part of the community. For example, many children with disabilities have the right to a mainstream education with extra supports in place, rather than relying just on disability specific services.
- ▶ To have a sexual relationship. People with disabilities and older people have the right to have a consenting sexual relationship, and your service might need to consider factors such as providing education and privacy.

Discrimination in services

- ▶ Refusing to allow some people with disabilities to take part in an activity that others are enjoying because they might be disruptive or slow.
- ▶ Refusing a person's wish to go to the cinema as planned and instead insisting they should watch a DVD at home instead, because their wheelchair might make it difficult to navigate a public place.
- ▶ Refusing to allow a person from a different cultural background to eat food from their own culture, because it is too difficult to prepare more than one type of meal for a group of service users.

Practice task 3

Research how people can make external complaints about a residential aged care service by visiting <http://aspirelr.link/aged-care-complaints>, then answer the questions that follow.

1. How can a person who doesn't speak English well access the service?

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2. How can a person locate and contact an advocacy service?

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3. What will the service do if they cannot help with the complaint?

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Click to complete Practice task 3

1D Support the individualised plan

An important principle of the community sector is an approach to service provision that is 'person-centred'. In a person-centred approach, planning is tailored to the person and focuses on their unique aspirations. The resulting service is the outcome that matters to the individual.

It is easy for people who are not experiencing difficulties relating to ageing, or who do not have a disability, to take for granted what the principles of independence and participation really mean. Independence is not just the things people do for themselves, but also the decisions and choices that are made freely, unaided and often privately. Participation extends beyond the formal, structured groups a person may be involved in to include all the ways a person participates in their community and society; for example, using the local post office and shops, having a job, using public transport, volunteering or being friends with one's neighbours.

From a community service perspective, promoting participation and independence is about empowerment and opportunity. Community support workers try to make sure that receiving support is a positive experience for the individual and foster as much self-sufficiency and choice as possible.



Promote independence

Self-determination and independence are important principles. Support activities should assist to maintain independence by allowing them to remain living in their own home or by providing the means for an individual to participate in their community. Support activities need to be monitored to ensure they are still effective in contributing to a person's independence.

There are a number of practical and philosophical strategies that a support worker or coordinator can engage in to promote independence and participation amongst the individuals they work with. These are explained below.

Choose the least restrictive option

- ▶ Choosing the least restrictive option means that the support worker offers the service that impacts the least on the independence of the individual. For example, if a person can be supported with occasional home support, it would be restrictive to put them in overnight services or recommend they move into a residential facility. Or if a person needs help to wash their back, it would be a more restrictive intervention for a support worker to wash the person's whole body just because it was quicker.

Develop ways of doing tasks differently

- ▶ Doing tasks differently may enable the person to do things independently. Specialised aids, equipment and assistive technology can enable a person to do tasks independently that they would otherwise need physical assistance with. Most states and territories have an Independent Living Centre (<http://aspirelr.link/ilca>) where you can view, trial and purchase a range of aids and equipment.

Use community services

- ▶ Consider generic services that other members of the community use. It can be restrictive and disempowering to use a specialised aged care or disability service when a generic service in the community could provide the same service. Only accessing specialised services reduces an individual's participation in the community. A support worker can be an educator and advocate to generic services, supporting these services to provide accessible options. An example of this is a disability service that has loaned a portable hoist to a local community health centre, to enable them to provide pap tests and breast screens to women with disabilities.

Empower individuals to access services in the community

- ▶ It has much more impact on an individual to teach them how to do something or access a service than to do it for them. Consider engaging support workers who teach a person with a disability to catch public transport rather than simply providing transport, or teaching someone how to use an ATM rather than having a worker do their banking for them.

Connect the individual with the community

- ▶ Often support workers are engaged to take older individuals or people with a disability on community access outings where the person spends the day one-on-one with the support worker. The individual is out in the community but is not participating in a valued or meaningful way. Educating support workers in how to support people to develop networks and make friends is far more empowering than just taking them out and entertaining them for the day.

Promote the right to make informed decisions

Informed decisions are those in which the person understands and can make a reasonable decision based on weighing the benefits and risks of each option.

When identifying and assessing needs you must be aware of the rights each person has. Think about the questions you are asking and the way in which you are asking them. Consider how your attitude, body language and the content of the questions might affect the person.



Helping a person to practice making decisions about their own lives should be a part of every task. If the person needs guidance, you might ask them to consider between two options, such as two different outings, rather than asking a vague 'What would you like to do today?'

Make sure that people receive information about the services you suggest and their rights within the service. Each Australian state has developed a pamphlet on a person's rights and responsibilities in different sectors that could be a good starting point.

Example

Support the individualised plan

Sonja is a support worker. Today she is running late as her car wouldn't start. She begins her day's work already 45 minutes behind schedule.

Sonja goes to assist Mr Finch to get ready for the day. Mr Finch can walk slowly on a walking frame, but Sonja is in a hurry so she sits Mr Finch in a wheelchair and pushes him down the hallway for his shower. When he is washed, she dries him with the towel and says it will be quicker if she dries his back and legs rather than having him do it. Sonja wheels Mr Finch back to his room, pulls some clothes out of the cupboard and quickly dresses him, even assisting him with his shirt and buttons, which Sonja knows he can do himself.



How would you feel if you were Mr Finch? It is possible you would feel distressed, powerless and frustrated. If this happened frequently, you might lose interest in participating in your own support, become depressed or lose some of your independence and living skills.

Practice task 4

1. Collect information about a leisure or social activity in your area that is specifically designed for older people or people with a disability. There may be programs run by an organisation that you are familiar with; or you may also want to look for information at your local community centre, gym or some other local program.

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2. Assume you are working with a person who is attending one of these programs. Develop a strategy that would enable the person to achieve similar benefits or express and develop similar interests or skills, while participating more widely in the community than they would attending an exclusive, specialised program or group.

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3. How would you promote the independence and participation of this person?

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[Click to complete Practice task 4](#)

1E Prepare for support activities

It is important to make sure a person knows what to expect when you are providing support. People must be encouraged and assisted to participate in order to maintain and/or improve their independence, and to keep their sense of control over their own support. When you are preparing to provide support, there are several sources of information aside from the support plan to guide you to do so. These include the person themselves, and your organisation's policies and procedures.

People's preferences

An individualised plan is not an opportunity for professionals to set goals that they think are important for the person. An individualised plan must reflect the interests and preferences of the person. Goals that are based on a person's interests, priorities and strengths are more likely to be achieved than goals that have been imposed and that are meaningless to the person.

When developing an individualised plan and creating goals within the plan, consider the questions below as a way of identifying what is important to the person.

Questions to ask the person

- ▶ What is important to the person?
- ▶ What are the person's strengths? What are the resources they can draw on?
- ▶ What is most important to the individual? What are his or her priorities?
- ▶ What are their circumstances (skills, finances, social network, support structures, and so on) and how will this help or hinder them achieving their goals?
- ▶ How will their physical and psychological wellbeing impact on the amount of energy they can expend? How can we set small, achievable steps to meet goals?
- ▶ What are their beliefs and values?
- ▶ Will the goals encourage empowerment of the individual?

Organisational policy

In planning support activities and services there are many organisational policies, procedures and protocols that will impact on the decisions a support worker makes and how they work. It is essential that a support worker is familiar with the policies and procedures of the organisation they are working in as there are variations between agencies and sectors. For information that applies to your role, ensure that you become familiar with the policies of your organisation.



Policies, protocols and procedures in individualised planning

There are many policies and procedures that relate to developing and implementing individualised plans. Policies and procedures vary between organisations, so it is essential to be familiar with the policies of the organisation you represent.

These policies and procedures may reflect service standards and legislative or regulatory requirements to meet individual needs. As a support worker you will need to be able to apply these policies, protocols and procedures when developing or implementing individualised plans.

Policies and procedures in individualised planning address:

- ▶ the rights of the person
- ▶ documentation guidelines
- ▶ privacy and confidentiality requirements
- ▶ duty of care
- ▶ risk management
- ▶ support provision
- ▶ boundaries.

How policies and procedures affect planning

Policies, protocols and procedures impact your work practice in planning and implementing support services. Here is more information that applies to your role in planning and implementation.

Policies and procedures regarding planning

- 1 Intake procedures**
Intake procedures guide intake processes, and will then impact on who manages the intake, the documentation that is completed and follow-up after the initial intake process.
- 2 Privacy and confidentiality policies**
Affects procedures for obtaining people’s consent to obtain and disclose information. They affect how information is stored, how consent forms are completed and how information is managed.
- 3 Waiting list procedures and policies**
Affects how a support worker manages and responds to people who are on a waiting list to receive services, including how people are prioritised according to urgency and how people waiting for service are kept informed.
- 4 Interpreter booking procedures**
Details how a support worker engages an interpreter when required.
- 5 Home visit policies and procedures**
Covers employee safety in terms of home visits, as well as signing out of the office, booking cars and using a work mobile phone. Additional policies or procedures may pertain to out of hours or regional visits.
- 6 Eligibility criteria**
May be internal to the organisation and detailed in policy, or linked directly to government funding and the person’s eligibility for a particular package of individualised funding.
- 7 Protocols regarding documentation**
Affects all kinds of documentation including forms, templates, databases and notes, and may specify the format of individual files; who can access the files; and expectations in terms of timeliness of documentation being completed.

Example

Prepare for support activities

Older people and people with disabilities are all different. Just like anyone else they have preferences about things, including how personal support activities are done. Their preferences may be influenced by their upbringing, their abilities, their level of comfort or their willingness to accept assistance.

The following shows that there are many examples of preferences that people who are aged or have a disability might have.

People may prefer to:	People may prefer not to:
▶ have a shower rather than a bath	▶ wash in cold water
▶ wear bright coloured clothing	▶ use an electric shaver
▶ have breakfast before getting dressed	▶ wear stockings
▶ have two sugars in their coffee	▶ be helped to wash their genital area
▶ have a beer before dinner.	▶ get up early on the weekend.

Practice task 5

Interview a classmate or colleague. Ask them about a typical week day: what do they normally do from when they get up until when they go to bed.

Write down five questions you could ask this person to confirm their preferences on a particular day.

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Click to complete Practice task 5

Summary

1. In order to provide a quality service to individuals, and be accountable and professional, a support worker must be aware of their personal and professional limitations and seek the required support. Limitations to be aware of include skills, knowledge, qualifications, personal factors and job roles.
2. Consultation means that a support worker is working in partnership with the individual person and often with their family.
3. Communication practices that help the person to feel trust and to develop an effective rapport with them are essential in the support worker role.
4. You should always seek assistance if you have any questions or concerns about an individualised plan.
5. Human rights and the rights of service users must be considered at all times when providing support. These rights include the right to make a complaint.
6. People who are older or who have disabilities must not be discriminated against.
7. The role of the support worker in providing support is to help the person choose activities that promote independence and to maximise participation in valued activities and the community.
8. People should be given opportunities to make choices and discuss their preferences whenever possible.
9. You must follow the organisation’s policies and procedures at all times when providing support and following plans.

Learning checkpoint 1

Determine support needs

This learning checkpoint allows you to review your skills and knowledge in determining support needs.

Part A

1. What should be done by an organisation and its workers to ensure that the person and their family are able to confirm details of a plan? Give three examples of how this could be ensured.

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2. What would you do if you were asked to follow a plan that contained instructions to use a piece of equipment that you have never used before, and that looks complicated to use?

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3. Who would you talk to about the details of the plan if you were supporting a person for the first time?

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4. Can you talk to a family member about a person's needs if the person themselves does not want you to do so? Give a reason for your answer.

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5. What steps should you take to plan activities that promote participation and independence for a person?

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6. What professional could be called on by your service if a person you supported had dementia and had medical concerns related to their high blood pressure?

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Part B

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

Case study

Rachael has an intellectual disability. Rachael has an individualised plan that includes the following goals.

Rachael will be able to make her own breakfast every day within the next two months.

Rachael will be able to go out in public without hugging or kissing any strangers by the end of the year.

At times Rachael can be over-affectionate to strangers in public, going up to people and putting her arms around them, or striking up conversations with people in queues. The staff at her service do not feel they have the resources to manage this behaviour. They feel embarrassed by her in public, and have had complaints from people at the local café where they like to take some of the other service users with disabilities once a week. Each week they set Rachael up with her favourite computer game just before they leave for the café as a way to convince her to stay at home instead. At times she asks if she can go, but they often tell her that they will download an extra game on the laptop if she stays quietly at home. She is able to be left alone and is starting to become used to being at home all week, This way the staff feel everyone is happy, and Rachael does not complain. Her goal of being able to be out in public without being too affectionate does not seem to be necessary anymore, and the staff are considering updating this goal to something more relevant to her needs, such as being able to reach a higher level on her computer games. However, Rachael's sister Prue has recently made a complaint to the support worker, Thomas, because she feels that Rachael should be able to go to the café with the others.

1. Do you think Rachael's human rights have been limited here? Explain.

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2. Do you think this is a case of discrimination? Explain why or why not, using your understanding of this term.

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3. How should Thomas respond to Prue's complaint? Explain what he should say and do next.

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4. What three options does Prue have to pursue the complaint further if she is unhappy with the outcome of her complaint to the disability service?

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5. The organisation has a policy that all plans must be prepared in consultation with the person and their family, and that they should be happy and motivated to progress towards the goals in the plan. Do you think the staff can get around this policy by simply reviewing Rachael's community goal and changing it to another? Why or why not?

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6. How could they work with Rachael to support her independence and decision making with these two goals?

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7. Do you think Rachael has been adequately made aware of her rights here? Explain.

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Topic 2

In this topic you will learn how to:

- 2A Conduct exchanges with the person in a manner that develops and maintains trust**
- 2B Provide support according to the individualised plan**
- 2C Assemble equipment as and when required**
- 2D Include the family and/or carer**
- 2E Provide support according to duty of care and dignity of risk**
- 2F Provide assistance to maintain a safe and healthy environment**
- 2G Provide assistance to maintain a clean and comfortable environment**
- 2H Respect individual differences**
- 2I Seek assistance when it is not possible to provide appropriate support**

Provide support services

People requiring support will often have a range of different needs, including the need for help with their physical support, accessing the community, mobility, communication and social needs. They may also come to you from a variety of backgrounds or have specific cultural needs to be met.

A critical part of supporting people and meeting their personal preferences is ensuring that people have a sense of control over the support that is provided. Your focus, as a support worker, is to follow the individualised plans and provide a level of support that allows the person to be as independent as possible. The way you interact with people and their families, the level of information you provide and the degree to which you allow them to make choices will have a significant impact on the success of the support you provide.

2A Conduct exchanges with the person in a manner that develops and maintains trust

Following a plan that responds to the individual needs of a person and establishes goals to work towards to meet needs, requires trust and communication between the worker and the person. Individualised plans often contain information about issues, situations or goals that are very personal or private. Knowing how to introduce yourself and maintain courtesy, develop trust and maintain confidentiality and privacy can help improve the quality of support. It is important workers develop their communication skills, respect cultural and individual differences and maintain appropriate relationships with the person and their family.

Meeting a person and their family or significant others for the first time is a critical first step in establishing the relationship between the support worker and the person. New service users may be unsure what to expect from a service provider and might be feeling anxious about this first meeting, so introductions should be courteous and respectful. Introductions can be important for developing rapport and trust.



Communicate with dignity and respect

To be treated with respect is a basic human right. Respectful communication shows the person that you value their expertise as their own decision-maker, and that you consider them a partner in the support process. It helps the person to feel comfortable in speaking up about their needs and preferences.

Tips for respectful communication:

- ▶ Focus on the person, not the disabilities or health issues.
- ▶ Do not touch a person's wheelchair or mobility aids without asking.
- ▶ Sit so you are at the person's eye level when communicating.
- ▶ Observe and note any family or household customs, such as leaving your shoes at the door before entering the house. You could wear inside-only shoes to meet WHS requirements.
- ▶ Try not to be judgmental of differences you see in how people live.
- ▶ Respect a person's lifestyle choices even if they are quite different to your own.
- ▶ Ask the person how they would like to be addressed; do not assume a person is comfortable being addressed by their first name.

Develop rapport



Introductions can be important for developing rapport and trust. When meeting a person for the first time ensure you have accessed any relevant information about them that is available to you. If there is a referral or intake form, become familiar with any details that may help your introduction and first meeting. Take the time and respond to the person as an individual and with genuine empathy and courtesy.

Active listening involves restating what the other person has said using different words to reflect back the content and the feelings of what the person has expressed. Summarising is another key part of active listening. Repeating what the person has said reflects back the content and the feelings of what the person has expressed – you let them know you understand and help encourage further discussion.

Be courteous

What constitutes courtesy varies between generations and cultures. Think about the generations within your own family and the different expectations and social customs between the generations.

Using courtesy:

- ▶ Think about how the person's age and background will need to be taken into consideration.
- ▶ Find out in advance if an interpreter, written translations, braille or any communication aids are required.
- ▶ Make eye contact. If appropriate, get on the same level as the person. Speak clearly and allow plenty of time for introductions.
- ▶ If possible, meet in a place that is free from distractions and noise so you can concentrate and listen properly.
- ▶ Use language appropriate to the person's style, skills and understanding; check to see if it would be helpful for the person to have an advocate.
- ▶ Be prepared to answer the person's questions and ensure you are well prepared with any information they may require.
- ▶ Ensure the person is happy with who is present while you are talking to them.

Develop trust

People who are accessing community services can be quite vulnerable. It can be challenging for a person to disclose personal information and seek assistance. Working with a person to develop their personal goals and plan for services and support may involve consideration of personal health details, complex relationships and other personal details. Take a moment to consider how you would feel discussing this type of information about yourself. Ask yourself what you would expect a professional to do to establish trust with you.

Below are some guidelines to assist you to establish a trusting relationship.

Guidelines for establishing a trusting relationship

- ▶ Be competent. Practise your active listening and communication skills so that you are good at what you do.
- ▶ Never pretend to know something that you do not know or work outside the scope of your skills.
- ▶ Be genuine and mean what you say. Show that you are really listening and are not just following a script.
- ▶ Be committed to the person and think positively of them.
- ▶ Have empathy. Try and imagine the experience of the other person without getting involved in their experience.
- ▶ Allow time.
- ▶ Show respect and courtesy. Treat the individual the way you would like to be treated.
- ▶ Never impose judgments. Reflect on whether your values are affecting the way you are supporting someone.

Maintain trust

Trust is an ongoing part of a relationship with a person – it can be broken by actions such as not respecting a person's confidentiality or by inconsistent regard to their privacy or dignity in the way you communicate. Effective communication underpins good relationships between support workers and the people they support. You can continue to develop the trust the person places in you by showing empathy for their concerns, and taking time to listen.

The importance of empathy and listening is explained below.

Empathy

To be effective, empathy must be genuine and expressed in a way that is meaningful to the other person. Empathy means identifying with another person's feelings and experiences. Sometimes empathy is described as walking in another's shoes, though this does not mean a support worker must agree with the perspective of the person he or she is communicating with.

Demonstrating empathy can:

- ▶ show that a worker understands the individual's perspective, feelings or experience
- ▶ help develop rapport and establish trust
- ▶ show support and compassion
- ▶ enable another person to feel they are heard and valued.

Listening

Like empathy, genuine listening is essential to good communication because it:

- ▶ indicates that you value the other person
- ▶ shows respect
- ▶ can help to build rapport
- ▶ assists in developing a trusting relationship
- ▶ gives the other person confidence that their perspective is valid and is being heard.

Example

Conduct exchanges with the person in a manner that develops and maintains trust

Nancy has been receiving services for about four weeks and has made a number of complaints. Daniel realises it is important to gain Nancy's trust. His priority is to actively listen to her and to demonstrate empathy. Daniel allows plenty of time for his discussion with Nancy so she won't feel rushed at all.

Daniel has heard a number of comments and complaints from support workers and other staff about Nancy. Many staff say that she is unreasonable and grumpy. Daniel has consciously decided to put aside what he has heard and to meet with Nancy, holding her in positive regard and valuing her as a person.

Daniel introduces himself and waits to be asked in. He asks Nancy how she prefers to be addressed. He respects that he is in her home.



Daniel actively listens to Nancy's complaints and only interrupts to clarify or to paraphrase to ensure he understands fully. He does not agree or disagree. Daniel shows he is listening by leaning forward, making eye contact and making noises like 'hmmm'; he shows he is listening even when he is not asking questions.

Some aspects of Nancy's complaints seem trivial to Daniel but he reminds himself that he is seeing the situation from his perspective and tries not to be judgmental or apply his own values. When Nancy is finished speaking, Daniel summarises everything she has said to ensure he has got it right. This demonstrates to Nancy that Daniel has really heard what she has said and it enables Daniel to show empathy without making any judgment.

There are aspects of Nancy's complaint Daniel is able to respond to and follow up. There are some things Daniel is unsure of so he commits to finding out and getting back to Nancy by the end of the week.



Practice task 6

1. Describe two actions you should perform when introducing yourself to a person receiving support.

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2. Describe two guidelines to help you develop trust with a person receiving support.

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3. Describe two non-verbal ways you can show you are courteous to the person receiving support.

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Click to complete Practice task 6

2B Provide support according to the individualised plan

Individualised planning must support the person's strengths, interests, health and emotional wellbeing and self-determination. This means that planning responds to what each individual needs and prefers, what they are interested in, what their rights are, and their decisions and choices. The role of the worker is to support and empower people to make decisions about their plan and their goals so the plan reflects the person's particular needs.

Person-centred practice

In a person-centred approach, planning is tailored to the person and focuses on their unique aspirations. The resulting service is the outcome that matters to the individual.

Here are some ways that plans can be tailored to meet individualised aspirations and goals.



Participation and independence

It is easy for people not experiencing difficulties relating to ageing, or who do not have a disability, to take for granted what the principles of independence and participation really mean. Independence is not just the things people do for themselves, but also the decisions and choices that are made freely, unaided and often privately. Participation extends beyond the formal, structured groups a person may be involved in to include all the ways a person participates in their community and society, like using the local post office and shops, having a job, using public transport, volunteering or being friends with one's neighbours.



Promoting independence and participation

From a community service perspective, promoting participation and independence is about empowerment and opportunity. Community support workers do not pretend a person is not ageing or does not have a disability. Instead, they try to make sure that receiving support is a positive experience for the person and foster as much self-sufficiency and choice as possible.



Least restrictive option

Choosing the least restrictive option means that the support worker offers the service that impacts the least on the independence of the individual. For example, if a person can be supported with occasional home care, it would be restrictive to put them in overnight services or recommend they move into a residential facility.



Ways of doing tasks differently

Performing tasks differently may enable the person to do things independently. Specialised aids, equipment and assistive technology can enable a person to do tasks independently that they would otherwise need physical assistance with.

Community access

An essential part of implementing individualised plans is to ensure the person being supported is accessing the same services and activities in the community as the rest of society. Accessing generic community services is a strategy toward achieving community inclusiveness.

All plans need to ensure people are being supported to be included in their community. Here are some factors to consider when encouraging community inclusion.



Use community services

Consider generic services that other members of the community use. It can be restrictive and disempowering to use a specialised service when a generic service could provide the same service.



Empower individuals to access services

It has much more impact on an individual to teach them how to do something or access a service than to do it for them. Support workers who teach a person how to catch public transport rather than simply providing transport, or teach a person how to use an ATM rather than having a worker do their banking for them, is taking an empowerment approach.



Connect the individual with the community

Often support workers are engaged to take people with a support needs on community access outings where the person spends the day one-on-one with the support worker. The individual is out in the community but is not participating in a valued or meaningful way. Educating support workers in how to support individuals to develop networks and make friends is far more empowering than just taking them out and entertaining them for the day.

Strengths-based practice

Strength based practice means to utilise what skills and abilities the person already has, and to draw on these wherever possible. The following points can be used for guidance.

Identifying an individual's strengths

- ▶ Keep a strengths diary. Commit to observing and recording things that the person is good at.
- ▶ Use skills checklists as a formal way to determine some of the person's strengths.
- ▶ Observe and record the individual's activities.
- ▶ Review any previous or existing files and individualised plans and reports as a source of ideas.
- ▶ Spend time with the individual, getting to know and understand them.
- ▶ Get to know more about the individual in other environments (ask family, advocates, any agencies that may be involved with the individual).
- ▶ Try out new activities and record how much the person liked them and what strengths they showed.

Skill development

Individualised plans establish goals for individuals to work towards, based on their needs, strengths and preferences. In order to achieve a particular goal, an individual may need to develop specific skills. It is essential that any skills development is linked directly to the individual's needs and goals. The needs assessment during individualised planning – the continuous process of planning, implementation review and assessment discussed in the introduction – is imperative to ensure you know the person well and understand their individual needs and goals. Skills should be developed that are clearly aligned with the person's needs assessment and planning processes.



Support skill development

In the past, people with disabilities and older people were sometimes engaged in programs learning skills that were not interesting or meaningful to them, or that they did not get the opportunity to use.

There are many processes and practices that support skill development. You will need to know each individual to have a sense of the approach to skill development that is likely to best meet their needs.

Task analysis

Task analysis involves breaking a skill or task down into small steps and to develop a plan for an individual to learn and build on each step within the task. Any skill can be presented as a chain of small steps and each step serves as a cue to the next step in the task.

Chaining

Chaining can be used to teach the whole task, part of a task and in sequential order, forwards, or backwards. Backwards chaining is useful if the individual understands the final part of the task (for example, eating the cake if the skill is cooking, or arriving at the swimming pool if the skill is catching public transport) and then the steps can be built on in reverse. In the beginning you may complete the other steps in the chain and assist with each new link as it is being added but reduce assistance until each step is learned.

Shaping

Shaping or shadowing involves gradually reducing the level of support based on the person's learning. At first you might demonstrate the skill while the person observes. Then you and the person may complete the task together. Next the person completes the task independently while you directly observe. The final step is when the person completes the task on their own and you shadow them so they aren't aware they are being observed. This is a useful strategy where there may be safety issues such as learning to catch public transport independently.

Skill maintenance

The following methods can be used to help reinforce learning and motivate the person to continue to use the skill.

Reinforcement

Reinforcement can be positive or negative. Negative reinforcement is not appropriate and does not build on individual strengths. Positive reinforcement does not have to be obvious with tangible rewards; praise and feedback can be effective positive reinforcers.

You should have a strategy in place for gradually withdrawing positive reinforcement. People should be encouraged to develop the internal motivation required to continue with the skill even when the positive reinforcement is no longer being offered. Intermittent positive reinforcement is a strategy that gives reinforcement according to a schedule. For example, in the beginning of new skill development, positive reinforcement may be given every time the skill is demonstrated, reducing to every second time, every third time and so on.

Prompts, cues and fading

Prompts and cues can be highly interventionist, such as full physical assistance with a task, or they may be subtle cues such as a single word, sign or symbol that seeks to prompt the individual with the skill they are learning. Prompts and cues can be faded as the person develops competence in the skill. When teaching a new skill you use the more overt prompt to ensure success and reduce frustration; as the skill is mastered and maintained, prompts are reduced to minimal intervention.

Generalisation

Learning a new skill has greater value if it can be used in more than one environment. When an individual has mastered a skill and is confident in completing the task independently it can be useful to teach the person to complete this task in different environments or with different people. When generalising it may be useful to temporarily increase prompts and reinforcements.

Example

Provide support according to the individualised plan

Angela works with a man named Sean who is in his early twenties and has an intellectual disability. Angela’s job is to teach and support Sean with tasks to do with living independently, such as laundry, meal preparation, shopping and household chores.

Angela follows the goal focussed individualised plan to help Sean to learn these skills. Her teaching begins by breaking down each skill using a task analysis, and working step by step through each task. Pictures on the wall help remind Sean of the process of each task. Angela reinforces the learning by using praise and reminding him that he is well on the way to having independence, possibly even living in a unit of his own. She slowly reduces her prompts until he can do the tasks on his own.

Practice task 7

1. List the three practices that can be used to support skill development.

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2. List the three methods that can be used for skill maintenance; to help reinforce learning and motivate the person to continue to use a particular skill.

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3. You need to provide support according to the person’s individualised plan. One consideration is the person’s physical health status or needs. Give two examples of other considerations that may be included in the plan.

.....

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Click to complete Practice task 7

2C Assemble equipment as and when required

There are many different types of equipment or aids that can assist people to remain independent, or to assist you to help them with their support needs.

Equipment can assist older people and people with disabilities to perform everyday tasks that would otherwise be a struggle or impossible for them. The type of equipment they need depends on what tasks they are having difficulty with and why.

It is important that you are familiar with the types of equipment that are used in your work. You will need to be shown how to use each piece of equipment before using it to provide support to a person. You will need to know how to check the equipment to ensure it is functioning correctly, and how to clean and maintain equipment and aids to ensure they continue to function.



Aids and equipment

Support workers must know how to use aids and equipment so they can assist people safely. If you are unsure about how to use any equipment, make sure you ask your supervisor. Do not use equipment you have not been trained to use. Using equipment or processes that you are not permitted, trained or qualified to use may cause harm or injury to the person or to the worker using the equipment. You may also be in breach of your duty of care, as well as contravening legislation or workplace policy.

Equipment and aids a support worker may use include:

- ▶ wheelchairs and other transport devices
- ▶ mobility aids
- ▶ lifting and transfer aids
- ▶ breathing devices
- ▶ continence and toileting aids
- ▶ personal audiovisual aids
- ▶ modified feeding aids.

Assembling equipment

You must assemble all equipment safely and correctly to meet work health and safety requirements. Always ask your supervisor for assistance and/or training before assembling equipment if you are not sure what to do. Use the following checklist as a guide.

Equipment assembly checklist:

- Make sure the person is safe before you leave them to gather the equipment needed.
- Ensure all parts are clean prior to assembly.
- Check for cracks or other faults – these must be reported and the item should not be used until it is repaired.
- Ensure that you follow all instructions and procedures relating to the equipment.
- Ask the person about their personal preferences for the position and settings of aids and equipment that they are to use.

Example

Assemble equipment as and when required

Here are some examples of assembly requirements for common pieces of equipment used in support services.

Wheelchairs and other transport devices

Ensure armrests and footplates are assembled according to instructions.

Position seat belt and/or straps, brakes and rechargeable batteries for safe use as directed.

Walking frames

Ensure that the walking frame is the right height for the person. It should be in good condition and able to grip onto the floor well so it does not slide when the person puts weight on it. The seat should be positioned upright when the person is walking.

Hoists

A person may be transferred from a wheelchair to a bed, a bed to a chair, or from a chair to a swimming pool using a fixed or portable hoist. Because there are different kinds of hoists that work in different ways, it is important that you are shown how to use them correctly.

Assembling this piece of equipment will require you to:

- ▶ locate a suitable sling to suit the person's size and weight
- ▶ assemble the battery pack from the charger
- ▶ position the equipment close to the person and ensure brakes are on.

Practice task 8

1. Name three different types of equipment that might be used by a person who needs help with personal support or mobility.

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2. What must you be careful to do prior to using equipment that has been used by another person?

.....

3. Where can you seek help if you do not know how to use a piece of equipment?

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4. How would you respond if you noticed a fault or damage to a piece of equipment while you were assembling it?

.....

Click to complete Practice task 8

2D Include the family and/or carer

Family members have an important role in the lives of most people you support. You might often find that family members expect and appreciate being called upon to help you support the person.

Be careful, however, to keep the person at the centre of supports. You can do this by considering the following guidelines.

Including the family in support

- ▶ Talk directly to the person as the centre of the discussion.
- ▶ Include the family in discussions about the person's support when the person is happy for you to do so.
- ▶ Ask further information from family members where they have voiced concerns, and report these concerns to your manager.
- ▶ Respect the person's confidentiality around family. They may not wish to share details of their condition or support needs with family members.
- ▶ Listen to service users and their family carers. Take their feedback seriously, follow up on all promises and never discuss personal information with unauthorised people.
- ▶ Accept offers of help to undertake your duties graciously from family members only if it is safe practice and the person themselves is happy for family members to do so.
- ▶ Remember that the person's preferences usually take precedence over the wishes of the family, and explain this respectfully to the family if required.
- ▶ Talk to your supervisor if instructions given to you by family or the person that you feel go against organisational policy.

Example

Include the family and/or carer

Mr Pukitas was born in Latvia and moved to Australia with his wife and three children when he was in his late 30s. He always insisted on maintaining a number of Latvian traditions in his family. He only spoke Latvian to his wife, and speaks Latvian to his children as often as possible. He has been a member of the Latvian Social Club ever since coming to Australia. Mr Pukitas is now 83. His wife died five years ago.

It is very important to him that he maintains contact with others from his country of birth and has a community he can participate in and celebrate Latvian traditions and culture.

The support workers are careful to use clear and open body language to talk to Mr Pukitas. Smiling and gesturing are helpful, but the support workers have also collaborated with his children, by suggesting they put together a simple list of Latvian translations for commonly used words. Support staff now have a wonderful resource to help communicate with their father, which also includes a guide to pronunciation.



Practice task 9

1. Which are more important to take into account, the preferences of the family or the person you support?

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2. Is it up to you to intervene if you think that a person takes more direction from their spouse rather than from you?

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3. Should you take direction from a family member or person you are supporting if the request goes against the policy of the organisation?

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.....

[Click to complete Practice task 9](#)

2E Provide support according to duty of care and dignity of risk

Community service organisations and workers have a legal and ethical responsibility to provide a duty of care to ensure the safety and wellbeing of people in receipt of their services. Legislative and regulatory obligations underpin an organisation's policies, and so determine the procedures followed to guide service delivery in promoting and enhancing the safety and wellbeing of people.

While aspects of WHS legislation may vary between states and territories, there are common legislative requirements and obligations under the duty-of-care principle. Everyone in the community service environment has the responsibility of duty of care for themselves, the people they care for, visitors and each other.



The rights of people to dignity and choice, upheld in legislation and service standards, also require that duty of care or safety is not used as a reason to limit a person's freedom or personal choice. A support worker's adherence to duty of care and safety must be coupled with the concept of dignity of risk, which means that a person has the right to make their own choices and to take risks.

Duty of care

Your duty of care is the requirement to act safely and reasonably at all times. People who are accessing aged care, home and community care and disability services have a right to receive service that responds to their needs and rights. Support workers and coordinators have a number of mechanisms available to assist them to support the rights and safety needs of the people with whom they are working.

Duty of care is the obligation a person has to act in a way that would not cause harm. Negligence occurs when duty of care has been breached and harm to either person or property ensues. It is the legal and ethical obligation of any community worker, supervisor or organisation to ensure that people using services are not exposed to unnecessary or unreasonable risk. When determining supports in consultation with an individual, you must ensure that no activities are agreed to that a reasonable person would envisage would cause harm.

Both you and your organisation have a duty of care to follow.

Here are some examples of duty of care.



Organisation's duty of care

- ▶ Provide you with an appropriate amount of information and training to do your work safely
- ▶ Provide you with access to policies and procedures to help you complete your role
- ▶ Ensure that the work areas and equipment you will be using are safe and well maintained
- ▶ Provide you with appropriate equipment, such as gloves and transfer equipment, to perform your role with low risk to you



Support worker's duty of care

- ▶ Report any faulty equipment, changes in the persons condition or problems with following their role safely to their supervisor
- ▶ Be aware of and follow policies and procedures at all times
- ▶ Observe any hazards in the work environment and report them immediately
- ▶ Use equipment as directed

Dignity of risk

Dignity of risk is a term used to describe a person's right to take measured risks, even if you feel this might not be the best choice for the person. It is the role of the community worker to ensure that the individual understands the risks they are taking and therefore is making an informed decision.

A support worker must carefully balance their duty of care with the person's dignity of risk, and sometimes you will need to seek guidance about how this can be done. You must allow for a person's right to dignity of risk while ensuring that you are acting at all times within your job role. Sometimes this might mean simply reporting a concern or problem. When determining supports in consultation with the individual, you must ensure that no activities are agreed to that a reasonable person would envisage would cause harm. Some examples of dignity of risk follow.

Dignity of risk examples

Allowing a person to work out in the garden pruning roses, even if you are worried that they might scratch themselves or fall.

Allowing a person to wander unrestricted, but taking steps to reduce their chance of falling.

Allowing a person who uses a wheelchair to go shopping alone, even if you worry that they might be an easy target for having their money stolen.

Example

Provide support according to duty of care and dignity of risk

Charles is 91-year-old man. He used to be a pilot and has loved planes all his life. One of his goals in his individualised plan is to engage in more outings in the community and another is to reconnect with his passion for flying, which he misses terribly. Charles has dementia and is often confused. He is able to walk but is unsteady on his feet. A couple of years ago he had a fall and broke his hip. His next of kin is his 40-year-old grandson, Noel. Noel is worried about Charles's mobility and is fearful that he would not recover if he had another fall.



There is an air show in town next month following the classic planes that Charles used to fly. Staff have suggested that this air show would be a great opportunity for Charles, and that it may assist in meeting some of his goals. Noel is adamant that Charles should not attend. Noel says that with all those bustling crowds and in an unknown environment, Charles could easily have a fall. Noel says it would be irresponsible to allow Charles to attend.

Staff look for moments when Charles is lucid and show him flyers about the event. During these times, Charles reminisces about his flying days and tells staff members story after story. He keeps the flyer by his bed in the room.

A key staff member who knows Charles well asks Charles and Noel to meet to discuss the show. Together they come up with a solution that seems to address duty of care and Noel's safety concerns whilst not restricting Charles or taking away his dignity to take risks. It is decided Charles will attend the show, using a wheelchair to protect him from the crowd and to reduce the chance of him having a fall. Noel has decided he will attend with his grandfather and is quite looking forward to getting to know more about Charles's past.

Practice task 10

1. What does the term duty of care mean?

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2. What term is given to a situation when duty of care has been breached and harm to either person or property ensues?

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3. What does the term dignity of risk mean?

.....

.....

Click to complete Practice task 10

2F Provide assistance to maintain a safe and healthy environment

As in any workplace there are potential risks associated with community work in aged care, disability and home and community care settings.

The nature of disability and ageing can mean that many people who access these services are exposed to an increased level of vulnerability and risk. You can help the person to recognise risks by reminding them of issues that you feel are unsafe, such as walking without a prescribed walking aid or not cleaning away food after preparing a meal. It is important to be sensitive at all times to the person's understanding of hygiene and safety, and call a supervisor if you feel the person continues to be at risk of harm or illness.



Maintain a safe and healthy environment

Keeping an environment safe often requires simple planning and thinking ahead, such as wiping up a wet floor and tidying away clothes left around to remove the risk of tripping on them. Another example is helping a person to wash their hands after using the toilet to remove the risk of illness or infection. Be sensitive when discussing problems that occur in the person's home, talking in terms of safety, rather than using words like 'dirty' or 'messy'.

If you see something that might be unsafe or unhealthy, you should try to resolve the problem immediately if possible.

Unhealthy or unsafe situations include:

- ▶ evidence of self-neglect, such as poor hygiene or out-of-date food in the fridge
- ▶ behaviours that could cause harm, such as forgetting to turn off the gas when boiling the kettle
- ▶ hazards in the home that could cause tripping, such as slippery rugs, frayed cords or clutter in pathways.

Plan ahead for safety

Always plan your work ahead of time. This could mean considering what you will need to take with you into the bathroom and having it prepared before you begin to transfer a person to the shower, so that you do not have to leave the person alone.

As a support worker, it is important that you are constantly assessing situations and tasks for potential risks, and identifying and reporting risks if you cannot resolve the problem easily.

Some ways to contribute to a safe and healthy environment follow.

Ways to contribute to a safe and healthy environment

- ▶ Observe any changes and potential risks and hazards in the environment; for example, trip hazards, frayed electrical cords, slippery or uneven surfaces, food that is past its use-by date.
- ▶ Report risks and hazards promptly, and follow organisational protocols. Risks should be reported to your supervisor.
- ▶ Let the person know that you have concerns about equipment, flooring or other hazards. Suggest to the family ways that the problem could be improved.
- ▶ Encourage the person to take part in maintaining their environment in a safe way.
- ▶ Use personal protective equipment such as clothing, gloves and aprons, when required.
- ▶ Supervise the person, if needed.
- ▶ Talk to the person about dangers, such as out-of-date food.

Example

Strategies to maintain a safe and healthy environment

Here are some practical strategies for maintaining safety in a work environment.

Floor surfaces and objects on the floor

- ▶ Uneven or loose surfaces and objects on the floor can trip you or the person. Keep your work area clean and tidy, and keep the floor surface free from loose mats, spills and worn carpets.

Lighting

- ▶ Dark areas make it hard to see where you are going and what you are doing. To prevent this you can keep your work area well lit, turn on lights and open curtains.

Space

- ▶ Small spaces make it hard to move. Move a bed out from the wall when you are making it so you can move around all sides instead of leaning and straining to reach.

Air quality

- ▶ Smoking pollutes the air, damages lungs and can cause breathing difficulties such as asthma attacks. Most workplaces have smoking bans. Do not allow the person to smoke while you are visiting.

Furniture/fittings

- ▶ Low, heavy or poorly maintained furniture can be hard to move, unstable or unbalanced – this can cause back strains. Report any furniture hazard.

Car parking

- ▶ Your workplace should provide safe car parking that is well lit and secure. In community care always park in the street close to the home where you are working – don't park in the driveway because it can be harder to leave in an emergency. Report any unsafe car parking areas.

Practice task 11

Read the following descriptions of risks to health and safety. What would you do to remove or reduce the risk in each case?

1. The lid of the kettle is broken and falls off when pouring.

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2. A person is likely to forget to wait for the support worker before getting into the shower, and is at risk of losing balance or slipping.

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3. A person has left clothes on the floor after undressing.

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4. Food in a person's fridge is past its use-by-date.

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5. A power cord to the electric shaver has frayed.

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6. The kitchen linoleum is becoming unstuck and becoming a potential trip hazard.

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Click to complete Practice task 11

2G Provide assistance to maintain a clean and comfortable environment

An environment that is clean and comfortable is important to all of us. People using support services often rely on us to ensure that they are warm and comfortable, free from pain or discomfort.

Older people are often at higher risk of developing infections and food poisoning from bacteria and viruses that commonly exist in the environment. It is important to be vigilant about hygiene practices, such as keeping surfaces clean, observing food safety procedures and protecting other people from commonly transmitted viruses such as the common cold and gastroenteritis.



Maintain a clean environment

Cleaning must be undertaken regularly, particularly when sharing equipment, bathrooms or other spaces between two or more people. Your organisation will have procedures that need to be followed relating to the types of cleaning products used and the frequency that certain surfaces need to be cleaned.

Universal precautions are recommended when supporting any individual, regardless of any infectious status. This means gloves are worn whenever there is possibility of contact with blood, body fluids, secretions (for example, wounds), excretions (for example, faeces or urine), contaminated items and non-intact skin. Eye protection must be worn if there is any risk of splashing of body fluid.

Effective hand-washing



Hand-washing is the single most important measure to reduce the transmission of infection. Hand-washing is recommended following contact with any blood or body fluids, after finishing working with one person and before beginning to work with another, immediately after removing gloves and between tasks and procedures on the same person.

Maintain a comfortable environment

Comfort can mean different things to different people, but there are certain things that we all require to feel comfortable. You might need to assist the person you support to achieve a level of comfort that is right for them, by thinking about the following as you work.

Consider the temperature of the environment

Remember that people who are older or inactive for long periods are less likely to feel temperature in the same way that you do. Maintain the room temperature at a level right for the person, not for yourself. A blanket or rug across their knees can help to maintain comfort.

Pre-heating bathrooms

While you are attending to a person before and after a shower, cover them with a towel while they are undressed or partly undressed, to maintain warmth and dignity. If there is a heater in the bathroom, pre-heat the room in cold weather or early mornings, for ten to twenty minutes prior to the time when you will be assisting them.

Clothing

It is important that people are able to dress in clean and suitable clothing, and that they get the assistance needed to do this. They need clothing that is appropriate to the weather. Be guided by the person's preferences, even if you do not feel heat or cold in the same way that they do.

Dressing for abilities

People should not wear clothing that prevents them from going to the toilet independently; it is important their clothing is manageable. Velcro or hook fastenings or pants with elastic waists instead of clothing with buttons or zips may be easier to manage. An occupational therapist may find ways to help manage things like buttons, zips and other fastenings.

Regular continence checks

Never leave a person lying or sitting in soiled clothes or incontinence pads. Regular checks are important if the person is not able to communicate this to you. If they do let you know that they are soiled, respond immediately. Leaving a person for long periods with their skin in contact with urine or faeces is not only uncomfortable, but can lead to rashes, infections and breaks in the skin.

Noise

Loud, cluttered and busy environments can be uncomfortable for some people, particularly people with dementia. Consider reducing unnecessary noises, such as a television that no-one is watching. If a person seems distressed around busy environments, take them somewhere quieter.

Check before leaving

Ask the person if they are comfortable prior to leaving them in a bed or chair. Consider positioning of pillows and blankets, and check that the person's limbs are not positioned awkwardly.

Example

Provide assistance to maintain a clean and comfortable environment

Brian is a 56-year-old man with multiple sclerosis. James is a support worker who visits him at home to assist him to wash, dress and have breakfast in the morning, before going to work.

James greets Brian in the morning by talking him through the procedures. 'I'll help you to get out of bed first, and then I'll assist you to get into the shower. I will get your clothes ready while you wash and once you are dry and dressed, I will make your breakfast.



'Does that all sound okay with you, Brian?' James prepares the bathroom so that it is warm enough for Brian to get undressed. 'The water is running at the right temperature in the shower now Brian, so I will take the towel off you and help you in.' This way Brian is aware of what is about to happen and is comfortable that he will not be sitting long without being covered up.

Practice task 12

1. Universal precautions are recommended when supporting any individual. What do universal precautions involve?

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2. Describe two ways you can ensure you maintain a comfortable environment for a person receiving support?

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Click to complete Practice task 12

2H Respect individual differences

There are many factors that will mean no two people you support, either now or in the future, will ever need the same approach. You will need to adapt the strategies you use to suit the age, abilities, interests, culture and other differences. Factors such as mobility, communication skills and cognitive abilities are further examples of how their requirements will differ. Treating a person with dignity requires that you act in a way that is respectful and acknowledges each person as having individual rights, feelings and preferences.

Each person will also have a different understanding of privacy and what it means to them. When you are providing personal support such as showering and dressing, privacy is something that should never be taken for granted.

Communication differences



You are likely to find a wide range of communication abilities among the people you will be supporting. There are conditions that affect a person's language skills; for example, dementia or some forms of acquired brain injury, can reduce their ability to find the right words or to understand the words you are using. It can also mean that a person who has spoken another language before they learnt English may revert back to that language as their condition progresses; it may be important to plan for this need. An

interpreter may be needed or you may need to learn a few words of another language so you can communicate with the person or seek other alternatives, such as pictures or gestures.

Cultural differences

You will need to think about the cultural background of each person you work with. Differences in culture can mean different expectations of you as a support worker. For example, different cultures may have different expectations about courtesy and communication. You should always attempt to find out how the person's culture might affect the way you provide support, as there might be differences in what is considered respectful language, in observing religious practices, and in food preferences, for example.

Culture can also affect a person's attitudes to privacy. People from some cultures might not wish to have a person from the opposite sex helping them with the most personal types of support, and this will be taken into account by your organisation in rostering. Other efforts to maintain privacy for people from any background should always include:

- ▶ locking the door to a bathroom or bedroom when you are helping a person dress, shower or perform any other type of personal intervention
- ▶ not talking about personal matters such as toileting habits to a person in a way that can be overheard by others
- ▶ keeping the person's body covered by a towel when they are undressed.

Cognitive differences

A person's thinking processes may be affected because of damage to the brain. This may be due to the onset or worsening of a condition such as Alzheimer's disease or dementia, or it could be due to conditions such as intellectual disability, stroke or brain damage caused by an accident. Signs of this might include memory problems such as forgetting how to do everyday tasks such as dressing or cooking. Where the behaviour is new, or has changed, any immediate risk must be addressed and this must be reported to your supervisor.

Where a person has impaired judgment or problem-solving abilities, there should be information in their support plan that provides workers with strategies for reducing risks associated with this, such as assisting them to pay for goods, and check their change, or accompanying them on outings in public.

When supporting a person with cognitive differences:

- ▶ be patient and remember that the person is not trying to frustrate you deliberately
- ▶ provide the person with cues in their environment that might help them remember, such as diaries, verbal prompts, pictures or labels
- ▶ be aware that the person still has the right to make choices; you might find it helps to limit choices to one or two options, rather than asking open questions such as 'What do you want to do today?'

Mobility differences

It is very important that you assist individuals to move around in a safe way that protects you and them from injury. If you do not assist in a way that is safe, the person may fall and injure themselves. If you try to prevent them falling, you too could be injured.

When assisting individuals to move around:

- ▶ encourage them to use handrails, bars or furniture to support themselves when moving into a sitting or standing position, as this is much safer than leaning or pulling on you
- ▶ encourage them to take their time and to feel stable at each stage of the movement
- ▶ ensure you are using the correct equipment and in the right manner to help them sit, stand and move around
- ▶ resist the temptation to catch a person if they begin to fall, as suddenly catching a heavy, moving weight is almost guaranteed to cause a back injury
- ▶ keep as physically fit as possible
- ▶ ask for help if you cannot assist a person to move on your own.

Other factors that affect support



People with disabilities and older people might have changes in mood or behaviour linked to their situation, their disability, disease or ageing processes.

As a support worker you may observe behavioural clues that indicate a person's emotional needs have changed. Maybe family or friends who provided emotional support have moved away and cannot visit as often. Perhaps the person's husband, wife or parent has died and they need comforting or even counselling. It is important that you observe changes such as these

and report them so that the person can get the emotional support they need.

Behaviours of concern are behaviours that are unexpected for the person, or not normally considered to be socially acceptable behaviour. These behaviours may put the person or others at risk of harm, injury or illness. Examples include being angry or aggressive; staying outdoors in cold or hot weather without protection; or acting in a physically or sexually inappropriate manner. All of these types of behaviours can be signs of a condition affecting thinking. Where behaviour is new or changed, or is posing a risk to the person or others, it should be reported to your supervisor as soon as possible.

Example

Respect individual differences

Mrs Kieselbach is an 80-year-old woman who was born in Germany. She moved to Australia with her husband when she was 28 years old. Mrs Kieselbach has moderate dementia, which is slowly worsening.

Lin is the support worker who has visited Mrs Kieselbach twice a week for the past six months. Mrs Kieselbach has always enjoyed Lin’s visits as they have common interests and have a lot to chat about. Over the last few weeks, Lin has noticed Mrs Kieselbach sometimes starts to talk to her in German instead of English. Lin has to remind her to speak English. She has also noticed that Mrs Kieselbach sometimes seems not to understand Lin, and Lin must repeat what she has said.

When Lin reports this to her supervisor, her supervisor suggests it is possible that as her dementia progresses, Mrs Kieselbach is losing her ability to speak English and she will gradually revert to German. She arranges to begin introducing a German-speaking worker to Mrs Kieselbach.



Practice task 13

1. Name three factors that can affect the support you provide to a person.

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2. What should you do if you notice sudden changes in a person’s ability or behaviour?

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3. Give an example of something you would do to ensure a person’s privacy is respected.

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4. Name a strategy that might be included in an individualised plan to help support a person with cognitive difficulties in their everyday lives.

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Click to complete Practice task 13

21 Seek assistance when it is not possible to provide appropriate support

While it is important that workers provide assistance as directed in the individualised plan, there are occasions when it is difficult to meet a person's needs for support. The difficulties you encounter might be due to:

- ▶ the person's behaviour, needs, preferences or abilities
- ▶ your own skills and knowledge
- ▶ organisational limitations.



Changes in the person's preferences, needs or behaviour

Do not argue with the person in cases where they disagree with the support plan. Talk to them calmly about the instructions you have, and explain that it is important for the safety of both of you that you follow the instructions. Take the time to discuss their request and find out why they want the support provided in a different way.

If the person insists that they do not want the support provided in the way you have been instructed, that is their right, but you must contact your supervisor and discuss a plan of action. You must not provide support in any way different to that described in the support plan, without first discussing it and receiving new instructions from your supervisor.

There may be times when a person may disagree with the information in the plan, and ask that you provide the support in a way that is very different to your documented instructions. Reasons for this may include:

- ▶ a change of plans for the day – for example, feeling tired, so wanting to stay in bed rather than get up and get dressed
- ▶ unrealistic belief in their own ability – for example, people with intellectual disability or dementia might tell you they are independent when they are not
- ▶ a change in the person's abilities that results in them being able to perform tasks either more or less independently.

Limits to skills, knowledge and training

Where there is a need that you are unable to meet because you lack the skills or knowledge to perform the task, you may be able to seek support for training as part of your regular appraisal with your supervisor. If there is a need that is to be met immediately, inform your supervisor that you require training as soon as possible.

Conditions such as mental illness, intellectual disability or dementia can affect a person's ability to clearly express their needs and can lead to behaviours that are outside the scope of your training to manage. In such situations, you may be able to discuss the difficulties with your supervisor, or request that a health professional such as a behavioural psychologist or GP assess the person's needs.

Organisational limitations



The organisation you work for may not have the capacity to cater to the needs of an individual. If this is the case, inform your supervisor of the identified need that is unable to be met so the person can be referred to a service that can meet this need.

If the person's individualised plan does not address a need that the person requests and the need is something that you could meet, the person's needs should be assessed and their support plan revised.

Role of services and health professionals

Other services or professionals may be able to provide help to the person where you or your organisation cannot.

Here are some examples of services or health professionals and their roles.

Behavioural psychologist

A behavioural psychologist can support a person with an intellectual disability or dementia who is using behaviours of concern that put them or others at harm.

General practitioner (GP)

A general practitioner can determine and treat medical causes for problems or issues and make referrals to appropriate professionals.

Planned activities

Planned activity groups can help to meet the needs of older people and people with disabilities by providing structured activities. Some are dementia specific groups.

Physiotherapist

A physiotherapist can play a role in assessing and treating problems with mobility and other conditions related to the use of muscles. Can help to educate staff in safe transfer techniques.

Speech therapist

A speech therapist can support a person to improve speech and/or swallowing, including recommending and teaching the use of communication aids.

Occupational therapist

An occupational therapist can assist the person to access and use aids and equipment to support living and recreational activities and improve safety and independence.

Example

Seek assistance when it is not possible to provide appropriate support

Penny is working with Harriet who is the mother of a young child, Darcy. Darcy has a neurological condition that significantly affects his overall development and functioning.

Penny and Harriet are working on developing an individualised plan for Darcy. Harriet mentions that one of her goals for Darcy is to protect the child from his father gaining custody of him. Harriet has recently left her husband and is terrified that he will take Darcy overseas where Harriet will never be able to find him. Penny listens to Harriet sympathetically, but explains that this goal is outside of her area of expertise and the scope of the organisation.

Penny obtains Harriet’s consent to speak to her team leader about Harriet’s concerns. She tells Harriet that she will get back to her with some practical advice on which professional Harriet should contact for help with this particular goal.



Practice task 14

1. Give two reasons why you may not be able to provide support according to the individualised support plan.

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2. How should you respond if a task on the plan is outside of your training?

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3. What professional might be able to help your organisation improve the safety of transferring a person who is causing some manual handling concerns for staff, by helping with training you to use the correct mobility techniques for that person?
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4. Does a person have the right to refuse support if it is written on their support plan?
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Click to complete Practice task 14

Summary

1. An individualised plan is constructed based on the preferences and individual needs of the person for whom it is being developed. It is essential that you spend time really getting to know each person in order to develop trust and rapport, and to be able to work as a partner with the person and their family to develop a plan that reflects their needs and goals.
2. In order to achieve a particular goal, a person may need to develop specific skills. It is essential that any skills development is linked directly to the person's needs and goals. Skills should be developed that are clearly aligned with needs assessment and planning processes.
3. Equipment must be prepared safely and in a way that supports the person's independence.
4. When determining supports, duty of care requires that you ensure that no activities are agreed to that a reasonable person could see as potentially harmful.
5. Duty-of-care obligations must not be used as a reason to limit a person's freedom or personal choice. A support worker's or organisation's adherence to duty of care and safety must also be coupled with dignity of risk.
6. It is an important responsibility to ensure that the person's environment is kept safe, clean and comfortable during support procedures.
7. There are many factors that will affect the way that support is given – individual differences must be taken into account.
8. At times where it is not possible to follow the individualised plan, you must seek help from your supervisor to determine how this will be managed.
9. Monitoring support activities can occur in different ways – formal or informal, structured or unstructured. In order to know if activities are still meeting the needs of the person it is important to know the person well, including their needs, and any changes in their circumstances.

Learning checkpoint 2

Provide support services

This learning checkpoint allows you to review your skills and knowledge in providing support services.

Part A

In this task you will work through the process of establishing and maintaining a relationship with a person in a setting of your choice.

If you are currently employed, you may be able to base this on a person new to your service or on a person with whom you are familiar. Preferably it will be someone from a different culture.

If you are not currently employed, you may be able to base your response on an older person or person with a disability whom you know well. Alternatively, you could seek the assistance of your trainer in identifying a suitable scenario.

1. Briefly describe the person you are working with (making sure not to give any specific details that could identify them).

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2. How do you introduce yourself to the person? Give a brief outline of the steps you would take.

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3. How do you demonstrate courtesy? Give a brief outline of the steps you would take.

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4. How do you maintain appropriate privacy and confidentiality? Give a brief outline of the steps you would take.

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5. What do you do to ensure you respect any cultural sensitivities or needs? Give a brief outline of the steps you would take.

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6. How do you support the person's preferences? Give a brief outline of the steps you would take.

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7. Choose a task that could be taught to the person, and explain how each of the following could be used in teaching the skill:

- ▶ Reinforcement
- ▶ Task analysis
- ▶ Prompts, cues and fading
- ▶ Shaping or shadowing

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- Name three individual factors that would affect the way that you support the person.

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Part B

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

Case study

Ellen is a 45-year-old woman who lives with her husband Lawrence. A workplace accident left her with physical disabilities and an acquired brain injury.

Your role today is to assist Ellen to get ready to attend a doctor's appointment and then to go to lunch with a friend. Lawrence tells you he would like to help.

Ellen is able to transfer from bed to chair and into her wheelchair using grab rails and bars. She uses a wheelchair when she goes out of the house, as she has little strength in her legs and cannot walk without leaning very heavily on supports. Her acquired brain injury has left her with some speech difficulties and word-finding difficulties. She also has difficulty in taking in large chunks of information all at once.

Ellen loves drawing and keeps a little sketch pad beside her at all times, sometimes using this to communicate. She refuses help from either you or her husband in her transfer from bed to wheelchair to shower chair, even though you feel she could use the help. She tells you that she understands that she might fall but that she is prepared to take the chance as she needs to feel more independent. Her husband supports her in this. While she showers independently, you are to prepare her chair and towels. Once she has completed showering, you are to assist her to dry herself, choose appropriate clothing, get dressed and groomed and, finally, assist her to prepare her breakfast. She tells you that she has been having difficulties with her diabetes, and that she has been feeling unwell in the mornings before breakfast.

- Write down three ways you could encourage a person-centred approach so that Ellen can actively participate in her support and identify her preferences where possible.

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2. Give an example of a strength-based approach that could be used to provide better communication with Ellen.

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3. Give an example of an organisational policy that might be referred to by the support worker prior to providing support.

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4. Ellen asks you whether you know of a way she can get into a car or taxi without getting out of her wheelchair as she is finding this quite exhausting.

- a. Research and find a way that a person who uses a wheelchair can get into a car while staying in their chair.

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- b. What are three safety factors would you need to consider before using or assembling the equipment necessary for this activity?

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5. What are three things you could do to ensure Ellen's home environment is safe and healthy prior to undertaking this support?

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6. What are three things you could do to ensure her environment remains clean?

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7. How could you include Lawrence and ensure he feels a part of the support team?
Give three examples.

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8. Identify four examples of your duty of care to Ellen.

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9. Does dignity of risk apply to this situation? Explain your response, showing how you would respond to Ellen's request to transfer on her own.

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10. What could you do to ensure that Ellen is comfortable at the end of the transfer?
Give three examples.

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11. How would you respond to Ellen’s problems with her diabetes?

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12. Who could be of help here and what could your role be in seeking this assistance?

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Topic 3

In this topic you will learn how to:

- 3A Monitor own work**
- 3B Involve the person in discussions**
- 3C Identify aspects of the individualised plan that might need review**
- 3D Support the person's self-determination**

Monitor support activities

Effective planning and support requires ongoing monitoring and review. Some review processes for individualised plans are formal and may take place annually. Important review and monitoring occurs regularly and informally. The most important strategy is getting to know each person in receipt of service as an individual. Self-determination is the right of individuals to make their own decisions about their life.

The role of the worker is to work as a facilitator who works to empower the individual to make these decisions. To enable reviews that support self-determination and acknowledge the people's autonomy, workers need to provide accessible communication and information, work with and support advocates, commit to privacy and respond to individual needs.

3A Monitor own work

Self-appraisal, or self-reflection, on your own work practices is an important skill to have when working in the community services sector. Being aware of how you are doing, and how you could improve, can help you to enhance outcomes for the people you support.

It is easy to become defensive if a supervisor or another worker provides constructive criticism about the work we are doing, but it is much more effective to take this information on board and to learn and grow from it.

However, self-reflection is more than simply passively waiting for praise or criticism – it is about actively seeking out opportunities to learn, asking the right questions about our performance, considering whether you are meeting the required standards, and continuously reflecting on how you could improve.



Meet standards

The best way to monitor your own work practices is to align what you are doing against existing standards. You might find standards against which to measure your performance in places such as your job description, or in the industry standards that apply to the area that you work in, such as the Aged Care Accreditation Standards or the National Standards for Disability Services. The standards should always be available in your workplace, or are online on the relevant government websites in your state or territory. Be aware of the standards and monitor your ability to meet them consistently. Some of the following self-monitoring methods might help you to do this.

Keeping a journal

- ▶ Writing down how you think you are doing in your work role, including successes, failures and things you have learnt, can be a helpful way to assess your growth in your job role and monitor your abilities.

Ask others how you are doing

- ▶ Ask questions of the people you support, your supervisors and colleagues that invite a truthful response, such as 'How do you think I could improve?' or 'Is there anything that you think I could do better?'

Attend a performance appraisal meeting

- ▶ These meetings are often scheduled every 6–12 months and can give you and your manager a chance to reflect together on your performance and whether you are meeting the required standard of work.

Attend training

- ▶ There are always things we can learn from attending regular training sessions. Many agencies, such as Alzheimer's Australia, run free public information sessions that can help you to improve your practice.

Example

Monitor own work

Miranda is new to her job role and wants to do the best she can in her work. She asks her supervisor regularly about how she is doing, but she gets the same response every time: 'Great!' Miranda would really like to grow and learn and she knows she can still learn new skills. She is aware that one of the Aged Care Accreditation Standards relates to providing good oral hygiene, but she is not sure she is meeting this requirement in particular, since she has had no training in this area. So she asks her supervisor to set aside some time for a short meeting. This time she asks questions that will be of more help to her:

- ▶ 'I love my job but would like to keep learning more. Are there any new skills you think I could benefit from using?'
- ▶ 'What do you think are my strengths and weaknesses in my work, and how could I improve on them?'
- ▶ 'I would really like to learn more about oral care. Are there any training opportunities that you think could improve my abilities in this area?'

This time Miranda is given some helpful, constructive areas for improvement and she continues to learn and consider her own work practices.



Practice task 15

1. Locate the standards that apply to the Aged Care industry. What are they called?

2. There are 44 outcomes listed within the standards. Choose one of these Standards that would apply to your own work role and write the name of the outcome down.

3. Explain how you could monitor your own performance against this standard, giving three examples of how you could do this.

Click to complete Practice task 15

3B Involve the person in discussions

Support activities are the agreed methods outlined within an individualised plan that the worker, organisation and others are going to support or provide to assist in meeting the person's goals and needs.

A person's needs and goals can change. It is therefore important that the support activities that have been agreed to are documented, regularly monitored and reviewed to ensure they are still meeting the needs and goals of the individual person.



Check support meets the person's needs

In order to know if activities are still meeting the needs of the individual, it is important to know them well, their needs and any changes in their circumstances. Talking to the person directly is the best way to do this. You might also suggest that a meeting might be held with the person's family in attendance if you feel they would like that support.

Below are some questions that can assist in a discussion with the person about their existing support strategies.

Questions to ask about existing support strategies

- ▶ Are you happy with the support you are currently receiving?
- ▶ Is there anything you feel you could do more independently if you had the support to learn and practise?
- ▶ Is there anything that you feel you are not coping as well with now, that you would like more support with in future?
- ▶ What would you like to do more of in your life?
- ▶ How do you feel that the service could be improved?

Example

Involve the person in discussions

Mrs Richmond is a 71-year-old woman. She has always cooked her own meals and baked cakes and scones for herself, her family members and friends. Lately she has been experiencing some memory loss. Staff recently discovered that she had forgotten to take things out of the oven and they have become burnt and set off the smoke alarm. Her current supports involve some help with cleaning and assisting her with shopping.



The support workers talk to Mrs Richmond in a way that is sensitive and understanding. She admits that she is starting to forget things more often and that it is worrying her. The workers notify their supervisor that there may need to be some changes made to Mrs Richmond's individualised plan and her supports. A meeting is arranged with Mrs Richmond to discuss the possibility that she may need further help at home. The supervisor asks her questions about what she would like help with, and Mrs Richmond tells them how cooking has always been a part of her life and that she would be lost without being able to bake. The supervisor arranges a GP visit, so that her funding can be increased to include more support from the service, as well as some additional safety aids being fitted to her kitchen.

Practice task 16

Reread the previous example about Mrs Richmond.

What three questions could be used to ask Mrs Richmond about how she is going and whether her supports need to change? Write your three questions as if you were talking to Mrs Richmond, and make sure that you are using a sensitive approach to her needs.

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Click to complete Practice task 16

3C Identify aspects of the individualised plan that might need review

An individualised plan needs to reflect the current situation, needs and goals in an individual's life. Life circumstances for any person change from year to year, even from month to month. An individualised plan for a person with support needs must be reviewed regularly to ensure it reflects their current circumstances and needs. Aspects that might need review include the following points.

Changes in the person's abilities or health

- ▶ If a person's abilities or health status changes, their capacity to participate in the agreed support activities may be affected. If their health or abilities improve, the person may no longer require the services they are receiving or some support activities may no longer meet their needs. If their abilities or health deteriorates (temporarily, progressively or permanently) they may not be able to engage in the agreed support activities and additional services may be required.
- ▶ **Example**
Jeremy is 58 years old and has multiple sclerosis (MS). His needs when his MS is affecting him are vastly different from when he is in remission. Jeremy's support activities and individualised plan need to be reviewed and changed to reflect his changing needs.

Changes to the person's lifestyle or living arrangements

- ▶ Support activities should assist to maintain independence by allowing a person to remain living in their own home or by providing the means for an individual to participate in their community, even when their life situation changes.
- ▶ **Example**
Barbara is 47 years old and has Down syndrome. She lived with her mother who recently died. With her mother's assistance, the support activities documented on her individualised plan were sufficient for Barbara. Now that Barbara is without her main family support, her support activities need to be altered significantly to enable Barbara to maintain her independence.

Problems with the person's ability to cope

- ▶ Support activities may assist a person to access their community, develop or maintain social networks, meet cultural or spiritual needs and engage in meaningful activities. If this is not happening, then plans may need review.
- ▶ **Example**
Nikola has two children with disabilities and is entitled to a number of support worker hours each week. Nikola found that while her children were on respite she spent all the time cleaning the house and she still was not getting a break. Nikola has negotiated to instead receive home support and less respite. Nikola feels much less stressed now and appreciates the time she can spend with each child.

Communicate changes to your supervisor

Once the need for review of an individualised plan is identified, many organisations require that this review need is communicated to a supervisor or coordinator. The supervisor can then arrange an assessment and follow up with a formal review of the plan if required.

The way this is communicated will depend on an organisation’s protocols and procedures. Verbal notification may form part of the process, perhaps as a matter of courtesy or to flag impending action, and be either face to face or by telephone.

A written report may be required and could be a combination of:

- ▶ writing in progress reports or case notes about the need to change or review the plan
- ▶ filling out a monitoring form to notify your supervisor in writing
- ▶ completing a section in the support plan where you can make notes about the need to review or change the plan.

Example

Identify aspects of the individualised plan that might need review

Ricky is eight years old and has Down syndrome. He is unable to perform most of his own personal support tasks. Ricky loves having his shoes and socks off, and has always needed someone to put them back on for him when he goes outside or is ready to go home.

Ricky’s individualised plan states that staff should provide full assistance to Ricky when he requires his socks and shoes to be put on.

Today when support worker John is getting Ricky ready to go outside and play, he notices that Ricky has found his socks by himself and managed to get them half way onto his feet. He cannot pull them up properly, but has at least got them part way on. John notes this observation in Ricky’s case notes, and let’s his supervisor know that the support plan needs updating. Consequently Ricky’s plan is changed to instruct workers to encourage Ricky to put his own socks on and assist only when he has done as much as he is able.

Practice task 17

1. Give two examples of reasons why an individualised plan might need review.

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2. Who should be informed if a person’s support needs change?

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3. Where could you document the need to review the plan? Give one example.

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Click to complete Practice task 17

3D Support the person's self-determination



Self-determination refers to the right of individuals to have full power over their lives and to be able to make independent choices about decisions that affect them. Each individual receiving service is an expert on their own needs.

Models of service delivery, or the way that services are provided, are changing to reflect this need for self-determination. In the past, services were often provided with the main focus being on the efficiency of staff in systematically completing a checklist of tasks within a time frame. Less regard was paid to the individual, and more to

the needs of the organisation's routines. Group activities were more focused on the interests that it was assumed would suit that age group, without considering individual differences. While there are still cost constraints that guide the way services are provided, we are becoming closer to much more individualised approaches and service models that respect self-determination.

Self-determination

The role of the community worker or coordinator working with older people and people with disabilities is that of a facilitator, supporting and assisting people to make decisions about their individualised plan and the services they receive. People must have the opportunity to participate in making choices about their service. Never tell a person what you think they need without explaining the options to them and consulting them for their views.

Everyone has decision-making rights that must be upheld. If a person is able to verbalise their choices and preferences, you should ask questions about what they prefer to remind the person that they are in control.

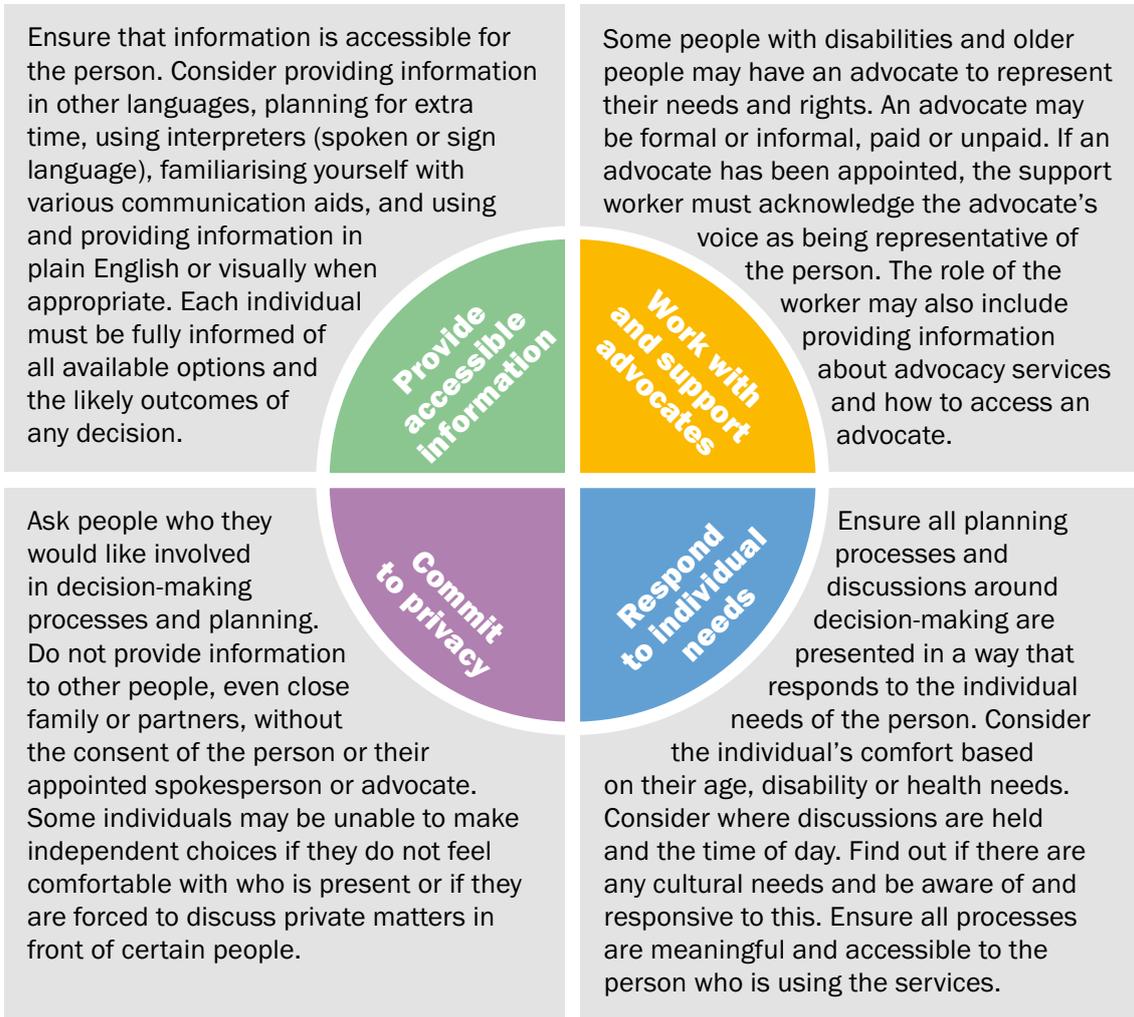
If a person cannot communicate, there are still ways to ensure that you are following the person's own preferences to the best of your abilities.

Support self-determination in people who cannot communicate by:

- ▶ observing the person's gestures, body language, vocalisations (sounds) in response to different activities or preferences and recording these for others to refer to in future as well
- ▶ asking other staff and the person's family about what they think the person prefers
- ▶ referring to a communication dictionary if the person has one, as this can provide clarification of some of the person's common gestures and sounds
- ▶ considering the person's past and using this as a guide to what they might prefer. If a person has dementia, but used to enjoy gardening, an activity could be built based on this past enjoyment.

Role of the worker

There are a number of tools and strategies workers can use in order to work in a way that supports self-determination and draws on the expertise of the individual. Here are four commonly used and effective approaches.



Service models that support self-determination

A service model changes the way we think about, talk about and act towards people using services. They should drive all of the organisation's processes related to service delivery, including the way that plans are written and followed. A service might use one or more model to underpin the way that support is provided. Here are some examples of service models currently used in the community sector.

Active service model

This model is a relatively new approach that changes the focus of services from doing things for a person, and instead doing things together with them. The active service model (ASM) approach believes that most people have the ability to learn new things and to reach goals towards independence. ASM plans are usually written in a format that includes goals, written together with the person; strategies or actions to help support the person to reach the goals; and target dates where the person's achievements towards the goals are reviewed.

Person-centred approaches

Used across most community services organisations and written into the standards across each sector, person-centred approaches are those that focus on the person as a unique individual, rather than one of many. Person-centred plans are written in a way that approach support needs with consideration of the person’s culture, age, interests, preferences, and other needs. No two plans should ever look alike.

Consumer directed care

This approach is being introduced into many community care settings as way to provide people with more choice about the way their support funding is used. A person is assessed as requiring a certain level of funding, but they can choose the services to provide supports, the types of supports they prefer, and the number of hours they would like to use with each service. For example, a person might choose two hours of support to travel to a community centre to pursue their favourite activity with the help of a private Home and Community Care provider, and use a further two hours on home help services from the local council.

Example

Support the person’s self-determination

Mr Nguyen’s wife of 40 years has died recently. While he is physically able to live independently, Mr Nguyen has arthritis and is finding it hard to cope at home. His wife was the one who did the cooking and cleaning. He does not have family members who can do these things for him and boiling an egg or making toast are the limits of what he is able to do for himself. He has never used a washing machine or a vacuum cleaner. In the past, a council service might have taken over these tasks and continued to do them for him, without regard to his long term abilities or potential for independence.



Under the Active Service Model, an assessor spends some time talking to Mr Nguyen about his needs and abilities. Together with Mr Nguyen a goal focussed plan is put together. It sets goals that include having support staff teach Mr Nguyen to wash his clothes in the machine, cook a simple dinner and pay his bills at the post office.

Practice task 18

1. Briefly explain what the term self-determination means.

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2. Give two examples of ways you could support self-determination in a person who cannot communicate.

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Click to complete Practice task 18

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3. Give two examples of service models that support self-determination.

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Summary

1. It is important to find ways to continually monitor your own work practises and to see where and how they could be improved.
2. You can measure your own work practices against the standards written for your sector.
3. Monitoring the effectiveness of supports should involve discussion with the person about how they feel about the services they are receiving.
4. Plans might need review for a number of reasons, including changes in the person’s health status or abilities, changes to the person’s living situation or problems the person has in coping.
5. You should inform your supervisor when you feel a plan might need to be reviewed so that an assessment can be arranged.
6. Self-determination is the person’s right to make independent choices.
7. The active service model, consumer directed care and person-centred approaches all support self-determination.

Learning checkpoint 3

Monitor support activities

This learning checkpoint allows you to review your skills and knowledge in monitoring support activities.

Part A

Read this case study and answer the questions that follow.

Case study

Joy is 85 years old and recently had a stroke. Joy's speech has been significantly affected by the stroke and she walks using two sticks and tires easily. She lives on her own in an independent living unit that is on the same site as a residential aged care facility. Until the stroke Joy was very independent and did not require much support from the organisation who manages her unit.

Just before her stroke, Joy's individualised plan was reviewed and is not officially due to be reviewed again for another ten months. Her plan focuses mainly on services that she was receiving, such as home care to help with cleaning and transport to assist her to continue to participate in the community.

Everything happened quickly after the stroke; new services have been organised to assist Joy, including personal care. Joy has had the same home care worker, Jasmine, for a number of years. Jasmine is one of the few people who can understand some of Joy's speech. Joy has indicated to Jasmine that she feels lonely and is missing going out. No-one has really thought about this, and it has been assumed that Joy is not up to going out while she is recovering. Jasmine has noticed many half-eaten meals when she has emptied the bins. There are other changes that Jasmine has observed in the last few weeks. Jasmine talks to Joy and then suggests to her coordinator that Joy's individualised plan be reviewed.

Before the review meeting, Jasmine's coordinator, Philip, visits Joy and works out the best way for the review to take place. They decide the meeting will be held at Joy's home so that she does not have to travel, which may tire her. The review is set for 10 o'clock in the morning when Joy's personal care and breakfast are finished and she has the most energy. Pen and paper will be provided so Joy can write her responses and extra time has been allocated to the review meeting to enable this.

1. What questions would you ask to gain more information about a person's satisfaction with support services, so that you can ensure services are meeting their needs.

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2. What parts of the plan seem to need review?

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3. How would you ensure that these aspects of the plan are followed up and reviewed?

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4. Explain the meaning of the term self-determination.

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5. How can you ensure that any discussion in the review process could be done in a way that supports self-determination?

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6. Suggest three ways that you could use to check that your own work is meeting a high standard.

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Part B

Provide a definition of the following service delivery models:

1. Active Service Model

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2. Person-centred approaches

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3. Consumer Directed Care

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Topic 4

In this topic you will learn how to:

- 4A Maintain confidentiality and privacy**
- 4B Comply with reporting requirements**
- 4C Identify and respond to situations of potential or actual risk**
- 4D Identify and report signs of additional or unmet needs**
- 4E Complete and maintain documentation**
- 4F Store information**

Complete reports and documentation

Accurate and up-to-date record-keeping underpins quality service provision that meets individual needs. Actions are documented in a way that increases accountability and duty of care. Completing documentation and reporting is an essential role of support workers and coordinators. There are many different types of documentation and reports used in aged care, disability services and home and community care settings. These documents may relate to service users, staff and to the organisation and its operations. Support workers need to be aware of and abide by legislative requirements, policy requirements and organisational protocols about how documentation and reports are completed, maintained and stored.

4A Maintain confidentiality and privacy

Privacy refers to a person's ability to control access of others to themselves, their space and their possessions, including information about themselves. Privacy also means taking steps to avoid embarrassment and humiliation.

Confidentiality is about data or information, not people, and refers to managing access to private information. Confidentiality provisions restrict an individual or organisation from using or disclosing information about a person that is outside of the scope for which the information was collected.

Confidentiality includes how information is:

- ▶ collected
- ▶ stored, and for how long
- ▶ destroyed when it is no longer needed
- ▶ accessed and released to other parties.

Privacy, confidentiality and disclosure

When discussing a person's situation, always be aware of maintaining their privacy. You must protect confidential details. You always need the person's consent if you wish to talk about their situation. Often people are happy to give their consent because they know you want to help.

Maintaining confidentiality is part of respecting a person's privacy and individual rights. In practice, confidentiality means not discussing an individual's personal information unless they have given their consent for this to happen. Disclosure is the requirement in some exceptional situations to disclose private information but this is generally only when you become aware that someone may be harmed. For example, if a person tells you that they are having thoughts of self-harm, or that they are driving a car without a licence, but asks you not to tell anyone, you have a duty of care to tell you supervisor.

You can read more about privacy, confidentiality and disclosure at the following websites:

- ▶ <http://aspirelr.link/aacqa-privacy-policy>
- ▶ <http://aspirelr.link/law-handbook-privacy-confidentiality>

What the law says about privacy

The *Privacy Act 1988* (Cth) outlines principles for handling personal information that applies to Australian Government departments and private sector organisations throughout Australia. In addition, each state and territory has their own laws governing privacy. Privacy legislation and principles govern the collection, use and storage of people's information.

Any information that could identify a person must be kept confidential. This could mean names, addresses, dates of birth or description of identifying attributes. Workers must be aware that even if they are being careful to avoid using names in order to maintain confidentiality, a description of a person's features or condition may provide enough information to be identifying. Consider the following guidelines when managing confidential information.

Guidelines for managing confidential information

- ▶ Ensure you have a valid reason, and the person's consent, for collecting, storing or distributing any personal information.
- ▶ Keep personal information in locked filing cabinets and password protected electronic files.
- ▶ Limit access to files and information.
- ▶ Restrict written records from being removed from the organisation's grounds; for example, do not take a person's file unnecessarily on a home visit and avoid leaving confidential information unattended in a car or bag.
- ▶ Know and abide by the organisation's confidentiality policies and procedures.

Example

Maintain privacy and confidentiality

Tony is assisting Lara with her personal care. Lara has to go to hospital for an operation and expects to be away from home for two weeks. She is worried about who will feed her cat and water her indoor plants.

Tony sees Lara's neighbour as he is leaving and tells him about Lara's operation and that she needs someone to help with the cat and the plants while she is away. The neighbour says he is happy to help. Tony runs back inside and tells Lara that he has told the neighbour about her trip to hospital and that the neighbour will help.

Lara turns white with rage. She says, 'The neighbour is a nosy parker, always going through my mail and checking through the windows. I don't want him knowing my business.' Tony has broken Lara's right to privacy.



Practice task 19

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

Case study

Margot is a support worker. She is at the local pub having a drink. She sees a support worker from another agency and says, 'John, I've been meaning to ask you about Sam Morrison. He is giving me a great deal of trouble! How do you handle people with autism?'

1. What has Margot done incorrectly?

.....
.....

2. What should Margot have done?

.....
.....

[Click to complete Practice task 19](#)

4B Comply with reporting requirements

Reporting and documentation requirements in aged care, disability care and home and community care settings can be extensive. Below are three important legal reasons for accurate record-keeping.

Communicating between staff

- ▶ Records and documentation may identify the person's needs; act as a guide for planned action; and provide a reference point to ensure the person is receiving the required services, particularly if several workers support them.

To provide evidence that you are following standards

- ▶ Written records provide evidence that actions have been performed and give an account of procedures that have been followed. Passing on documentation regarding changes in individuals, incident reports or hand-over records may also assist in meeting individual duty-of-care requirements. Documents can provide evidence of the actions you have taken in the event of an incident or accident.

To meet funding requirements

- ▶ Another reason for complying with organisational reporting and recording requirements is to demonstrate accountability to service users, funding bodies, government and other stakeholders. Service providers receiving government funding must complete and maintain records that demonstrate compliance with department expectations and benchmark standards. Inaccurate or ineffective reporting and documentation may impact an organisation's professional reputation.

How to report

You need to be aware of how to report changes to a person's needs. Your workplace will have policies and procedures that you should follow when reporting an issue.

Formal reporting involves completing formal procedures such as incident reports, monitoring forms, or file notes about something you have seen, heard or have concerns about.

Informal reporting usually involves communicating to your colleagues or supervisors about a person's progress or changes. Some details of ways to report changes to a person's needs follow.

Reporting methods



Report verbally

In your workplace, all issues related to service provision where needs are not being met, need to be reported verbally to the supervisor. They are usually the best person to talk to first, and can give you advice about what to do. If your supervisor is unavailable, another supervisor or senior manager may be able to help.



Report in person

You may need to report issues related to an individual in person; for example, at a team meeting or by arranging a meeting with your supervisor. You may have a case meeting about a person in receipt of services, where you meet with a number of workers and professionals together.



Report in writing

Every workplace will have various ways to report in writing; for example, case notes and progress notes may be used to record the level of care given. They may also be used to report issues observed and actions taken by workers.

Communication books are used to share information with family members or carers. They may report minor issues, pose questions of family members/carers, document observations and record tasks performed for family members/carers.

Verbal reports

Whether reporting via the phone or in person, always keep file notes on what you reported. If you are working in an aged care facility, you will need to add a file note or continuation note to the person's file. If you are working in the community, you will need to keep a note in your diary or in a folder on your computer. Always date and sign your file notes.

Information to record in a file note:

- ▶ Details (facts) of what occurred
- ▶ Information of where the incident took place
- ▶ Date and time and who was involved
- ▶ Action taken by you or someone else

Written reports

Case notes, progress notes, communication books and incident reports are written reports. Each workplace may have its own style and preferred way of communicating information. It is important to record only the facts. Opinions can be subjective and it is not up to support workers to diagnose a problem or issue. Opinions can also be offensive to a person.

Contents of written reports

- ▶ Your full name
- ▶ Your place of work
- ▶ Date and time the issue presented
- ▶ Date and time the report was made
- ▶ Action you took
- ▶ Action taken by anyone else
- ▶ Details of what happened or what the issue is
- ▶ Facts rather than just your ideas, views or thoughts

Mandatory reporting

Certain professionals and people working in specific sectors are required by law to report cases of suspected child sexual or other types of abuse to a government body or to the police. This is called mandatory reporting, and is different than reporting internally to your supervisor. As the legislation varies greatly across Australian states and territories, it is important to understand your own obligations. For example, in the Northern Territory, it is mandated, or required by law, that any adult who suspects any type of child abuse on reasonable grounds must make a report to the police or relevant government body. In most other states, this law is only applied to people working in certain job roles, such as teachers, doctors or nurses.

However, even if you are not mandated by law to report cases of suspected or actual abuse or neglect of children, older people or people with a disability in your own job role, you can still make a report to your supervisor, the police or to the relevant government department in your state.

You can find out how this law is enacted in your own state or territory at:
<http://aspirelr.link/mandatory-reporting-child-abuse>

Example

Comply with reporting requirements

You must follow your organisation’s reporting requirements by completing standard forms or documents.

Here is an example of a file note.

Link Chain Attendant Care
File note
Name: Bea Reardon
Support was provided today as per individualised plan. Bea appeared very sad today. She also appeared uninterested in eating breakfast, or taking a shower and getting dressed. I asked her if anything was wrong and she told me her neighbour and close friend, Millie, had a serious stroke last week and is in hospital, and probably will not be able to return home. She says it makes her worry more about being alone and what might happen if she became unwell or had a stroke. She says she worries that she could be lying on the floor for days before someone found her. I made Bea a cup of tea and reassured her about her safety. I reported my concerns and our conversation to my supervisor, who will arrange visits from the GP and a social worker. She will also arrange for a personal alarm for Bea.
Name of support worker: Kerrie Burns
Date: 16/08/19

Practice task 20

1. Name two legal reasons for reporting.

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2. What types of reporting might you use to communicate a problem to a supervisor? Give two examples.

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3. Research the mandatory reporting laws via the following link, and provide a short summary of how they apply in your own state or territory. This information is available at: <http://aspirelr.link/mandatory-reporting-child-abuse>

.....

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4. Why is it important only to record facts rather than your opinion?

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Click to complete Practice task 20

4C Identify and respond to situations of potential or actual risk

Safety is vital in every workplace. Safety in aged care and disability work applies to both the person being supported and the support worker. Work health and safety (WHS) laws impose a duty of care on employers to provide a safe working environment and protect the health and safety of their employees. All support workers, coordinators and managers are obliged to take care while undertaking their work and have WHS responsibilities to themselves and to others.

Aged care and disability agencies will have a WHS policy that reflects the requirements of state or territory and federal legislation. Support workers will be introduced to their employer's WHS policy and procedures on induction and must remain aware of and abide by their organisation's WHS policy.



The role of the support worker is to be observant and to recognise, respond to and report risks. Situations of risk may be environmental, physical or behavioural. It is important that you are constantly aware of problems that might pose risk, such as being aware of trip hazards in the environment, and being aware of any changes in behaviour that are uncharacteristic.

Identify risks

Every time you enter the work environment you must observe any changes in the person or the environment that could pose a new risk. When visiting a person for the first time, organisations will often provide a WHS assessment to be completed by the support worker.

Identifying potential risks is an important aspect of maintaining safety in the workplace for everyone. Workers should be constantly alert to identifying potential risks.

Here are some strategies to assist in identifying risk.

Formal checklists, safety audits and assessments

- ▶ These can be completed when commencing work with a new person or in a new environment and can also be reviewed annually.

Making daily informal observations

- ▶ Making daily informal observations and being alert to any changes in environments or individuals that may indicate new or different hazards or levels of risk.

Maintaining accurate and up-to-date records to manage risk

- ▶ Incident reports, hazard reports and file notes should be completed accurately, in a timely manner and processed according to organisational policy.

Getting to know individuals well so that you can easily become aware of subtle changes

- ▶ Being aware of any changes in the person or their situation is invaluable in terms of assisting support workers to recognise any changes to levels of risk or new hazards in the person's situation.

Respond to risks

Identifying and responding to risks is an ongoing process. Support workers and coordinators need to be vigilant in looking for risks and hazards in all the tasks and environments that they are involved in. Exposure to risk is one of the elements that increases the probability of harm or injury occurring. Timely response and follow-up is an important aspect of minimising the impact of potential risks.

A worker's response to risk will depend on the nature of the situation, the severity of the risk and any further risks associated with intervening. Any response by a support worker to a situation of risk must be aligned with the organisation's policies and procedures.

If you identify a workplace risk or hazard, there will be a process to follow in reporting it. Refer to your workplace policies and procedures for guidance, contact your health and safety representative or ask your supervisor.

Here are examples of a range of responses to risk.

Calling emergency services

- ▶ Example: Phoning the fire brigade, police or ambulance services.

Moving self and others away from hazard

- ▶ Example: Following the organisation's evacuation plan or moving people away from someone who is acting aggressively.

Removing the hazard or intervening immediately

- ▶ Example: Cleaning up a spill or intervening in an inappropriate behaviour.

Implementing a short-term, temporary response

- ▶ Example: Blocking access to a hazardous area.

Reviewing organisational policy and protocols

- ▶ Example: Changing policies to make manual-handling or medication training mandatory for all direct care staff.

Reviewing and changing procedures or service delivery

- ▶ Example: Changing an individual’s support plan to incorporate a hoist transfer rather than lifting or changing the venue of a program.

Risk management strategies

All support workers have an obligation to contribute to a safe workplace. Risk management is about being proactive and reducing the chance of injury or harm before it occurs.

You can contribute to risk management by:

- ▶ being aware of and abiding by WHS policy
- ▶ being observant of any changes and potential risks and hazards
- ▶ reporting risks and hazards promptly, following organisational protocols
- ▶ using personal protective equipment (including clothing, gloves and aprons) when required
- ▶ being a competent user of technology that supports WHS (such as mobile phones, security alerts)
- ▶ talking to others about safety, especially raising and following-up safety concerns
- ▶ ensuring knowledge of and training in manual handling is relevant and up to date
- ▶ managing hazardous substances in accordance with directions or workplace policies
- ▶ following universal precautions for infection control, including hand-washing.

Example

Identify and respond to situations of potential or actual risk

Here is an example of an incident report form.

<p>Incident report form Date of report: 29 May 2019 Person reporting hazard: Marina Pappas Names of people involved: Joe Chalmers Location of hazard: Joe’s bathroom, at home.</p>
<p>Description of hazard (include area and task involved and any equipment, tools, people involved): When assisting Joe with his shower today, I noticed that the tiles on the wall of his shower are loose and may fall off the wall if knocked.</p>
<p>Immediate or suggested actions (list any suggestions for reducing or eliminating the problem): I showed Joe and his carer the area where the tiles are loose and ensured they understood the risk and agreed not to enter the shower without supervision. I placed a large printed notice on the door of the shower to remind him not to enter. I wrote a note in the communication book to alert other support workers and the rest of the family of the risk. Reported to supervisor via phone.</p>
<p>Person incident reported to: Wendy Stewart, Home Services Team Leader</p>
<p>Signature: Marina Pappas</p>

Practice task 21

1. Give three examples of ways that you can take part in identifying risk.

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2. Should your response to every risk be contacting your supervisor? Explain.

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3. Whose role in the organisation does risk management belong to? Give the person's job title.

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[Click to complete Practice task 21](#)

4D Identify and report signs of additional or unmet needs

Most of us have needs that are complex and varied. While there are many needs common to all of us, people at different life stages and ages can have changing needs. Our common needs as humans can be broken down by looking at a holistic model. Holistic approaches look at the whole person, not just at their physical needs, as services may have done in the past.

Here are descriptions of different types of needs.

Physical needs

Physical needs are our most basic areas of need. They include the need for food, shelter, personal hygiene, mobility, and sleep.

Emotional/psychological needs

These include our need to feel self-worth, to have a purpose, and to enjoy life free from worry or stress.

Social needs

Social needs include interaction with others, being able to talk, help others and to feel a part of a community.

Intellectual needs

Sometimes called higher order needs, this involves our need to think and reason, and take part in activities that challenge our intellect. This can include the need to plan, keep order, be challenged, read, talk and learn.

Cultural and spiritual needs

Cultural needs include activities, beliefs and behaviours that are important to the individual based on their own background or religious beliefs. Spiritual needs can sometimes involve the need to find peace with one's place in the world or seeking out a higher being.

Sexual needs

Sexual needs don't just involve the need to have sex, but can include the person's self-image, gender identity, respect for sexual preferences, companionship and intimacy.

Unmet needs

Some of the signs that a person might have unmet needs include the following.

Signs of unmet needs

- ▶ Talking to you frequently about things they would like more of in their life, such as missing social interaction with others.
- ▶ Indications from family that the person has other needs that are not being met.
- ▶ Signs of withdrawal, frustration, anger, depression, or lack of interest in everyday life.
- ▶ Overdependence on activities that might be substituting unmet needs, such as being too dependent on friendships with support staff, dependence on alcohol or other substances, disinhibited or reckless behaviours such as overspending.
- ▶ Signs of neglect within the person's physical environment or of themselves, such as poor hygiene.

Report additional and unmet needs

If the individualised plan does not address a need that you feel should be included, and the need is something that you could meet, such as supporting the person to practice a cultural activity like prayer, the person's needs should be assessed and their plan revised.

Other needs can be outside of our organisation's scope to help with, but there are usually other places or services that can support a person to meet holistic needs. If you are unable to meet their need, or deliver the support required, contact your supervisor to discuss the person's needs.

Support the person to access services or groups such as:

- ▶ community initiatives and council run groups such as social groups and community transport
- ▶ support from professionals such as psychologists and counsellors
- ▶ cultural groups and church groups
- ▶ charitable organisations who can help with food, money and provide volunteers to spend time with a person
- ▶ self-help groups to help support a person through illness, disability, problems with substance abuse, gambling and other difficulties
- ▶ specialist medical referrals.

Example

Identify and report signs of additional or unmet needs

Mrs Thomasetti has always been a glamorous, if quiet and withdrawn lady. She lives alone and has some distant family overseas. Mrs Thomasetti has some early signs of vision impairment, and wears heavy glasses to compensate, but she seems to manage at home. However, she has begun to withdraw even more into her own company. She rarely goes out, and lately the staff have been noticing large number of empty beer bottles around her flat. She has stopped paying attention to her hair and clothes in the way she used to do. Julia has been concerned about Mrs Thomasetti, and although she doesn't know the reasons, she feels that she may be suffering from depression.

Julia recognises this as outside of her own abilities to manage, and so she talks to her supervisor about her concerns. Her supervisor feels she might be lonely, and arranges for a volunteer from St Vincent de Paul, a local charity, to visit her on a regular basis. The volunteer shares Mrs Thomasetti's love of literature, and reads to her every second day. She also organises for Mrs Thomasetti to borrow talking books from the library. Having rekindled Mrs Thomasetti's love of reading, and helped her to overcome the problems she had in reading fine print, the volunteer continues to visit and Mrs Thomasetti has become more animated and happy.

Practice task 22

1. Name the six areas of holistic need.

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2. Give an example of a need that could be met easily within your everyday work, even if it isn't included on the support plan.

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3. Give an example of a sign of an unmet need that should always be passed on to your supervisor.

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Click to complete Practice task 22

4E Complete and maintain documentation



Many of the documents, reports and records completed by workers are considered a legal record of the support provided, and how the organisation manages matters such as work health and safety and infection control. Most government-funded organisations undergo regular audit evaluations, where records are examined to ensure work is carried out to the appropriate standard.

Different types of information may need to be documented at different times and several people may enter information on a single record. There

may be a weekly report on skills development of individuals, and a funding agency may require additional reports to be made monthly.

Complete documentation

Below are factors you need to consider when completing documentation.

Objective and factual

Professional standards require that reports and documents use objective language based on fact and observation. Objective language describes what has been observed or heard, while subjective language may be based on feelings, emotions or opinions. Objectivity is important for accuracy and accountability and ensures individuals are described in ways unaffected by judgments, stereotypes, assumptions or opinion.

Timely

The nature of a report or document, along with the expectations of the organisation determines the time lines and protocols for completion of reports. Reports such as funding submissions or statistical reports to government have externally set time frames. Internal documentation are dictated by urgency, organisational policy and the end use of the information. For example, file notes or case notes should be completed regularly so the most current information is always available.

Confidentiality of other parties

Often case notes, programming and incident reports include interactions that involve events with other people. Confidentiality must be maintained when writing notes or reports recorded in another person's files or records.

Language, jargon, acronyms

Each part of the community sector often has its own language and jargon. To ensure clarity and accuracy, use complete words rather than abbreviations or acronyms and plain English instead of jargon. Ensure language matches the needs of the intended audience.

Spelling

Spelling is another critical aspect of recording information. Spelling a person's name incorrectly may have a number of unintended consequences. Their data may be confused with another person's data leading to serious privacy breaches, confusion or duplication of records. Incorrect spelling of medical terms can cause confusion; for example, the treatments for and effects of hyperthyroidism and hypothyroidism are quite different.

Complete file notes

When completing workplace documentation, there are other points to consider. These points are particularly important for continuous records such as file notes or case notes.

Workplace documentation guidelines

Writing must be legible and comprehensible.

Completed documents should not be changed. If changes are made, clearly explain why and by whom. Computer-based records may be password protected.

Use the appropriate form. This helps other workers identify the required information. Make sure you have completed all sections and entries make sense.

Read information back to the person and/or their advocate to confirm its accuracy. This helps prevent mistakes that may take considerable time and effort to rectify.

Records should be signed and dated by the person completing them. Computer-based records may require a log-in to access records that identify the author.

Maintain documentation

Recording and documenting work is an ongoing task. Documentation should not be allowed to get out of date. It must be completed as the work is done to prevent errors or omissions. It could be required at any time by other workers, by your supervisor, government agencies or for legal proceedings.

Generally, records of past work are stored and maintained even if they no longer appear relevant, or have been superseded by more recent information. These documents may be required to assess changes in a person's needs over time, to demonstrate past support or to show a history of quality care.

In manual filing systems, the most recent information is usually towards the front of the file or section with older information stored behind it. Electronic or computer-based records show both current and past information.

Your workplace will have procedures and guidelines about how and when documentation is to be completed.

Example

Complete and maintain documentation

Complete documentation using objective (rather than subjective) language. Records must be kept safely and updated to reflect the person’s support needs and services. People receiving support and/or their advocates and family may access and read your documents so always be respectful and objective.

Subjective objective and factual information are compared below.



Subjective

- Mrs Smith is depressed.
- Tamara was nervous when I mentioned her parents.
- Mark is a drug addict.
- Mr Thompson is dirty and messy
- Alex acted aggressively.



Objective

- Mrs Smith is quiet and has been crying.
- When I asked Tamara about her relationship with her parents she looked down and twisted her hands and did not answer.
- Mark uses heroin regularly.
- Mr Thompson has left plates and food scraps on the kitchen bench and there are mice droppings nearby.
- Alex rose quickly, slammed the door and raised his voice saying, 'Get lost and leave me alone!'

Practice task 23

Rewrite the following phrases objectively. You can imagine some details if needed.

1. Sophia was up all night throwing tantrums.

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2. Peter is rude to staff and won't do anything we ask him.

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3. Richard becomes lazy at night, refusing to get himself dressed, and expects us to do everything.

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4. Mary has no idea about personal hygiene and her clothes are filthy.

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[Click to complete Practice task 23](#)

4F Store information



In any organisation there will be policies, guidelines and procedures about where reports and documents are to be stored and filed. Records must be stored in the correct place so they can be easily located and referred to when required.

Within each person's files, each type of record or document will be stored in the same place. For example, in a file you might find that personal information is always at the front, progress notes next, assessments behind that and payment records at the back.

Many community agencies use electronic systems that allow users to input all individual's details, referrals, assessments and case notes directly to a database. These systems may be password-protected, which limits access to authorised staff only.

Other types of documents such as incident reports, safety checklists and time sheets also have specific places where they are to be filed.

Collection, use and storage of information

There are 13 Australian Privacy Principles that apply to the collection, use and storage of people's information. Here is further information about how to handling personal information in line with these principles.

Collection, use and storage of personal information

- 1 Open and transparent management of personal information**
Ensures that organisations manage personal information in an open and transparent way.
- 2 Anonymity and pseudonymity**
Requires organisations to give individuals the option of not identifying themselves, or of using a pseudonym. Some exceptions apply.
- 3 Collection of solicited personal information**
Outlines when an organisation can collect personal information that is solicited. It applies higher standards to the collection of 'sensitive' information.
- 4 Dealing with unsolicited personal information**
Outlines how organisations must deal with unsolicited personal information.
- 5 Notification of the collection of personal information**
Outlines when and in what circumstances an organisation that collects personal information must notify an individual of certain matters.

- 6

Use or disclosure of personal information

Outlines the circumstances in which an organisation may use or disclose personal information that it holds.
- 7

Direct marketing

An organisation may only use or disclose personal information for direct marketing purposes if certain conditions are met.
- 8

Cross-border disclosure of personal information

Outlines the steps an organisation must take to protect personal information before it is disclosed overseas.
- 9

Adoption, use or disclosure of government-related identifiers

Outlines the limited circumstances when an organisation may adopt a government-related identifier of an individual as its own identifier, or use or disclose a government-related identifier of an individual.
- 10

Quality of personal information

An organisation must take reasonable steps to ensure the personal information it collects is accurate, up to date and complete.
- 11

Security of personal information

An organisation must take reasonable steps to protect personal information it holds from misuse, interference and loss, and from unauthorised access, modification or disclosure. An entity has obligations to destroy or de-identify personal information in certain circumstances.
- 12

Access to personal information

Outlines an organisation’s obligations when an individual requests to be given access to personal information held about them by the organisation.
- 13

Correction of personal information

Outlines an organisation’s obligations in relation to correcting the personal information it holds about individuals.

Example

Store information

Susan has received information from a support worker that a service user will be away for the next two weeks and will not need to be picked up by the day program bus. Workplace procedure says this information should be recorded in the person’s case notes and on the bus pickup whiteboard in the coordinator’s office.

Susan records the information as per the procedure. The bus driver now knows not to go to the person’s house and the coordinator knows the absence is expected, and does not need to check up on the person when he does not arrive for the day program.

Now, assume that Susan is in a hurry. Rather than recording the information in the file and on the white board, she writes a note and sticks it to the coordinator’s computer screen, assuming the coordinator will see it next time she is at her desk. The note falls to the floor as Susan leaves the office.

Practice task 24

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

Case study

Mariah has recently been diagnosed with a serious health condition. Details of this health condition are forwarded to her support service by Mariah's doctor. The coordinator reads the information while standing at reception but is distracted by a phone call. The coordinator leaves the paperwork on the desk at reception and one of the administrative staff, thinking the information is rubbish, throws it out with the standard rubbish. Later a new coordinator takes over Mariah's case. She makes decisions without taking into account Mariah's condition.

1. Identify what went wrong in this situation.

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2. What could be the possible consequences for Mariah?

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Click to complete Practice task 24

Summary

1. Privacy and confidentiality of personal information should be considered whenever you are supporting a person or when you are passing on information to others.
2. Reports can be made in several ways, including written, verbal and in meetings.
3. Reports should contain factual and timely information.
4. Mandatory reporting laws vary between state and territory. They require that certain workers or professionals report signs of child abuse to authorities.
5. WHS regulations require all workers to be responsible for safety.
6. Identifying risks is the first part of the risk management process. Risks can be identified through observation, using hazard checklists and becoming familiar with individuals you support.
7. Responding to risk can involve making changes to the environment, or reporting to a supervisor or other relevant person.
8. People have a wide range of holistic needs, including physical, cultural, social, emotional, sexual and intellectual needs.
9. Unmet needs can lead to problems such as withdrawal, changes in behaviour, or stated difficulties.
10. Unmet needs should be reported unless they can be easily addressed within the support plan.
11. Documentation should follow the organisation's procedures and comply with legal requirements.
12. Protocols for correct and accurate documentation include writing objectively.
13. Storing of documentation must observe organisation protocols and includes ensuring confidentiality.

Learning checkpoint 4

Complete reports and documentation

This learning checkpoint allows you to review your skills and knowledge in completing reports and documentation.

Part A

1. Assume you are coaching a new employee about the information requirements of your sector or organisation. Provide a detailed list that explains:

- the document or form that must be completed
- a brief description of the document
- when and how information should be recorded
- where the forms must be stored
- how the forms must be filed.

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2. Explain the meaning of the term 'mandatory reporting', and explain how this law applies to your organisation within your state or territory.

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Part B

Read the case study, then complete the tasks that follow.

Case study

Ms Harrold has slipped in her kitchen 15 minutes prior to your arrival. You have performed basic first aid and assisted Ms Harrold to her armchair to rest. She is calling out loudly and when you approach her to offer assistance she hits out at you, causing a bruise on your jaw.

Later when Ms Harrold is feeling better, you ask her if she knows what she slipped on. She tells you the fridge has been leaking water on to the floor for the last couple of months and that she usually puts a towel under the fridge to catch the water but this morning it seeped through the towel. She tells you that she cannot afford to get it fixed, but that she would like you to keep that to yourself.

1. List the documents you need to complete.

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2. Outline the purpose of this documentation.

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3. What would you do with the documentation once you have completed it?

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4. Explain which policies and procedures you need to be aware of when responding to this situation.

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5. Discuss how you will maintain Ms Harrold's confidentiality when making a report regarding this situation.

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6. Outline what you would document in a report to explain what you have observed. Make sure your record is factual and objective.

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7. Do you think the leaking fridge should be reported to your supervisor? Why or why not?

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8. How would you respond to the immediate problem of the leaking fridge?

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