

Provision of Supports Policy

1. Introduction

1.1 Purpose

This Policy and the Policies and Procedures and related documentation set out in section 1.5 below (**Related Documentation**) supports Centre for Inclusive Supports to apply the Access to Supports, Services Agreements with Participants, Support Planning, Responsive Support Provision and Transitions to and from the provider NDIS Practice Standards.

1.2 Policy Aims

Centre for Inclusive Supports is committed to ensuring that:

- (a) Each participant accesses the most appropriate support that meets their needs, goals and preferences.
- (b) Each participant is actively involved in the development of their support plans. Support plans reflect participant needs, requirements, preferences, strengths and goals, and are regularly reviewed.
- (c) Each participant has a clear understanding of the support they have chosen and how they will be provided.
- (d) Each participant accesses responsive, timely, competent and appropriate support to meet their needs, desired outcomes and goals.
- (e) Each participant experiences a planned and coordinated transition to or from the provider.
- (f) Each client accesses support in a safe environment that is appropriate to their needs.

1.3 NDIS Quality Indicators

Centre for Inclusive Supports aims to demonstrate each of the following quality indicators through the application of this Policy and the relevant systems, procedures, workflows and other strategies referred to in this Policy and the Related Documentation:

Access to Supports

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- (c) Each participant is supported to understand the circumstances in which support can be withdrawn. Access to support required by the participant will not be withdrawn or denied solely on the basis of a dignity of risk choice that has been made by the participant.

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Services Agreements with Participants

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

Support Planning

- (i) With each participant's consent, work is undertaken with the participant and their support network to enable effective assessment and to develop a support plan. Appropriate information and access is sought from a range of resources to ensure the participant's needs, support requirements, preferences, strengths and goals are included in the assessment and the support plan.
- (j) In collaboration with each participant:
 - (1) risk assessments are regularly undertaken, and documented in their support plans; and
 - (2) appropriate strategies are planned and implemented to treat known risks to them.
- (k) Risk assessments include the following:

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- (1) consideration of the degree to which participants rely on the provider's services to meet their daily living needs;
 - (2) the extent to which the health and safety of participants would be affected if those services were disrupted.
- (l) Periodic reviews of the effectiveness of risk management strategies are undertaken with each participant to ensure risks are being adequately addressed, and changes are made when required.
 - (m) Each support plan is reviewed annually or earlier in collaboration with each participant, according to their changing needs or circumstances. Progress in meeting desired outcomes and goals is assessed, at a frequency relevant and proportional to risks, the participant's functionality and the participant's wishes.
 - (n) Where progress is different from expected outcomes and goals, work is done with the participant to change and update the support plan.
 - (o) Where appropriate, and with the consent of the participant, information on the support plan is communicated to family members, carers, other providers and relevant government agencies.

Responsive Support Provision

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

Continuity of Supports

- (t) Day-to-day operations are managed in an efficient and effective way to avoid disruption and ensure continuity of support.
- (u) In the event of worker absence or vacancy, a suitably qualified and/or experienced person performs the role.
- (v) Support is planned with each participant to meet their specific needs and preferences. These needs and preferences are documented and provided to workers prior to commencing work with each participant to ensure the participant's experience is consistent with their expressed preferences.
- (w) Arrangements are in place to ensure support is provided to the participant without interruption throughout the period of their Services Agreement. These arrangements are relevant and proportionate to the scope and complexity of supports delivered by the provider.

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- (x) Alternative arrangements for the continuity of supports for each participant, where changes or interruptions are unavoidable, are:
 - (1) explained and agreed with them; and
 - (2) delivered in a way that is appropriate to their needs, preferences and goals.

Transitions to and from the provider

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

Safe Environment

- (bb) Each participant can easily identify workers who provide support to them.
- (cc) Work is undertaken with each participant, and others, in settings where supports are provided (including their home), to ensure a safe support delivery environment for them.
- (dd) Where relevant, work is undertaken with other providers (including health care and allied health providers and providers of other services) to identify and manage risks to participants and to correctly interpret their needs and preferences.
- (ee) For each participant requiring support with communication, clear arrangements are in place to assist workers who support them to understand their communication needs and the manner in which they express emerging health concerns.
- (ff) To avoid delays in treatments for participants:
 - (1) protocols are in place for each participant about how to respond to medical emergencies for them; and
 - (2) Each worker providing support to them is trained to respond to such emergencies (including how to distinguish between urgent and non-urgent health situations).
- (gg) Systems for escalation are established for each participant in urgent health situations.
- (hh) Infection prevention and control standard precautions are implemented throughout all settings in which supports are provided to participants.
- (ii) Routine environmental cleaning is conducted in settings in which supports are provided to participants (other than in their homes), particularly of frequently-touched surfaces.
- (jj) Each worker is trained, and has refresher training, in infection prevention and control standard precautions including hand hygiene practices, respiratory hygiene and cough etiquette.

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- (kk) Each worker who provides support directly to participants is trained, and has refresher training, in the use of PPE.
- (ll) PPE is available to each worker, and each participant, who requires it.

1.4 Scope

- (a) This Policy applies to the provision of all services and supports at Centre for Inclusive Supports.
- (b) All permanent, fixed term and casual staff, contractors and volunteers are required to take full responsibility for ensuring full understanding of the commitments outlined in this Policy.
- (c) The relevant persons specified in the column corresponding to a procedure described in this Policy have the responsibility to implement the relevant systems, procedures, workflows and other strategies referred to in the relevant procedure.

1.5 Related Documentation

The application of the above NDIS Practice Standard by Centre for Inclusive Supports is supported in part by and should be read alongside the Policies and Procedures and related documentation corresponding to this Policy in the Policy Register.

2. Definitions

In this Policy:

Centre for Inclusive Supports means Centre for Inclusive Supports Inc. ABN 13 517 649 640.

Client means a client of Centre for Inclusive Supports (including an NDIS participant).

Key Management Personnel means Lenka Boorer, Kylie Power, Mary (Catherine) Greal, David Byrne, Kathy Harris. and other Key Management Personnel involved in Centre for Inclusive Supports from time to time.

Legislation Register means the register of legislation, regulations, rules and guidelines maintained by Centre for Inclusive Supports.

Other Support Services means services and supports delivered to you by other service providers.

Personal Support means the class of support referred to as assistance with daily personal activities in the NDIS.

Plan means the written plan developed with you and on your behalf by the National Disability Insurance Agency or their delegate (for example, your Local Area Coordinator).

Policy Register means the register of policies of Centre for Inclusive Supports.

Principal means Lenka Boorer.

Related Documentation has the meaning given to that term in section 1.1.

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Subject to a Significant Risk Factor means a Client that lives at home alone and is not receiving, from any other provider, Other Support Services that involve regular, face-to-face contact with the Client and one or more of the following applies:

- (a) the Client or the Client's plan indicates that the Client has limited or no regular, face-to-face contact with relatives, friends or other people with whom the Client is well-acquainted;
- (b) without the assistance of another person the Client has limited or no physical mobility;
- (c) the Client uses equipment to enable them to be physically mobile or to facilitate their physical mobility;
- (d) without the assistance of another person the Client has limited or no ability to communicate with others; or
- (e) the Client uses equipment to enable or facilitate communication with others, including to enable or facilitate the use of a phone or other device.

Worker means a permanent, fixed term or casual member of staff, a contractor or volunteer employed or otherwise engaged by Centre for Inclusive Supports and includes the Principal.

3. Policy Statement

3.1 Access to Supports

- (a) To be considered for a service or support from Centre for Inclusive Supports, potential Clients must:
 - (1) be a person with a disability of an age which Centre for Inclusive Supports is permitted to provide services pursuant to its NDIS registration;
 - (2) live proximately to Centre for Inclusive Supports's base of operations;
 - (3) be seeking to be assisted by Centre for Inclusive Supports in relation to a support or service which Centre for Inclusive Supports provides; and
 - (4) have a source of individualised government funding (i.e. they are an NDIS participant) or have a source of private funding.
- (b) Centre for Inclusive Supports will ensure that a potential Client wishing to access services or supports will be provided information about:
 - (1) the services and supports offered by Centre for Inclusive Supports;
 - (2) the price(s) or cost of each service and support;
 - (3) any access, entry and eligibility criteria in relation to each service and support;
 - (4) the circumstances under which supports can be withdrawn,

(Support Information).
- (c) Centre for Inclusive Supports will communicate with and provide a personalised, person-centred approach to the support needs of any potential Client wishing to access services or supports including by providing support to access Support Information in the language, mode of communication and

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terms that the Client is most likely to understand, by organising bilingual staff or an interpreter service to assist.

- (d) Centre for Inclusive Supports will ensure that each person seeking to use its services and supports will be assessed on:
 - (1) the defined access and entry criteria in this Policy and as specified in this Policy Statement and in the Procedures below;
 - (2) the organisational capacity and resources of Centre for Inclusive Supports to provide the requested services and supports to the Client and can otherwise effectively support the potential Client to meet their goals and personal needs;
 - (3) as far as reasonably practicable, an open and accountable process for assessing the eligibility and entry needs of potential Clients and the capacity of Centre for Inclusive Supports to meet their needs;
 - (4) subject to applicable law and this Policy and related Policies, non-discriminatory eligibility criteria and entry rules with respect to age, gender, sexuality, race, culture, religion, disability or other identifiers.
 - (5) any requirements of the NDIS Terms of Business for Registered Providers.
- (e) Centre for Inclusive Supports will review and discuss the Support Information and proposed support delivery environment with each potential Client and any family, carers, chosen community or advocate that the Client directs us to, to identify and minimise any barriers that would prevent it from being fit for purpose and to otherwise ensure each Client's health, privacy, dignity, quality of life and independence is supported.
- (f) Reasonable adjustments to the support delivery environment being made and monitored by Centre for Inclusive Supports to ensure it is fit for purpose and each Client's health, privacy, dignity, quality of life and independence is supported.

3.2 Service Agreements with Participants

- (a) Centre for Inclusive Supports will collaborate with each Client to develop a written Services Agreement which establishes expectations, explains the supports to be delivered and specifies any conditions attached to the delivery of supports, including why these conditions are attached.
- (b) Centre for Inclusive Supports will use the appropriate template Services Agreement as the starting point for the engagement between Centre for Inclusive Supports and Client. Template service agreements prepared for use by Centre for Inclusive Supports includes a general Services Agreement and a Support Coordination Services Agreement.
- (c) In particular, consideration will be given to the terms of the Services and Supports Schedule which forms part of the Services Agreement.
- (d) Centre for Inclusive Supports will provide Clients and their support network, support to understand their Services Agreement and conditions using the language, mode of communication and terms that the Client is most likely to understand including by:
 - (1) facilitating bilingual staff or an interpreter service to assist if required or upon request; and
 - (2) organising an advocacy service to assist if required or upon request.

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- (e) Centre for Inclusive Supports will use its best endeavours to ensure all Services Agreements are documented in writing and each Client receives a copy of their agreement signed by the Client and Centre for Inclusive Supports. In the unlikely event that a written Services Agreement is unable to be prepared, a record is made of the circumstances and reasons why a written agreement was not created and a record of the material terms of the service arrangement are recorded in the Client's Information File.
- (f) The Privacy Consent Form forms part of the Services Agreement between Centre for Inclusive Supports and the Client. The use of the Client's personal information including the sharing of personal information with other providers, including health care and allied health providers, is set out in the Privacy Consent Form.
- (g) Centre for Inclusive Supports service agreements set out the arrangements for providing support in the event of an emergency or disaster.

3.3 Support Planning

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

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- (h) Each participant's support plan is communicated, where appropriate and with their consent, to their support network, other providers and relevant government agencies.
- (i) Each participant's support plan:
 - (1) anticipates and incorporates responses to individual, provider and community emergencies and disasters to ensure their safety, health and wellbeing; and
 - (2) is understood by each worker supporting them.

3.4 Responsive Support Provision

- (a) Centre for Inclusive Supports will provide services and supports that are based on contemporary evidence-based best practice with a strong focus on the person-centred approaches
- (b) Centre for Inclusive Supports will ensure its clients' rights and best interests are protected and the support strategies used are planned, documented, and reviewable, based on the least intrusive options and reflect contemporary, evidence-based best practice and funded and legal requirements.
- (c) Unless otherwise agreed in the Privacy Consent Form, links are developed and maintained by Centre for Inclusive Supports through collaboration with other providers, including health care and allied health providers, to share their information, manage risks to them and meet the Client's needs.
- (d) Reasonable efforts are made to involve the Client in selecting their Workers, including the preferred gender of Workers providing personal care support.
- (e) Where a Client has specific needs which require monitoring and/or daily support, Centre for Inclusive Supports will ensure Workers are appropriately trained and understand the Client's needs and preferences contemporaneously in accordance with the Service Access Procedure set out below.

3.5 Transitions to and from the provider

- (a) Centre for Inclusive Supports will ensure planned transitions by a Client to or from it are facilitated in collaboration with each Client and their support network when possible in accordance with documented procedure.
- (b) Risks associated with the transition are identified, documented and responded to accordingly. This includes risks associated with temporary transitions from Centre for Inclusive Supports's care to respond to a risk to the participant, such as a health care risk requiring hospitalisation.
- (c) Processes for transitioning to or from the provider (including temporary transitions referred to above) are developed, applied, reviewed and communicated.

3.6 General

Centre for Inclusive Supports will support potential Clients' right to complain and provide feedback about any aspect of their access to and the provision of support that are important to them and for them, their family and carers.

4. Procedure

The Policy is supported by the following Procedures which are intended to clarify the responsibilities of the Board, Principal, Key Management Personnel, Workers and other persons and make explicit the underlying

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principles of the Policy. The Procedures work together dynamically and are relevant to all parts of Centre for Inclusive Supports. The Procedures are not ordered in priority and all are important to achieving the aims of the Policy Statement.

Procedure	Responsibility
<p>4.1 Support Information accessibility procedure</p> <p>(a) Ensure that Support Information in relation to the services and supports Centre for Inclusive Supports offers is accessible to Clients and potential Clients by ensuring that:</p> <ul style="list-style-type: none"> (1) the Support Information is included in the Client Information Booklet and Client Information Booklet (Easy Read); (1) all enquiries by a potential Client are responded to in a timely manner by someone suitably trained in the Service Access Procedure set out below; and (2) each person who makes an inquiry about Centre for Inclusive Supports’s services and supports is treated fairly, honestly, ethically and without discrimination; <p>(b) Centre for Inclusive Supports will provide support in the language, mode of communication and terms that the Client is most likely to understand in accordance with the Service Access Procedure below.</p>	<p>Principal and Key Management Personnel</p>
<p>4.2 Access, entry and assessment of eligibility procedure (Service Access Procedure) including in respect of transitions to Centre for Inclusive Supports</p> <p>(a) To access the services of Centre for Inclusive Supports, a potential Client or family member, carer, advocate or member of the potential Client’s chosen community must first make a request for service.</p> <p>(b) Requests for service can generally be made in the following ways:</p> <ul style="list-style-type: none"> (1) phone or email request; or (2) a general enquiry via the Centre for Inclusive Supports website; <p>(c) In either case, the Principal or someone suitably trained in this Service Access Procedure will endeavour to make contact with the enquirer via telephone in a timely manner.</p> <p>(d) After the initial telephone conversation, if the Client is interested in obtaining support and services from Centre for Inclusive Supports, the potential Client’s provisional eligibility to receive services and support from Centre for Inclusive Supports will be determined.</p> <p>(e) A Client will be provisionally eligible to receive services and supports from Centre for Inclusive Supports if they:</p> <ul style="list-style-type: none"> (1) are a person with a disability of an age which Centre for Inclusive Supports is permitted to provide services pursuant to its NDIS registration; 	<p>Principal and Key Management Personnel</p>

Procedure	Responsibility
<p>(2) live proximately to Centre for Inclusive Supports's base of operations;</p> <p>(3) are seeking to be assisted by Centre for Inclusive Supports in relation to a support or service which Centre for Inclusive Supports provides; and</p> <p>(4) have a source of individualised government funding (for example, they have a Plan) or have a source of private funding,</p> <p>(Provisional Criteria).</p> <p>(f) The following documents will then be sent or emailed to the potential Client (and/or the person that made the enquiry) for completion in order to gather further information in relation to whether the potential Client will be eligible to receive supports and services from Centre for Inclusive Supports:</p> <p>(1) Advocacy or Support Person Request Form</p> <p>(2) Privacy Consent Form</p> <p>(3) Client Information Booklet</p> <p>(4) Client Information Booklet - Easy Read</p> <p>(5) Client Intake Form</p> <p>(6) Feedback and Complaints Form</p> <p>(7) Feedback and Complaints Summary.</p> <p>(g) Where a potential Client is transitioning from another service provider to Centre for Inclusive Supports, Centre for Inclusive Supports will:</p> <p>(1) seek consent from the potential Client and/or their family/carer to contact the NDIA and other service providers (including any support coordinator) to discuss or obtain support requirements, schedules, plans, and understand their goals to assist in development of a transition to determine if it is able to provide the requested services</p> <p>(2) consult with the Client and their family/carer to obtain the person's NDIS Participant No, date of birth and obtain the Client's NDIS Support Plan or portion of the plan related to support that Centre for Inclusive Supports has been engaged to provide.</p> <p>(h) If during the initial telephone conversation, it is evident that the Client and/or their family/carer may need support to understand the Support Information, the potential Client has responded that they need support in a Client Intake Form or they are otherwise from a culturally and linguistically diverse (CALD) background, the potential Client (or the person that made the enquiry) will be informed that an interpreter service, bilingual staff or other forms of assistance to assist them to understand the Support Information can be made available to them.</p>	

Procedure	Responsibility
<p>(i) The Client will also be informed that they may have an advocate of their choice to assist with planning and that Centre for Inclusive Supports can assist them to access an advocacy service (including an independent advocate).</p> <p>(j) If an interpreter service or bilingual staff are required, Centre for Inclusive Supports will offer the potential client information and assistance in relation to organising the same.</p> <p>(k) If it appears from the initial telephone conversation that the Client is likely to meet the Provisional Criteria, arrangements will be made for the Client, their family members/carers and other significant people in their support network to meet with the Principal or other qualified representative of Centre for Inclusive Supports to discuss a potential engagement. This may take place at the Client's home or other venue agreed to by all parties.</p> <p>(l) At the meeting, the Principal or a qualified representative of Centre for Inclusive Supports, the Client, their support network and any other person(s) in attendance to assist the Client to understand the Support Information (such as an interpreter), will:</p> <ul style="list-style-type: none"> (1) discuss the Client's goals, requested supports and services and other service options (for example, based on the potential Client's Plan); (2) discuss the information provided by the potential Client to Centre for Inclusive Supports including the information provided in the Client Intake Form and Privacy Consent Form and any further information provided verbally at the meeting; (3) discuss the Client's expectations in relation to the proposed support delivery environment including if they consider that reasonable adjustments should be made to ensure it is fit for purpose and each Client's health, diversity, privacy, dignity, quality of life and independence is supported (including in accordance with section 4.4). (4) discuss the circumstances under which supports can be withdrawn; and (5) collaborate on the proposed terms of a Services Agreement, such agreement to be: <ul style="list-style-type: none"> (A) based on Centre for Inclusive Supports's standard Services Agreement; and (B) proposes expectations, explains the services and supports to be delivered, and specifies any conditions to be attached to the delivery of supports, including why those conditions are attached. <p>(m) After the meeting, Centre for Inclusive Supports will undertake any further required checks and review relevant supporting evidence to ensure the Client meets the Provisional Criteria.</p>	

Procedure	Responsibility
<p>(n) Assuming the Client meets the Provisional Criteria, the Principal will make a determination, based on all information obtained and otherwise available to it, if Centre for Inclusive Supports:</p> <p>(1) has the organisational capacity and resources to provide the requested services and supports to the Client; and</p> <p>(2) can otherwise effectively support the potential Client to meet their goals, needs and expectations in a personalised and person centred manner.</p> <p>(o) Centre for Inclusive Supports will then:</p> <p>(1) make an offer to provide supports and services to the Client; or</p> <p>(2) advise the potential Client if, based on the Principal's assessment, it is unable to provide support or services to the Client and the reasons why.</p> <p>(p) If Centre for Inclusive Supports makes an offer to provide services and supports to the potential Client, Centre for Inclusive Supports will deliver to the Client a completed Services Agreement between Centre for Inclusive Supports (including a Services Schedule) and the Client based on the Client Intake Form and the parties' discussion and collaboration at the meeting with the Principal.</p> <p>(q) When preparing the Services Agreement, use the appropriate template Services Agreement as the starting point for the engagement between Centre for Inclusive Supports and Client. Template service agreements prepared for use by Centre for Inclusive Supports include:</p> <p>(1) a general Services Agreement; and</p> <p>(2) a Support Coordination Services Agreement.</p> <p>(r) If the Client understands and is satisfied with the terms of the Services Agreement, they will be requested to sign the Services Agreement and return it to Centre for Inclusive Supports for execution by the Principal and/or other authorised representative of Centre for Inclusive Supports. Upon execution by the Principal, the Client will be provided with a fully executed copy of the Services Agreement and the terms of the agreement will be binding on both parties.</p> <p>(s) A Client Information File for the Client will then be kept to store all information, records, documents and correspondence relating to the engagement between the Client and Centre for Inclusive Supports, such information to be kept in accordance with the Privacy and Dignity Policy.</p> <p>(t) The Client Induction Checklist should be completed and held in the Client Information File to ensure that all documents required to be completed for the Client have been completed and if applicable, signed.</p>	
<p>4.3 Support and emergency planning procedure</p> <p>(a) Once a Services Agreement has been entered into between the parties, work is undertaken by Centre for Inclusive Supports, the Client and their</p>	<p>Principal and Key Management Personnel</p>

Procedure	Responsibility
<p>support network to enable effective assessment and to develop a support plan.</p> <p>(b) For this purpose, the Principal, the Client and their support network will conduct a planning discussion to create a support plan that reflects the Client’s needs, requirements, preferences, strengths and goals.</p> <p>(c) The support plan should be in substantially the same form as Centre for Inclusive Supports’s template support plan which was prepared at the same time as this Provision of Supports Policy, unless the use of that support plan would be unsuitable given the nature of supports proposed to be delivered (for example, behaviour supports, early childhood supports, therapeutic supports or household tasks). In such a case, a support plan suitable for those types of supports should be used. Where another support plan is used, it is important that it meets the requirements of the Support Planning NDIS practice standard (the indicators of which are set out above) if Centre for Inclusive Supports is required to comply with such practice standard.</p> <p>(d) Appropriate information and access will be sought for this purpose from a range of resources including the NDIA and other service providers (including health care, allied health providers and any support coordinator) to discuss or obtain support requirements, schedules, plans, and to understand their goals.</p> <p>(e) If it is evident from prior meetings that the Client and/or their support network may need support in relation to the support planning procedure or the Client, potential Client and their support network will be informed that an interpreter service, bilingual staff (if available) or other forms of assistance to assist them to understand the Support Information can be made available.</p> <p>(f) The Client will also be informed that they may have an advocate of their choice to assist with planning and that Centre for Inclusive Supports can assist them to access an Advocacy Service.</p> <p>(g) Where a Client is transitioning from another service provider, the support planning process will also involve the development of a planned transition plan in relation to the transition of support and services to Centre for Inclusive Supports from the previous service provider.</p> <p>(h) During the planning discussion, Centre for Inclusive Supports will:</p> <ol style="list-style-type: none"> (1) implement person-centred processes to ensure Centre for Inclusive Supports develops an understanding of the Client’s strengths, likes, dislikes, personal needs, goals and expectations; (2) review the Plan and any additional reports or attached information, and encourage the Client and their support network to express their needs and wishes and the determination of their specific support; (3) review the Client’s documented goals, assess outcomes, and support the Client and family to refine or identify and document, new goals; 	

Procedure	Responsibility
<p>(4) ensure the support plan includes arrangements, where required, for proactive support for preventative health measures, including support to access recommended vaccinations, dental check-ups, comprehensive health assessments and allied health services by following the prompts contained in the template support plan;</p> <p>(5) where appropriate, ensure the support plan considers issues related to mealtime management in accordance with the Mealtime Management Policy and any Plan prepared in collaboration with an allied health provider;</p> <p>(6) ensure the support plan anticipates and incorporates responses to individual, provider and community emergencies and disasters to ensure their safety, health and wellbeing;</p> <p>(7) where the Client requires support with communication, ensure clear arrangements are in place to assist Workers who support the Client to understand their communication needs and the manner in which they express emerging health concerns;</p> <p>(8) if the Client is in an urgent health situation, ensure systems for escalation are set out in the support plan and understood by the Client's Worker(s);</p> <p>(9) ensure Centre for Inclusive Supports Clients' rights and best interests are protected and the support strategies used are based on the least restrictive alternative and reflect contemporary, evidence-based best practice and funded and legal requirements as part of any support planning process;</p> <p>(10) ensure the supports and services intervene in the life of the Client in the least intrusive way possible with the smallest possible infringement on the Client's rights; and</p> <p>(11) conduct a client risk assessment in accordance with the:</p> <p>(A) Risk Assessment Form; and</p> <p>(B) Home Safety and Risk Assessment Checklist,</p> <p>with appropriate strategies to manage known risks planned and implemented, including strategies to manage any identified risks with respect to a Client that is Subject to a Significant Risk Factor. Where relevant, this process should include with other providers (including health care and allied health providers and providers of other services) to identify and manage risks to participants and to correctly interpret their needs and preferences,</p> <p>and develop a written Client Support Plan, Risk Assessment and Home Safety and Risk Assessment Checklist responsive to the expressed support needs of the Client and support network that documents the provision of services and supports by Centre for Inclusive Supports, within available funding and Centre for Inclusive Supports's program and service capacity. For the avoidance of doubt, the Risk Assessment and Home Safety and Risk Assessment Checklist and any other documents</p>	

Procedure	Responsibility
<p>completed as part of the support planning process, form part of the support plan.</p> <ul style="list-style-type: none"> (i) Ensure the Risk Assessment and Home Safety and Risk Assessment Checklist are attached to the support plan as they form part of the support plan. (j) Ensure the support plan names all involved in its development, the staff member(s) responsible for providing the supports, contains a review date and is signed and dated by the Client and where applicable, parent (or legal guardian), with a signed copy provided to the Client and where applicable, parent (or legal guardian). (k) Ensure the review date of the support plan is consistent with the review date of the risk assessment forms. (l) Update the Services and Supports Schedule (if required) and Privacy Consent Form (if required) based on the support planning discussion and organise for all parties to sign the updated documents. (m) Keep those signed documents in the Client's file such that they are readily accessible to the Client and Workers providing support to them. Where appropriate, ensure a copy of the support plan is kept securely at the Client's home. (n) Once the support plan has been developed and appropriate risk management strategies implemented, Centre for Inclusive Supports will: <ul style="list-style-type: none"> (1) ensure Worker(s) responsible for delivering supports understand the support plan; and (2) begin delivering the requested services and supports. (o) With the consent of the Client (such consent to be provided in accordance with the Support Agreement), information on the support plan is communicated to family members, carers, health care, allied health and other providers and relevant government agencies. 	
<p>4.4 Matching a Worker with a Client</p> <p>As part of the support planning procedure and discussion described above:</p> <ul style="list-style-type: none"> (a) make reasonable efforts to involve the Client in selecting their Worker(s), including the preferred gender of Worker(s) providing personal care support. (b) where a Client has specific needs which require monitoring and/or daily support, ensure the Worker(s) are appropriately trained and understand the Client's needs and preferences. (c) generally recognise the significance of matching the right Worker to meet the Client's needs and achieve their goals. 	<p>All Workers</p>

Procedure	Responsibility
<ul style="list-style-type: none"> (d) consider a number of factors such as personality, language, culture and skill requirements and if the Client is Subject to a Significant Risk Factor, such risk factor(s). (e) value the Client's views if they have a preference in respect of one or more Worker(s). (f) do our best to accommodate that preference noting that Centre for Inclusive Supports's ability to accommodate that preference depends on whether that Worker is qualified and competent to meet the Client's needs and achieve the Client's goals based on the Client's personal circumstances and the Worker's availability and suitability to assist the Client. (g) encourage and support the Client to be involved in the matching process. 	
<p>4.5 Reasonable adjustments to the support delivery environment and safe environment procedure</p> <p>In collaboration with the Client, Centre for Inclusive Supports will make reasonable adjustments to the Client's support delivery environment to ensure it is safe and fit for purpose and each Client's health, privacy, dignity, quality of life and independence is supported. This is achieved by:</p> <ul style="list-style-type: none"> (a) having an understanding that each Client is unique and recognising our individual differences. (b) understanding that the Client's support delivery environment and in particular their support preferences in respect of their health, privacy, dignity, quality of life and independence can be influenced by factors including race, ethnicity, gender, sexual orientation, socio-economic status, age, physical abilities, religious beliefs, political beliefs, culture, heritage, language, faith, sexual identity and relationship status and other relevant factors. (c) making reasonable efforts to involve the Client in selecting their Workers in accordance with the matching process set out above, including the preferred gender of Workers providing personal care supports (to the extent that, Centre for Inclusive Supports employs and engages the preferred gender of Worker and such Worker is available and capable in providing the required supports). (d) providing a safe, positive, and nurturing support delivery environment. (e) utilising an interpreter service or bilingual assessment staff to ensure the support delivery environment supports the Client's health, privacy, dignity, quality of life and independence and is otherwise fit for purpose. (f) meeting the Client to gather information about the Client's background (including cultural background), individual needs, unique history, life experiences and personal choices may impact on their ability to engage 	<p>All Workers</p>

Procedure	Responsibility
<p>with any services and supports and how, as a result, we may sensitively respond and could reasonably adjust the support delivery environment.</p> <p>(g) respecting, promoting and upholding the Client's rights and responsibilities including to respond to and support each Client's right to practice their culture, values and beliefs while accessing support as well as the other rights set out in the Diversity Policy.</p> <p>(h) where support is provided in the Client's home, work is undertaken in collaboration with the Client, and others, to ensure a safe support delivery environment in accordance with the Work Health and Safety Policy and Home Safety and Risk Assessment Checklist. This includes, where relevant, work being undertaken with other providers (such as health care and allied health providers) and services to identify and treat risks, ensure safe environments, and prevent and manage injuries.</p> <p>(i) where the support delivery environment includes the Client's home, respecting the privacy and dignity and cultural significance of different spaces in the home.</p> <p>(j) understanding the cultural/ language needs of our Client's family and carers, where they are involved, in particular respecting the social structure of the Aboriginal and Torres Strait Islander Communities and how this may impact on the service delivery environment.</p> <p>(k) listening intently to what the Client and where appropriate their family, friends and chosen community has told us about their needs and wishes and the reasonable adjustments to the support delivery environment they would like to see.</p> <p>(l) using person centred thinking, planning and approaches when making reasonable adjustments to the support delivery environment to reflect the above considerations.</p>	
<p>4.6 Special requirements for Workers Subject to a Significant Risk Factor and receiving Personal Support</p> <p>For each Client receiving Personal Support that is Subject to a Significant Risk Factor, during the term of their Services Agreement:</p> <p>(a) not allow Personal Support to be provided by a sole Worker to a Client unless Centre for Inclusive Supports has:</p> <ol style="list-style-type: none"> (1) assessed whether the Client is Subject to a Significant Risk Factor; and (2) has entered into a written service agreement with the Client (which may be in the form of this agreement); or (3) has prepared a proposed version of a written service agreement (which may be in the form of this agreement) to enter into with the Client and has made all reasonable efforts to enter it with the Client and provided a copy of it to the Client. 	<p>Principal and Key Management Personnel</p>

Procedure	Responsibility
<p>(b) document its assessment of the risk factors the Client is subject to in the Risk Assessment Form including whether the Client is Subject to a Significant Risk Factor;</p> <p>(c) as soon as reasonably practicable after completing the assessment, provide a copy of the Risk Assessment Form to the Client;</p> <p>(d) place a copy of the Risk Assessment Form in Centre for Inclusive Supports's file relating to the Client;</p> <p>(e) as soon as practicable after Centre for Inclusive Supports becomes aware of any change in circumstances that may have a significant impact on the provision of personal support to the Client:</p> <p style="padding-left: 20px;">(1) update the assessment to take account of the change;</p> <p style="padding-left: 20px;">(2) provide a copy of the updated assessment to the Client; and</p> <p style="padding-left: 20px;">(3) place a copy of the updated assessment in Centre for Inclusive Supports's file relating to the Client.</p> <p>(f) ensure:</p> <p style="padding-left: 20px;">(1) the supervisor of the Worker assisting the Client (or an independent person) is engaged to, as far as practicable, visit the Client's home, to undertake in-person supervision of the Worker,</p> <p style="padding-left: 20px;">(2) the frequency at which the in-person supervision of the Worker must occur are agreed with the Client and set out in the Services Agreement including the means by which Centre for Inclusive Supports Workers and staff are expected to communicate with the Client;</p> <p style="padding-left: 20px;">(3) The supervision includes (as far as practicable) face-to-face communication with the Client in their home at an appropriate frequency, which is documented in the Services Agreement.</p> <p>(g) to assist in fulfilling monitoring and performance obligations, if providers of Other Support Services are engaged by the Client, engage with those providers who may be involved in providing Other Support Services to the Client in their home or in supporting the Client to access community based activities by phone, video conference or in-person at the frequency specified in the Services Agreement.</p> <p>(h) ensure:</p> <p style="padding-left: 20px;">(1) there is a documented plan for supervision of the Worker that is appropriate having regard to the Client's risk factors and the plan is implemented;</p>	

Procedure	Responsibility
<p>(2) all of Centre for Inclusive Supports’s key management personnel receive regular reports in relation to the care and skill with which Personal Support is being provided to the Client by the Worker, with the regularity of the reports being appropriate having regard to the Client’s risk factors; and</p> <p>(3) appropriate action is taken by Centre for Inclusive Supports, without any unreasonable delay, to address any concerns identified in those reports.</p> <p>(i) include the name of the Client on the Clients Subject to a Significant Risk Factor Register.</p>	
<p>4.7 Each participant is supported to take risks to enable them to live the best life they can (Dignity of Risk)</p> <p>(a) Where a Client’s choice involves risk to their health and/or safety, they are supported to understand the risks, the potential consequences to themselves and others, and how varying degrees of risk can be managed to assist the client to live the way they choose.</p> <p>(b) Depending on the severity of the risk, complete a Risk Taking Form to facilitate the management of such risk. Give a signed copy of the Risk Taking Form to the Client and keep a copy in the Client’s file.</p> <p>(c) Support and encourage Clients to use self-protective strategies and behaviours when exercising their right to take risks.</p> <p>(d) Support the Client to consult with their Representative or access an Advocate or legal service (including an independent Advocate) when considering risks which present potential consequences to themselves and others.</p>	<p>All Workers</p>
<p>4.8 Review of the support delivery environment and support plan procedure</p> <p>(a) Monitoring of any reasonable adjustments made to the support delivery environment will occur contemporaneously with the provision of supports to ensure they remain fit for purpose and that the Client’s health, privacy, dignity, quality of life and independence continue to be supported as the Client’s needs change over time.</p> <p>(b) Periodic reviews of the effectiveness of the risk management strategies undertaken in connection with the client risk assessment and support planning process will be undertaken regularly to ensure risks are being adequately addressed, at the earlier of:</p> <p>(1) when changes to the support delivery environment occur; or</p> <p>(2) when a support plan is reviewed.</p> <p>(c) Each support plan will be reviewed annually or earlier in collaboration with each Client or as required by the Client’s Support Plan, according to their</p>	<p>Principal and Key Management Personnel</p>

Procedure	Responsibility
<p>changing needs or circumstances and their progress in meeting desired outcomes.</p> <p>(d) During the review:</p> <p>(1) progress in meeting desired outcomes and goals expressed during the support planning process will be assessed in at a frequency relevant and proportionate to risks, the Client’s functionality and wishes; and</p> <p>(2) where restrictive intrusions are used in the provisions of services and supports, their continued need in the support of the Client will be assessed, with the aim of continuous reduction or elimination of the need for restrictive intrusions.</p> <p>(e) Where progress is different from expected outcomes and goals, work is done with the Client and if appropriate, members of their support network, to change and update the support plan. Those changes are recorded in the Client’s updated Support Plan and Client Information File.</p> <p>(f) Where appropriate, and with the consent of the Client, information on the updated support plan will be communicated to family members, carers, other providers and relevant government agencies.</p> <p>(g) Centre for Inclusive Supports’s staff should not be “anchored” to the information provided or preferences expressed or needs identified at the client assessment or support planning stage when conducting a review.</p>	
<p>4.9 Monitoring and supervision</p> <p>(a) Monitor the performance of each Worker to ensure their performance is consistent with their respective Client’s Services Agreement and the Client’s safety and well-being.</p> <p>(b) For each Client receiving Personal Support that is Subject to a Significant Risk Factor, ensure:</p> <p>(1) the supervisor of the Worker assisting the Client (or an independent person) is engaged to, as far as practicable, visit the Client’s home, to undertake in-person supervision of the Worker,</p> <p>(2) the frequency at which the in-person supervision of the Worker must occur are agreed with the Client and set out in the Services Agreement including the means by which Centre for Inclusive Supports Workers and staff are expected to communicate with the Client;</p> <p>(3) The supervision includes (as far as practicable) face-to-face communication with the Client in their home at an appropriate frequency, which is documented in the Services Agreement.</p> <p>(c) For each Client receiving Personal Support that is Subject to a Significant Risk Factor, to assist in fulfilling monitoring and performance obligations, if</p>	<p>Principal and Key Management Personnel</p>

Procedure	Responsibility
<p>providers of Other Support Services are engaged by the Client, engage with those providers who may be involved in providing Other Support Services to the Client in their home or in supporting the Client to access community based activities by phone, video conference or in-person at the frequency specified in the Services Agreement.</p>	
<p>4.10 Continuity of supports</p> <p>(a) All reasonable efforts are made to ensure that the same Worker (or group of Workers) provides services and supports to the Client without interruption throughout the period of their Services Agreement.</p> <p>(b) Where changes or interruptions are unavoidable (for example, due to leave arrangements), alternative arrangements are explained and agreed with the Client.</p> <p>(c) Refer to the Business Continuity and Disaster Management Plan for strategies employed to ensure continuity of support.</p>	<p>Principal and Key Management Personnel</p>
<p>4.11 Identification of Workers</p> <p>(a) All Workers will be provided with an identification card to be worn on an item of clothing or which is otherwise accessible and can be provided to a Client. The card should have their name and photo printed on it.</p> <p>(b) All Workers should have the identification card while providing support and services to Clients.</p>	<p>Principal and Key Management Personnel</p>
<p>4.12 Withdrawal of Supports</p> <p>Services and Supports provided to a Client may be withdrawn by Centre for Inclusive Supports if any of the following events occurs:</p> <p>(a) the Client ceases to be a person with a disability of an age which Centre for Inclusive Supports is permitted to provide services pursuant to its NDIS registration;</p> <p>(b) the Client ceases to live proximately to Centre for Inclusive Supports's base of operations;</p> <p>(c) the Client ceases to have a source of individualised government funding (i.e. they are an NDIS participant) or have a source of private funding or that funding is otherwise used;</p> <p>(d) the Client's support plan or the services provided by Centre for Inclusive Supports are no longer able to meet the person's needs or assist in achieving chosen goals;</p> <p>(e) the Client and/or their support network fails to communicate and provide information pertaining to changes to support needs;</p> <p>(f) the Client transfers to another service provider;</p>	<p>Principal and Key Management Personnel</p>

Procedure	Responsibility
<ul style="list-style-type: none"> (g) the Client dies; (h) the Client is unable or unwilling over a period of time to work towards agreed goals; (i) the Client is unwilling to meet the reasonable conditions required in their support plan and thus affecting the safe delivery of a service to the Client and the health and safety of the staff; (j) the Client is in breach of the terms of the Services Agreement (k) the Client fails to comply with the Policies and Procedures of Centre for Inclusive Supports. (l) changes to the Client’s condition results in the supports or services they require exceeding the skills and expertise Centre for Inclusive Supports staff can deliver or the would otherwise require services to be provided that Centre for Inclusive Supports does not have capacity to provide; (m) there has been no contact between the person and Centre for Inclusive Supports for a period of 2 months; (n) the Client and/or family member/carer engages in behaviour which is unacceptable to Centre for Inclusive Supports such as violence, abuse, aggression, theft or property damage or which poses a risk to the safe delivery of a service to the Client or the health and safety of the staff; (o) the Client ignores risk management procedures in accordance with the Centre for Inclusive Supports Work Health and Safety Policy; (p) the Client fails to pay fees due and payable to Centre for Inclusive Supports by the due date for payment in accordance with the Services Agreement; and (q) either party gives at least four weeks’ notice to the other party in writing in relation to the termination of the Services Agreement. 	
<p>4.13 Transition from Centre for Inclusive Supports procedure</p> <ul style="list-style-type: none"> (a) Ensure that a transition from Centre for Inclusive Supports occurs in a professional, planned and collaborative manner in accordance with the Exit and Transition Form. (b) Ensure that a transition plan is conducted in close consultation with the Client, and where appropriate the family, carer and any other important people from the person’s support network. (c) The transition plan shall be documented in writing and include: <ul style="list-style-type: none"> (1) information about referral processes or supported introduction to other service providers, community agencies organisations, which can offer supports and services they require after they have exited Centre for Inclusive Supports; and (2) any identified risks associated with the transition and if appropriate, strategies to manage those risks planned and 	<p>Principal and Key Management Personnel</p>

Procedure	Responsibility
<p>implemented (including risks associated with temporary transitions from Centre for Inclusive Supports to respond to a risk to the Client, such as a health care risk requiring hospitalisation)</p> <p>(d) Processes for transitioning to or from the provider (including temporary transitions referred to in subsection (c)(2)) are developed, applied, reviewed and communicated.</p> <p>(e) As part of the transition, the Client and their family/carer will be offered the opportunity to participate in an exit interview. It is the choice and decision of the person and/or their family/carer to engage in an exit interview.</p> <p>(f) Centre for Inclusive Supports will use information from the interview as part of an evaluation and feedback processes to improve Centre for Inclusive Supports's services and identify any training requirements for staff of the service.</p> <p>(g) Upon exit all documentation and information developed and implemented by Centre for Inclusive Supports will remain the property of Centre for Inclusive Supports.</p> <p>(h) All information in relation to the Client will be retained, secured and stored in accordance with Centre for Inclusive Supports's Privacy and Dignity Policy.</p>	
<p>4.14 Welcome feedback and identify areas of improvement</p> <p>(a) Create an environment where all feedback is valued and encouraged including from Clients, Workers and others to identify areas where Centre for Inclusive Supports can learn and improve its support of Clients.</p> <p>(b) Welcome feedback (including anonymously) and promptly deal with any complaints or incidents in accordance with Feedback and Complaints Management Policy or Incident Management and Reporting Policy (as applicable).</p> <p>(c) Actively consult with Clients to continually improve in delivering best practice in service delivery.</p> <p>(d) Conduct an annual survey of all Workers, Clients, their support networks and other stakeholders and ask them to suggest areas for improvement in relation to Centre for Inclusive Supports's application of this Policy including its commitment to best practice service delivery.</p>	<p>All Workers</p>
<p>4.15 Workers to commit to Policy</p> <p>(a) All Workers are provided with a copy of this policy in their orientation and induction materials.</p> <p>(b) Under their employment, contractor agreement or binding letter agreement, each Worker at Centre for Inclusive Supports is required to take responsibility for ensuring:</p>	<p>All Workers</p>

Procedure	Responsibility
<p>(1) full understanding of the commitments outlined in this policy as well as procedures and other strategies designed to ensure that the principles of this policy are upheld; and</p> <p>(2) ensuring that the principles and procedures and other strategies within this Policy are applied in their daily work.</p>	
<p>4.16 Train Workers</p> <p>(a) Train Workers to assist them to understand how to apply this Policy and these procedures in everyday practice during their induction, and as part of ongoing refresher training and/or when processes change.</p> <p>(b) Train and support Workers to identify and report a breach of a Client's rights by any other party.</p>	<p>Principal and Key Management Personnel</p>
<p>4.17 Communicate in the language, mode of communication and terms that the Client is most likely to understand</p> <p>To ensure services and supports are responsive to their personal needs, support Clients to communicate about their supports and services in a manner which is responsive to their needs and in the language, mode of communication and terms that the Client is most likely to understand by:</p> <p>(a) using respectful, open, clear, and honest communication in all professional interactions (e.g., spoken, written, social media).</p> <p>(b) communicating effectively with Clients to promote their understanding of the subject matter of the conversation (e.g., active listening, use of plain language, encouraging questions).</p> <p>(c) identifying potential barriers to effective communication and making a reasonable effort to address these barriers including by providing information and materials on how to access interpreter services, legal and advocacy services.</p> <p>(d) working with bilingual assessment staff, interpreters (linguistic and/or sign), communication specialists and relevant advocacy agencies/services that can also assist Client participation, inclusion, informed choice and control.</p> <p>(e) encouraging Clients to engage with their family, friends and chosen community if Centre for Inclusive Supports has been directed to do so.</p> <p>(f) documenting all material communications accurately, clearly, professionally and in a timely manner and including them in the Client's information file.</p> <p>Aboriginal, Torres Strait Islander and all people from culturally and linguistically diverse backgrounds (CALD) are supported in accessing services and support in the community in an inclusive and supportive environment.</p>	<p>All Workers</p>
<p>4.18 Providing access to advocacy</p>	<p>Principal and Key Management Personnel</p>

Procedure	Responsibility
<p>Encourage and support Clients to access legal or advocacy services that can assist them to express their preferences with respect to the provision of support by Centre for Inclusive Supports by providing information in relation to how to access such services.</p>	
<p>4.19 Policy adoption</p> <p>Adopt and maintain the Policy and Related Documentation which assists Centre for Inclusive Supports to demonstrate the relevant NDIS Quality Indicators related to the Access to Supports, Services Agreements with Participants, Support Planning, Responsive Support Provision and Transitions to and from the provider NDIS Practice Standards.</p>	<p>The Board</p>

5. General

5.1 Relevant Legislation, Regulations, Rules and Guidelines

Legislation, Rules, Guidelines and Policies apply to this Policy and Related Documentation as set out in the Legislation Register.

5.2 Inconsistency

If and to the extent that the terms of this Policy are or would be inconsistent with the requirements of any applicable law, this Policy is deemed to be amended but only to the extent required to comply with the applicable law.

5.3 Policy Details

Approved By: The Board of Centre for Inclusive Supports Inc.

Approval Date: December 2024

Next Scheduled Review: December 2026

Version: 1

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