H&H Care SA Pty Ltd

Worker Handbook
For
H&H Care SA Pty Ltd.

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To: …… (Worker Name)

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WELCOME TO

H&H Care

The Team at **H&H Care** would like to welcome you!

We at **H&H Care** sincerely hope that you find working with us an enjoyable and rewarding experience.

At **H&H Care** we have an expectation that all workers accept the responsibilities of their jobs and deliver high-quality services. It is our aim to create an environment that is safe and secure for all and always open to improvement and progression.

This handbook provides you with valuable and critical information about the way we conduct our business, highlighting important policies that should always be adhered to.

Should you have any questions in relation to the content of this handbook or about **H&H Care**, please do not hesitate to contact me**.**

Wishing you the very best!

Managing Director – H&H Care SA Pty Ltd.

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1. Executive Summary

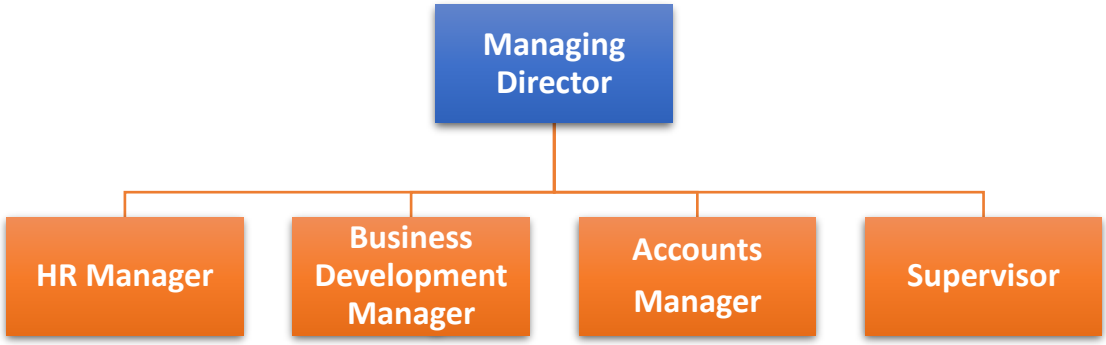
- **Company name is: H & H Care SA Pty Ltd.**
- **Business purpose is:**
- **I have been in business since or plan on starting on:**
- **Manager(s) for the company will be**
- **Services include / will include:**

2. Contact details

- **Legal Name:**
- **ABN:**
- **ACN:**
- **Office Email:**
- **Office Phone:**
- **Office Address:**
- **Email for complaint or incident:**
- **Phone for complaint or incident:**

3. Organisational Chart

✓ **Organisational** structure is as below.



4. The NDIS Code of Conduct

✓ **H&H Care** and their workers are committed to following the NDIS Code of Conduct which is as per below:

1. Act with respect for individual rights for the freedom of expression, self-determination and decision-making with applicable laws and conventions.
2. Respect the privacy of people with disability.
3. Provide supports and services in a manner that is safely and competently, with care and skill.
4. Act with integrity, honesty and transparency.
5. Promptly take steps to raise and act on concerns about matters that may impact the quality and safety of supports and services provided to people with disability.
6. Take all reasonable steps to prevent and respond to all forms of violence against exploitation, neglect, and abuse of people with disability.
7. Take all reasonable steps to prevent and respond to sexual misconduct. *S*
8. without a valid reason, not represent or charge a higher price for goods supplied to a NDIS participant that is higher than the price that would be supplied or charged to a person who is not a NDIS participant.

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✓ The NDIS Commission requires **H&H Care** to demonstrate honesty, integrity, and transparency in all their dealings. This extends to how they determine pricing for products and services offered to NDIS scheme participants, along with providing clear justifications for their pricing decisions.

✓ Additionally, providers are bound by the Australian Consumer Law (ACL), which prohibits misleading or deceptive conduct, false statements, and unfair contract terms, including those

related to the pricing of goods and services, thus ensuring fair treatment of NDIS participants and plan managers.

✓ Price differentiation occurs when a provider charges NDIS participants a higher price for identical products, supports, or services compared to other customers. The recently updated NDIS Code of Conduct Provider and Worker Guidance (Guidance) (April 22nd, 2024) recognises price differentiation as a potential form of 'sharp practice'. The Commission expects NDIS providers to refrain from engaging in or endorsing such practices. This entails:

- Avoiding charging participants more than others for essentially the same product, support, or service without valid justification.
- Abstaining from promoting, advertising, or publicizing higher prices for essentially the same products, supports, or services for participants compared to others without valid justification.

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5. Culture, diversity, values and beliefs policy

✓ To Provide a diverse and inclusive service to the participants and their families **H&H Care** promotes following:

- Support culture diversity and promote the inclusive environment.
- Support participants to play an active role in the community.
- Finding participants' needs from consulting with their family members and carers.
- Create an inclusive workplace for all staff and workers and respect their cultural, beliefs and language difference.
- Ensuring that there is not any difference in service provision between participants and the rest of people in the society.
- support people with CALD and Aboriginal and/or Torres Strait Islander (ATSI) background with their culture and spiritual beliefs.

✓ At the direction of the participant, the culture, diversity, values and beliefs of that participant are identified and sensitively responded to.

✓ Each participant's right to practice their culture, values and beliefs while accessing supports is supported.

✓ **H&H Care** 's participants who English is not their primary language will be provided with

interpretation support (if required) or in case of a meeting, these people would be able to bring a member of their family who speaks English.

6. Privacy and Confidentiality policy

- ✓ **H&H Care** is committed to providing quality services and respecting your rights. Participant rights to privacy and confidentiality will be recognised, respected, and protected in all aspects.
- ✓ In **H&H Care**, all information will be handled based on the NDIS Quality and Safeguarding Framework.
- ✓ Consistent processes and practices are in place that respects and protects the personal privacy and confidentiality of each participant.
- ✓ **H&H Care** ensures that all confidential documents are handled safely in our operations.
- ✓ **H&H Care** will not disclose any Confidential Information to any persons who are not employed by **H&H Care** or Participant unless consent has been obtained.
- ✓ **H&H Care** will not take any interest in the review of confidential, secret and top-secret records/documents of the Company.
- ✓ **H&H Care** is committed maintain the confidentiality of medical results.
- ✓ **H&H Care** will not disclose, copy, release, sell, alter, or destroy any confidential information, either electronic or paper-based unless it is part of my job.
- ✓ **H&H Care** is committed to protecting the privacy of participants and workers.

7. Decision -Making Policy

- ✓ We at **H&H Care** have this commitment to our participants to have control over the services provided to them and the decisions that might affect their life.
- ✓ **H&H Care** is committed to making sure that participants are satisfied with the received services find out about their preferences and take the measures to provide participants with those preferred services.
- ✓ **H&H Care** is committed to providing services to participants that are aligned with their needs and preferences.

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- ✓ Active decision-making and individual choice are supported for each participant including the timely provision of information using the language, mode of communication and terms that the participant is most likely to understand.
- ✓ Each participant's right to the dignity of risk in decision-making is supported. When needed, each participant is supported to make informed choices about the benefits and risks of the options under consideration.
- ✓ Each participant's autonomy is respected, including their right to intimacy and sexual expression.
- ✓ Each participant has sufficient time to consider and review their options and seek advice if required, at any stage of support provision, including assessment, planning, provision, review and exit.
- ✓ Each participant's right to access an advocate (including an independent advocate) of their choosing is supported, as is their right to have the advocate present.

8. Violence, Abuse, Neglect, Exploitation Policy

- ✓ It is the **H&H Care**'s commitment to ensure that everyone feels safe and treated fairly and the organisation is free of abuse, exploitation and neglect.
- ✓ Participant with lack of communication should be well supported to detect and prevent abuse.
- ✓ The **Managing Director** deals with the abuse, exploitation and neglect reports seriously and confidentially and take the best measures to mitigate the issue and punish the guilty person.
- ✓ **Incident Management Policy and Procedure** is established to investigate and report the abuse, exploitation and neglect related issues.
- ✓ Training is required for everyone in **H&H Care** to recognize, prevent and minimise abuse, exploitation, and neglect.
- ✓ One trained manager should be appointed to deal with any abuse related issues.
- ✓ Everyone has a responsibility about abuse, exploiting and neglect as follows:
    - The victim should be supported by all staff and workers and members of the

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organisation

- If required, the responsible manager should inform relevant authorities, carer of the victim including their family and guardians or their substitute decision-makers (if applicable)
- All staff, workers and witnesses should cooperate with relevant authorities in the process of investigation.

9. Bullying, Harassment and Discrimination Policy

✓ **H&H Care** is committed to promoting an environment free from bullying, harassment and discrimination for all workers and participant.

✓ **H&H Care** is committed to implementing training and awareness-raising strategies to ensure that all workers and staff are aware of their rights and responsibilities in relation to bullying, harassment and discrimination.

✓ **H&H Care** is committed to complying with all relevant legislation and industry standards.

✓ All forms of discrimination, harassment and bullying by or toward workers, the participant is considered unacceptable and will not be tolerated under any circumstances.

✓ Everyone has the same right and responsibilities relating to sexual harassment.

✓ Any discrimination, bullying, harassment and discrimination should be discussed with the **Managing Director** or by submitting an incident through the **Incident Management Policy and Procedure.**

✓ Victimisation includes threatening any of who has made a complaint or helped another person to make complaints including the ones who may be involved in the investigation process is subject to discrimination, harassment and/or bullying.

✓ Breach of this policy & procedure in any form may lead to termination of employment.

10. Delegation of Responsibility and Authority Policy

✓ This policy identifies the requirements for delegated responsibility and authority to another suitable person in the absence of a usual position holder in place.

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- ✓ Workers with same qualifications and experience will be assigned as a delegate to ensure the same level of support is provided to the participants and adequate training will be provided to them.

- ✓ Delegation of Responsibility and Authority Policy within **H&H Care** is intended to achieve the following objectives:

    - Ensure supports are provided based on the least intrusive options.
    - Ensure the efficiency and effectiveness of supports.
    - Ensure that workers have been provided with the level of authority necessary to discharge their responsibilities.
    - Better understanding of supervision and delegation responsibilities.
    - Feel confident in working safely with participant.

- ✓ When exercising delegated authority, all delegates shall act in good faith using all reasonable skills.

- ✓ The requirements set out in this policy apply to all workers. Delegation is managed through **Form28.Delegations of Authority Register.**

11. Conflict of Interest Policy

- ✓ Staff and workers should avoid any conflict of interest in their duties and personal interests.

- ✓ All workers will act in the best interests of participants and other customers, ensuring that participants are informed, empowered and able to maximise choices and controls. Staff members will not (by act or omission) constrain, influence or direct decision-making by a person with a disability and/or their family to limit that person's access to information, opportunities, and choices and controls.

- ✓ Any conflict of interest should be reported to the **management team** to avoid any conflict. If any conflict is recorded in **Form29.Conflict of Interest Register**, a **Form34.Conflict of Interest Declaration Form** must be completed.

- ✓ None of the staff and Workers shall misuse the position that ends to any personal benefit for themselves, or anyone associated with them.

- ✓ The priority of all staff and workers shall be the advantage of the **H&H Care.**

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- ✓ Workers and staff should not misuse **H&H Care** property, information and data for their own personal use.

- ✓ Everyone in **H&H Care** including workers, staff, **management team** and contractors shall have considered their actions as follows:

    - What kind of conflict with my duties will be perceived?
    - Is there any personal benefit involved in their action of duties?
    - Is my involvement in any of the actions reasonable?

- ✓ Neither we nor our worker will accept any offer of money, gifts, services or benefits that would cause any one of us to act in a manner contrary to the interests of a NDIS participant. Further, staff and workers will not have any financial or personal interest that could directly or indirectly influence or compromise the choice of provider or provisions of support to a participant. This includes the obtaining or offering of any form of commission by staff and workers or us.

12. Quality Policy

- ✓ It is **H&H Care**'s commitment to incorporate the requirements of the standard into the business with a continuous improvement system. These commitments are as follows:

    - Ongoing improvement and revision of the policies & procedures, processes and services
    - Ensuring that all policies & procedures comply with the relevant legislation, obligations and standards.
    - Maintaining, monitoring and improving the stakeholder's satisfaction and creating a close relationship with staff and workers
    - Conduct regular internal audits to find and resolve any nonconformities and prevent the recurrence.
    - Train the staff and workers on an ongoing basis to meet the requirements.

13. Feedback and Complaint Policy

- ✓ The Best practices and continuous improvements that are promoted by the **management**

team create a supportive and respectful culture in H&H Care that supports the workers, stakeholders and participants to be open to make complaints and feedback and report any issues. In the performance assessment of the **management team**, this will be assessed and reviewed.

- ✓ **H&H Care** is committed to handle all complaints and feedback until it is resolved completely.
- ✓ The information related to the complaints and feedback will be dealt confidentially in a way those are discussed directly with involved people.
- ✓ If the consent has been provided, a third party would be able to lodge complaints and feedback on behalf of another person.
- ✓ Any ongoing issue could be identified by tracking and analysing feedback and complaint data. As a part of the continuous improvement process, the feedback, complaints and dispute resolution will be discussed in **management team** meetings regularly.
- ✓ Information about this policy & Procedure will be shared with any participant or stakeholder wishing to lodge feedback. Copyright © ISO Professionals

14. Incident reporting

- ✓ Any incident needs to be reported to the manager or supervisor, including near misses using the **form04. Incident report** and register it on **Form11.Incident Register.**
- ✓ In the event of an incident, injury or illness, where it is safe to do so **H&H Care** will take appropriate immediate action to minimise the risk of further injury or damage.
- ✓ Preventive actions from further harm or injury will be taken, where appropriate. As a part of the investigation, until its end, the incident scene and evidence need to be preserved. (Due to assisting an injured person, making the area safer, streamlining the police investigation or removing the deceased person, the site may be disturbed.)
- ✓ Inspecting and confirming that no new hazards have been created whilst securing the area.
- ✓ If any medical treatment is needed beyond first aid, the Safety representative will be informed the relevant person immediately by phone or email.

1. Report Notifiable Incident

Incident notification process consists of 3 steps. These steps are as follows:

Step 1: Notify the NDIS Commission:

- ✓ Safety representative is responsible for reporting incidents that are reportable incidents to the Commissioner. In addition, any key personnel can notify Commissioner of reportable incidents.
- ✓ A notifiable incident shall be reported as soon as possible. The following information is required to be registered in the incident report form:
  - the name and contact details of the registered NDIS provider.
  - a description of the reportable incident (a description of the impact on, or harm caused to, the person with disability)
  - the immediate actions taken in response to the reportable incident, including actions taken to ensure the health, safety and wellbeing of persons with disability affected by the incident and whether the incident has been reported to police or any other body.
  - the name and contact details of the person making the notification.
  - the time, date and place at which the reportable incident occurred (if known)
  - the names and contact details of the persons involved in the reportable incident.
- ✓ For an incident to be reportable a certain act or event needs to have happened (or alleged to have happened) in connection with the provision of supports or services by the registered NDIS provider. This includes:
  - The death of a person with disability
  - Serious injury of a person with disability
  - Abuse or neglect of a person with disability.
  - Unlawful sexual or physical contact with, or assault of, a person with disability
  - Sexual misconduct, committed against, or in the presence of, a person with disability, including grooming of the person with disability for sexual activity.
- ✓ **H&H Care** will submit a notification form via NDIS commission portal within 24 hours, if any above incidents occur.
- ✓ Commissioner shall be provided with the following information within 5 business days after the provider became aware that the incident occurred:
  - the names and contact details of any witnesses to the reportable incident.
  - any further actions proposed to be taken in response to the reportable incident.

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- ✓ If an unauthorised restrictive practice is used, NDIS should be notified in 5 business days of being notified of the incident. However, the incident should be reported in 24 hours if the incident has resulted in injury to a disabled person.
- ✓ In cases where there is a need for police intervention, even after consideration of the incident, it should be reported as soon as possible. If there is any uncertainty about whether the incident needs to be reported or not, the notifier or approver should contact the NDIS Commission to seek further advice.
- ✓ **H&H Care** will also inform:
  - Authorities for notifiable work-related injuries, fatalities or dangerous occurrences
  - Police if the incident relates to the death of a person.
- ✓ Where an incident is referred to NDIS, the NDIS investigation takes precedence over any organisational process.
- ✓ The progress of the incidents, accident and near misses will be tracked in incident report form.
- ✓ **Step 2:** Submit a 5-business day form: this form should be submitted via "My Reportable Incidents" portal in 5 business days after key management personnel are notified. Some additional information, including the corrective actions, is recorded in this form. any unauthorised use of restrictive practises is recorded by this form.
- ✓ **Step 3:** If required, the final report should be submitted: If this is required, the NDIS Commission will contact the provider and advise the due date for this matter. The final report field will be accessible on the NDIS Commission portal if the provider requires to submit a final report.

Reportable incident	Required timeframe
Death of a person with disability	**24 hours**
Serious injury of a person with disability	**24 hours**

Abuse or neglect of a person with disability	**24 hours**
Unlawful sexual or physical contact with, or assault of, a person with disability	**24 hours**
Sexual misconduct committed against, or in the presence of, a person with disability, including grooming of the person for sexual activity	**24 hours**
The use of a restrictive practice in relation to a person with disability if the use is not in accordance with a required state or territory authorisation and/or not in accordance with a behaviour support plan.	**Five business days**

15. Occupational Health and Safety Policy

- ✓ **H&H Care** is committed to support the health, safety, and welfare of all people we employ and to the participant and people affected by our undertakings.
- ✓ **H&H Care** continuously supports improvements of workplace health and safety by adopting a planned systematic approach to Occupational Health and Safety. This approach includes risk management and consultation.
- ✓ One of our primary commitments is to ensure that everyone in the organization receives appropriate work health and safety support.
- ✓ Business requires a safe work environment to have long-term success and comply with requirements and standards.
- ✓ None of the workers undertake unsafe works and participants should not tolerate any unsafe

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workplace. Every task that a staff and workers are not trained for it shall be reported to the **H&H Care**.

- ✓ To have a safe environment in **H&H Care**, all workers shall receive adequate WHS training. In addition, workers need to know about the new roles and responsibilities.
- ✓ **H&H Care** management will ensure that everyone in the organization including participants, their families as well as workers and staff are in a safe environment.
- ✓ **H&H Care** is committed to Ensure that each participant can easily identify workers engaged to provide the agreed supports.
- ✓ Where support is provided in the participant's home, work is undertaken with the participant to ensure a safe support delivery environment.
- ✓ Where relevant, work is undertaken with other providers and services to identify and treat risks, ensure safe environments, and prevent and manage injuries.
- ✓ **H&H Care** is committed to report all workplace injuries, near misses and illnesses caused by work immediately to manager and ensure that all accidents, hazards and near misses are recorded and reported, and an investigation is carried out to determine possible causes in line with Incident Management Policy and Procedure.

16. Staff and Worker's responsibilities

- ✓ It is staff and worker's responsibility to:

  - Ensure that their actions don't put other people at risk and take care of their own health and safety.
  - Report any incident and hazard to manager.
  - Ensure that all rules and guidelines outlined by the management is followed.
  - Participate in incident investigations if required.
  - Practice emergency plan and drill.
  - Ensure that their work environment is safe and free from hazards.
  - Participate in relevant training conducted by **H&H Care** related to the WHS and how to use PPEs
  - Any equipment provided by participant may have a risk assessment in place

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- Workers should know the evacuation plan and assembly area
- Staff will be provided with training and professional development on child protection.
  Abusive Situations:

➢ **When to Report**

- ✓ It is critical to continuously monitor for any potential changes in a participant's behaviour or unexplained physical side effects that may be a result of abuse. On the off chance that a staff member notices one or more of the conceivable signs of abuse (as recorded underneath), it does not necessarily mean the child is being abused, but it must be recorded in detail. The Director will at that point report to Child Security Administrations (numbers recorded).'
- ✓ A participant shows a change in behaviour or mood that may indicate they are being abused.
- ✓ You observe someone behaving towards a participant in a way that makes you feel uncomfortable.
- ✓ A participant tells you that they are being abused by another person.
- ✓ A person tells you that they are abusing a participant.
- ✓ A participant or visitor tells you that they have observed abusive acts.
- ✓ You observe an action or inaction that may be considered abusive.
- ✓ You suspect or have any reason to believe a participant is being abused

Failure to report an abusive situation may result in a Criminal Offence.

➢ **Who to report to:**

The Director will use their professional understanding and knowledge of child protection to determine when to contact the required reporting body.

To make a report, the Director will contact the child protection intake service covering the local government area (LGA) where the child normally resides. Telephone numbers to make a report during business hours (8.45am-5.00pm), Monday to Friday is listed below:

- ✓ North Division intake: 1300 664 977
- ✓ South Division intake: 1300 655 795
- ✓ East Division intake: 1300 360 391
- ✓ West Division intake - metropolitan: 1300 664 977
- ✓ West Division intake - Rural and regional: 1800 075 599.

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To report concerns about the immediate safety of a child outside of normal business hours, the service supervisor will contact the After-Hours Child Protection Emergency Service on 13 12 78.

- **Details to Provide**

The Director will be required to provide the following information to the child abuse report line, including current information:

1. Child's name, age, date of birth, address
2. Description of injury, abuse and/or neglect (current and previous)
3. The child's current situation
4. The location of the child, parent or caregiver and alleged perpetrator
5. When and how did you find out about the abuse

- **Child Identification Details and Context**

H&H Care will need to provide enough detail to identify the child or young person and give context to your report, including:

- ✓ The child's full name
- ✓ Date of birth or age
- ✓ Current address
- ✓ Contact number
- ✓ School/kindergarten/ childcare centre
- ✓ Ethnicity (i.e. cultural background, Aboriginal kinship group, non-English speaking)
- ✓ Parents and/or guardians
- ✓ Living situations: who do they live with, family members, siblings ect
- ✓ The alleged perpetrator's name, age, address, relationships to the child or children, and current whereabouts.
- ✓ Current whereabouts of the child or children of concern
- ✓ Details of when the next expected contact with the alleged perpetrator will occur
- ✓ Family court orders, apprehended violence orders and/or domestic violence orders, if in place. Copyright © ISO Professionals

17. Smoke free environment

✓ Providing a smoke free environment for participants and workers is a primary commitment of

the **H&H Care**. We will ensure that:

- The public areas are free from smoke. Smoking in those places will not be tolerated by **H&H Care.**
- Smoking in company cars as well as in the meetings is prohibited.
- Everyone should know about this policy and guideline related to smoke free environment and follow it.
- Smoking is only allowed in a designated area and should be away from participants.

18. Participant Money and Property Policy

✓ Where the provider has access to a participant's money or other property, processes to ensure that it is managed, protected and accounted for are developed, applied, reviewed and communicated. Participants' money or other property is only used with the consent of the participant and for the purposes intended by the participant.

✓ Participants are not given financial advice or information other than that which would be required under the participant's plan.

✓ Participants fund and property can only be used by a person who:

- Has been assigned by participant to manage their money and property
- Court, tribunal or guardianship board has ordered the worker to do so
- The person has been assigned as a Centrelink nominee to manage and receive the social security payments on behalf of the participant

✓ The management of **H&H Care** shall approve or consult the worker about the informal management of participant's fund if participant is deemed as incapable of managing their own fund.

✓ A secure space shall be assigned to the participants that are onsite.

✓ It is workers' responsibility to ensure that participants have received the purchased items.

✓ In the case of making decisions about expenditures or investments, legal guardians or family members shall be involved.

✓ If required, each participant is supported to access and spend their own money as the

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participant determines.

✓ If workers are directly involved in participant's fund management, they must follow the following guidelines at all times:

- Support Partners are at NO TIME allowed access to a participant's personal identification number (PIN) or use an ATM on the participant's behalf.
- Financial assistance may only be offered if it is documented in the participant's care plan.
- If a participant requests financial assistance, and it is not documented in their care plan, staff must contact the Manager for approval.
- Transaction receipts must be obtained and given to the participant for the following:
    - Money received.
    - Money spent.
    - Money returned.
- The staff member must be sure to count the money in front of the participant on receipt and return.
- Staff must record all financial transactions carried out for participants in the Form37.Money reconciliation record (if in use). Records must be documented clearly, accurately and immediately.
- Staff must not accept money or gifts from participants.
- Assisting participants with their money handling as well their purchases in a way that doesn't involve any advantages for themselves and is all for participant's benefit
- Money withdrawal: in emergency cases, money withdrawal should be requested, and all receipts shall be available for further information and check
- Ensuring that money withdrawal is in the stated limit if they are a signatory
- Ensuring that funds are kept safely in a safe area to be accessible at all time
- Any discrepancy in the participant's account shall be reported to the relevant manager
- Creating a report on participants' funds and present it to the relevant managers using **Form37.Money reconciliation record**, regularly.

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19. Management of Medication Policy

19.1 Policy and Procedure

19.2 Management of Medication Policy

✓ **H&H Care** shall undertake actions to ensure:

- Using **Form24.Medication Management Form** clearly identifies the medication dosage, how it is to be administered and stored for each participant requiring management of medication.
- All workers responsible for administering medication understand the side effects of the medication and the steps to take in the event of an incident involving medication.
- All medications are stored safely and securely, can be easily identified, differentiated, and are only accessed by appropriately trained workers.
- The management and administration of medication to participants is important to **H&H Care** as this ensures to promote duty of care for participants from staff when administering medication.
- Any staff participating in the prescription of medications will be suitably qualified and will adhere to all applicable laws and regulations. Prior to performing any medication function, staff involved in the storage, transportation, administration, or urging of medication will be taught and assessed as competent. All medications must be taken exactly as prescribed by the prescribing physician or according to the manufacturer's instructions.

19.3 Medication Administration

✓ Medications will be administered in a hygienic way including washing hands before administration.

✓ Should any abnormal reaction occur from the participants to the medications such as any side effects or reactions including, allergies, loss of consciousness, hypoxia or any kind of abnormal reaction will be documented on **Form24.Medication Management Form** and the worker should notify a health professional or call 000.

✓ Participants' allergies and sensitivity should always be checked before the administration of

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medications.

- ✓ Workers shall ensure that the medications are not contaminated or expired.
- ✓ Prescribed doctors should be contacted if the workers are not sure about the effects or side effects of medications.
- ✓ Ensure that medications are provided from the right container that belongs to the participant.
- ✓ If any error occurred during the process of medication administration including missed or incorrect medication, the worker should immediately contact the Registered Nurse, if not possible to talk to the Nurse, they will contact 000 immediately.
- ✓ Regardless of the level of medication assistance required, all participants who require medication will need to be documented with a list of current medications on **Form24.Medication Management Form,** this also includes any medication prescribed by a Health Practitioner or over the counter medications.

Self-administering (participant administers and mangers their own medications)

- ✓ A participant who can administer medication on their own where appropriate is considered self-administering.
- ✓ The Director may require written information regarding the participant's competency to self-administer medication around their skills, knowledge and understanding is adequate to be done on their own, this written information can be by the participant, guardian, or medical practitioner.
- ✓ Participants who self-administer medication H&H Care will have appropriate supervision for these participants, adequately recorded and documented through **Form24.Medication Management Form**

Assistant required for participants who are unable to self-administer their medication.

- ✓ Staff who are required to provide medication administration will have the right training to ensure skills, knowledge and understanding is sufficient.
- ✓ Unless the participant rejects assistance, staff members must provide whatever physical or other support is required and appropriate to enable the participant to take their own prescription.

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19.4 Medication Records

✓ All medications should have and follow a prescription including the following information:

- Name address and DOB.
- Medication's name
- Prescribed dosage
- Any directions for use
- Name and contact number of the prescribed doctor.
- Medication's commencement date
- The period that medication shall be taken.
- Date of medication review

✓ **H&H Care**'s staff and workers shall ensure that there are detailed instructions of the medication by the prescribing doctor. All workers shall adhere to this information and no staff should be involved in a management of medication if it is outside of their skills and qualifications.

✓ **H&H Care** staff and workers shall ensure that all of the participants have a copy of the medication sheet including all information related to their prescription.

19.4.1 Storage of Medication

✓ All medications are stored based on the manufacturer's instructions.

✓ All medications shall be stored securely.

✓ Medications that are required to be stored in the fridge shall be in a lockable container in the fridge.

✓ Medications shall not be opened if not necessary because they might become ineffective if they are exposed to air or light.

19.4.2 Medication Disposal

✓ Any medication that is expired or no longer required shall be returned to the pharmacy

✓ Disposal medications shall not be washed down the sink, flushed down the toilet or thrown away in the rubbish bin.

✓ Sharp disposables should be placed in a locked area, either a room or a drawer.

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19.4.3 Administering Medication

When medication assistance is provided, staff will check medication script labels to ensure the following principles are adhered to:

- Right client
- Right medication
- Right dose
- Right time
- Right route
- Right documentation/record keeping

✓ After each session of medication management, staff will sign the medication chart, which will contain information regarding the client's name, date, time, medication name, dosage and person administering.

✓ Where staff note that previous dosages have not been given or that there has been tampering with the dosage packaging then the prescribing doctor should be consulted, and an incident report should be completed.

19.4.4 Reporting

Medication-related incidents, such as misuse, missed doses, overdose, and medication missing, should be reported through the incident management policies and procedures. A medication incident report must be completed, and the director, family/guardian, pharmacy, and the general practitioner must be notified.

✓ In the event of a medication-related incident, all support staff must follow the following guidelines when administering medication. An incident report must be completed and submitted to **H&H Care**

✓ In the event a participant refuses to take their prescribed medication, staff will report this to **H&H Care** and complete an incident report using **Form04.Incident Report**.

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- ✓ In the event a staff member has not administered medication to a participant, this will be classed as missed medication and an incident report will be completed using **Form04.Incident Report**, this also includes if medication is incorrectly given, labelled or is past its expiry date

- ✓ In the event that there's a blunder or unfavourable response to the prescribed medication, staff are to contact crisis administrations in the event and follow the advice of emergency services and wait until they arrive if required.

19.4.5 Medication Prompting

- ✓ In cases where a participant is self-administering and managing their own medication, the participant is supervised accordingly and documented by **H&H Care** staff

- ✓ Should a participant require medication prompting to self-administer, this is documented on **Form33. Participant Disaster and Risk Assessment &** then documented on **Form24.Medication Management Form** when prompted at the specific times.

19.4.6 Strictly Forbidden Practices

- ✓ At no time should medication be left unattended where it is freely accessible to a participant or unauthorized persons
- ✓ At no time will staff administer medications to participants in a way that is for **H&H Care** convenience and does not address the preference and/or needs of the participant
- ✓ At no time will staff administer medication if a participant is objecting informally. This will only be relevant unless there is approved protocol in place

- ✓ Should no medication not be prescribed to a participant, staff will not administer any medications outside of this such as over the counter medication e.g Panadol.

- ✓ At no time should medication be given or administered by a participant to another participant

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20. Mealtime Management Policy

Each participant requiring mealtime management receives nutritious meals, and of a texture that is appropriate to their individual needs, and appropriately planned, and prepared in an environment and manner that meets their individual needs and preferences and delivered in a way that is appropriate to their individual needs and ensures that the meals are enjoyable.

H&H Care is committed to identifying each participant requiring mealtime management.

H&H Care is committed to making sure that participants have enough nutrition and hydration to maintain life and good health and reduce the risks of malnutrition and dehydration.

H&H Care is committed to making sure that participants have enough to eat and drink to meet their nutrition and hydration needs and to provide the participants with the support they need to eat and drink.

- ✓ When a new participant joins, **H&H Care** gather information about their food and drink likes and dislikes and their dietary and hydration needs using **Form77. Mealtime Management Plan Form** and **Form78. Nutrition Assessment.** This includes any assistance they may require eating or drinking, food allergies and intolerances, medical or clinical requirements relating to food or drink, preferences in terms of when the participant would like their meals served and any religious or cultural needs.
- ✓ Assessments and plans for mealtime management for each participant must be reviewed annually or by the professional advice of the participant's practitioner, or more frequently if needs change or difficulty is observed.

✓ **H&H Care** will not disclose any Confidential Information to any persons who are not employed by **H&H Care** or Participant unless consent has been obtained.

- ✓ With their consent, each participant requiring mealtime management is involved in the assessment and development of their mealtime management plans.

✓ Before healthcare professionals examine, treat or care for any participant, **H&H Care** must obtain their valid consent using **Form18. Participant Information Consent Form** through **Participant Information Consent** section of **Information Management Policy & Procedure.**

✓ All incidents will be recorded and reported as per **Incident Management Policy & Procedure**.

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- ✓ All complaints will be recorded and reported as per **Feedback and Complaints Management Policy & Procedure**.
- ✓ It is **H&H Care**'s commitment to providing the required equipment as well as appropriate training for the relevant staff to know how to use it.
- ✓ Participants identified with a choking risk is referred for the specialist assessment using **Form79. Nutrition and Swallowing Risk Checklist** (for example, a speech pathologist, dietician, and dentist).
- ✓ Assessment findings and recommendations are documented, communicated across the care team, and implemented.
- ✓ When a participant presents with acute airway obstruction:
    - Assess the severity of the airway obstruction. The obstruction may be partial or complete and the participant may be conscious or unconscious.
    - Determine if the participant can cough effectively or if the cough is not effective.

21. Management of Waste Policy

- ✓ Management of waste has several benefits as follows:
    - Enhancing organisation's reputation
    - Benefit the environment and society
    - Decrease infection or disease
    - Reduction in waste disposal cost
- ✓ **H&H Care** shall ensure to cut the waste and take measures to separate different types of wastes.
- ✓ Wastes could be divided into different types as follows:

Types of waste	Description
Clinical waste	Any kind of waste that is stained by blood is like bandages. ➢ As these kinds of waste have the risk of infection shall be placed in a separate bin and be stored for collection by a service provider

Types of waste	Description
	which handles clinical wastes. ➢ This kind of waste should be emptied with specific PPE like eyewear and gloves. ➢ The clinical waste bags should be filled with less than two thirds of the bag. ➢ The area dedicated to clinical waste shall be restricted.
Sharps	Sharps waste is classified as biohazardous waste and shall be carefully handled. Common medical materials treated as sharps waste are hypodermic needles, disposable scalpels and blades, contaminated glass and certain plastics, and guidewires used in surgery. ➢ Incorrect disposing of sharp waste may put the workers at the risk of injury. ➢ The sharp waste shall be disposed in a specific container to be handle by a qualified service provider of sharp waste. ➢ Sharp waste should never be disposed of in general waste or any other non-approved waste. ➢ Sharp items should always be immediately disposed of. ➢ Never use or retrieve any items from sharp container. ➢ Sharp containers shall be placed in a specific cupboard.
Pharmaceutical Waste	Pharmaceutical waste is drugs, remedies or medicine that have expired or are no longer required to treat a patient. ➢ Any pharmaceutical waste that is out of date. ➢ These could be harmful to the environment. ➢ May be returned to pharmacies for safe disposals. ➢ Shall never be placed in general waste.
Recyclable	Waste items that are usually recycled include: • Paper waste: Paper waste items include books, newspapers, magazines, cardboard boxes and envelopes. • Plastic waste: Items include plastic bags, water bottles, rubber bags and plastic wrappers. • Glass waste: All glass products like bottles can be recycled. • Aluminum waste: Cans from soda drink, tomato, fruit cans and all other cans can be recycled. ➢ Recyclable items shall be disposed properly as follows: ▪ Toners could be collected by toner collection services.

Types of waste	Description
	▪ Supermarkets might recycle soft plastics. ▪ Councils collect the recyclable Items.
Sensitive Waste	➢ Papers containing sensitive information shall be shredded. ➢ Sensitive waste should not be placed in a general waste bin. ➢ Hard drives and USB disks should be place in an area to be handled by an E-waste service provider.
E-waste	➢ E-waste collection services could collect electronic wastes. ➢ Shall not be placed in general waste or any other waste containers.
General Waste	➢ Any other kind of waste apart from the above mention is a general waste and should be collected by the local council or government.

21.1 Workers Responsibility

✓ **Responsibility of Workers against Waste Management:**

- Ensure that wastes are disposed correctly
- Ensure that all guidelines provided by management and regulations are used in waste disposal
- Ensure that all wastes are separated correctly
- Do not dispose any of the sharp, clinical or pharmaceutical wastes in general waste

21.2 Management Team Responsibility

✓ **Responsibility of Management Team against Waste disposal:**

- All incidents involving infectious material, body substances or hazardous substances are reported, recorded, investigated, and reviewed through **Form04.Incident Report.**
- An emergency plan is in place to respond to clinical waste or hazardous substance management issues and/or accidents. Where the plan is implemented, its effectiveness is evaluated, and revisions are made if required.
- Workers involved in the management of waste and hazardous substances receive training to ensure safe and appropriate handling. This includes training on any protective equipment and clothing required when handling waste or hazardous substances. This training will be recorded on the **Training Matrix** to ensure that

everyone is trained in this area (if they are dealing with waste disposal). **[Organization Name]** will provide this training to the workers externally.

- Provide staff and workers with training about waste disposal.
- Ensure that wastes including sensitive information are not disposed in general waste and are handled correctly (e.g. Shredded or placed in a safe area).
- Ensure that all workers abide by this policy & procedure.
- Ensure that relevant waste management service providers will service all sites and offices regularly on a scheduled basis.
- Ensure that all bins are signed correctly to avoid any mistake in waste disposal.
- Review this Policy & procedure every year.
- In the process of waste removal **Form58.Waste Removal Register** will be filled out.

21.3 Waste Management Contractors

✓ Will manage the wastes by engaging contractors to provide storage containers, audit their waste management plan and transport waste safely for disposal.

✓ Cleanaway Waste Management Limited, and Suez Company has been contracted by **[Organization Name]** as a licensed contractor for all medical and hazardous substances disposal. The contact details of these two companies are as of the following:

Cleanaway Waste Management:

- **Address:** Level 4, 441 St Kilda Road, Melbourne, VIC, 3004
- **Phone:** 1300 66 77 87
- Emergency Spills Response: 1800 774 557

Suez:

- **Address:** Level 4. 3 Rider Boulevard, Rhodes, NSW 2138
- **Phone:** 131335, 1300651116
- Emergency Spills Response: 1800 368737

21.4 Waste Management Plan

21.4.1 Training and Waste Management

✓ **H&H Care** has strategies in place for training staff in Waste Management including clinical waste

management. The training programs areas of the following:

- All areas of Waste Management Plan
- Waste Management Policy and Procedure
- Work Health and Safety Policy and Procedure
- Infection Control Policy and Procedure

21.4.2 Measuring Waste Management Performance

- Quarterly Waste Management Meeting
- Feedback from participants, support workers, and other stakeholders
- Internal audit
- **Form58.Waste Removal Register**

21.5 Waste Handling

21.5.1 Waste Segregation

✓ There are some waste separation processes in place for :

- Training all staff who are dealing with any types of waste
- Ensure that waste components are handled safely including storage and disposal through following Safety Data Sheets for hazardous wastes;
- Ensure that wastes are identifiable through colour coding and labelling
- All wastes are disposed of in a suitable container in an appropriate location, for example, a container for sharps
- Ensure that all waste is separated at once generated.

✓ **H&H Care** will provide suitable bins for general and medical waste. **H&H Care** has contracted with the companies mentioned in section 23.5.4 to remove and dispose of wastes of all types from each site.

✓ All sharps are placed in sharp containers. When the sharps container reaches the manufacturers full capacity line, the lid is closed and secured. The full sharp container is removed and replaced by the cleaning contractor immediately. Cleanaway will remove sharps from this site.

✓ The medical waste bin is lined with a biohazard bag, which is impervious to moisture and has strength sufficient to preclude ripping, tearing, or bursting under normal use and handling. The biohazard bags are removed when 2/3rd full by the cleaning contractor and each bag is tied and placed into the lockable biohazard bin located in the storage room.

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21.6 Incident Prevention and Management

✓ It is our commitment to provide a safe workplace for all staff, participants, and any other stakeholders. For this we have established a formal process to report and investigate all workplace accidents, incidents and near miss. This includes providing corrective and preventive actions.

✓ Any waste related incidents will be handled immediately, and medical access will be provided to those involved in the incident. **H&H Care** will ensure to meet the WHS and incident management responsibilities including the following:

- Complying with all relevant OH&S legislation, regulations, codes of practice, and guidelines;
- Documenting, implementing and communicating OH&S policy to all employees;
- Regularly monitoring and revising our policy in accordance with legislative and organisational changes or as appropriate.
- Establishing measurable objectives and targets aimed at eliminating work related injury and illnesses;
- Provide adequate training, information, instruction and supervision to all employees and visitors to ensure work is carried out safely
- Ensure all accidents, hazards and near misses are recorded and reported and an investigation is carried out to determine possible causes.
- Maintain a safe working environment by reporting hazards or unsafe work practices in a prompt manner to their manager or supervisor.
- Report all workplace injuries, near misses and illnesses caused by work immediately to your manager.

Standard Precautions

- Staff must wear suitable gloves and other PPEs appropriate for the task. Protective eyewear must be worn where there is the risk of splashing any hazardous chemical.
- To maintain a safe environment, Surfaces should be cleaned on a regular basis using only cleaning procedures that minimise dispersal of micro-organisms into the air. Toilets, sinks, washbasins, baths, shower areas, and surrounding areas should be cleaned regularly or as required. Cleaning methods for these items should avoid generation of aerosols.

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- Floors should be cleaned daily or as necessary with a vacuum cleaner.
- Routine surface cleaning should be undertaken as follows:
- clean and dry work surfaces before and after usage or when visibly soiled;
- spills should be dealt with immediately.
- use detergent and warm water for routine cleaning;
- where surface disinfection is required, use in accordance with MSDS
- before and after applying disinfectants, clean and dry surfaces;
- empty buckets after use, wash with detergent and warm water and store dry; and
- mops should be cleaned in detergent and warm water then stored dry.
- Standard precautions to protect against infectious diseases include:
- wash hands for 30 seconds before and after contact with participants, eating, using gloves and after using the toilet, contact with used equipment and contact with body substances or equipment, materials (including linen) or contaminated surfaces;
- wear disposable latex gloves when handling food or any item which may be contaminated by bodily fluids;
- cover cuts or scratches with waterproof, breathable dressing;
- wear personal protective equipment (PPE) such as protective eyewear, an apron, enclosed footwear and/or a face mask if splashing or direct contact with body fluids is likely;
- use sharps containers at point of use. Do not re-sheath sharps; and
- clean up spills with water and bleach.

Respiratory Hygiene/Cough Etiquette

✓ Anyone with signs and symptoms of a respiratory infection, regardless of the cause, should follow or be instructed to follow respiratory hygiene and cough etiquette as follows:

- Cover the nose/mouth with disposable single-use tissues when coughing, sneezing, wiping and blowing noses;
- Use tissues to contain respiratory secretions.
- Dispose of tissues in the nearest waste receptacle or bin after use;
- If no tissues are available, cough or sneeze into the inner elbow rather than the hand;
- Practice hand hygiene after contact with respiratory secretions and contaminated objects/materials; and
- Keep contaminated hands away from the mucous membranes of the eyes and nose.

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✓

H&H Care will ensure the availability of materials for adhering to Respiratory Hygiene/Cough Etiquette in required areas where necessary.

- Provide tissues and no-touch receptacles for used tissue disposal.
- Provide conveniently-located dispensers of alcohol-based hand rub; where sinks are available, ensure that supplies for hand washing (i.e., soap, disposable towels) are consistently available.

Hand Hygiene

✓ Hand hygiene refers to applying an alcohol-based hand rub to the surface of hands (including liquids, gels and foams) and/or washing hands with the use of water and soap or a soap solution, either non-antimicrobial or antimicrobial.

1. Wet hands with warm water.
2. Apply soap or liquid soap – enough to cover all of your hands.
3. Rub your hands together for at least 20 seconds.
4. Make sure you cover all surfaces, including the backs of your hands and in between your fingers.
5. Rinse hands, making sure you remove all soap and turn off the tap using the paper towel.
6. Dry your hands thoroughly with a paper towel, and dispose of them right away

Professional Protective Equipment (PPE)

✓ Wear appropriate PPE (gown, mask, protective eyewear and gloves) if you:

- Will be exposed to body fluids or very contaminated surfaces
- Are caring for someone confirmed or suspected of having an infectious infection

✓ Remove your PPE before leaving the room or the room you were in. Wash and/or sanitise your hands straight after removing PPE.

Reporting incidents

✓ Every staff must report any incident to the Director of the H&H Care using Form04.Incident

Report in less than 24 hours. If there is any injury or death of staff involved in the incident, Director should report the Safe work/Work safe immediately.

All of the incidents should be recorded on Form11.Incident Register.

✓ If there is any exposure to body fluids or blood due to an incident or injury, the report should be handled according to the "AUSTRALIAN NATIONAL GUIDELINES FOR THE MANAGEMENT OF HEALTHCARE WORKERS LIVING WITH BLOOD BORNE VIRUSES AND HEALTHCARE WORKERS WHO PERFORM EXPOSURE PRONE PROCEDURES AT RISK OF EXPOSURE TO BLOOD BORNE VIRUSES".

In any of the following circumstances, the Director should report the incident to the safety authorities (Safe work/ Work safe).

1. A worker who has been exposed to blood or body substances and
   - has never been vaccinated against hepatitis B; or
   - is a non-responder to previous hepatitis B vaccination courses; and,
   - following the exposure incident, requires a:
     - hepatitis B vaccination; and
     - hepatitis B immunoglobulin.

2. A worker requires post-exposure prophylaxis against HIV infection.

Chemical incidents

✓ If an injury occurred due to exposure to hazardous chemicals the emergency response plan should be followed as well as the First Aid instructions on the Safety Data Sheets. A copy of the Safety Data Sheets must be available in any sites that there is a chance of exposure to a chemical.

21.6.1Continuous Improvement

✓ **H&H Care** is committed to quality, innovation and promoting a culture of continuous improvement in its governance, management, and service delivery.

Continuous improvement is incorporated into all areas of **H&H Care**'s operations.

✓ **H&H Care** includes its staff, participants and other relevant stakeholders in its continuous improvement activities to ensure services are of high quality and meet participants 'needs.

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22. Elimination of Restrictive Practices Policy

- ✓ **H&H Care** is committed to work towards the reduction and elimination of the use of restrictive practices.
- ✓ **H&H Care** is committed to make sure that restrictive practices should occur only in very limited and specific circumstances, as a last resort and utilise the least restrictive practice and for the shortest period of time possible under the circumstances. Restrictive practices should only be used where they are proportionate and justified in order to protect the rights or safety of the person or others.
- ✓ **H&H Care** is committed to that any participants who exhibit a cognitive or intellectual disability or any behaviour that causes, or has the potential to cause, harm is supported and monitored in a suitable environment that is aligned with the participant's unique needs.
- ✓ **H&H Care** is committed to support people's right, safety, and wellbeing in the organisation. In fact, we believe that every behaviour has a purpose and we should respect them and act properly to solve the issue. This includes people who put other people at any risk of harm and people diagnosed with mental illnesses.
- ✓ **H&H Care** will comply with n*ational Disability Insurance Scheme (Restrictive* **Practices** *and Behaviour Support)* Rules *2018 and* Disability Act 2006 (Vic) and Disability (NDIS Transition) Amendment Act 2019
- ✓ **H&H Care** is committed to ensure that our services meet agreed standards focussing on protecting and promoting the human rights of participants.
- ✓ **H&H Care** is committed to ensure that participants have protection against inhuman or degrading treatment and attention is provided to personal dignity, privacy and self-respect as well as individual needs.
- ✓ **H&H Care** is committed to ensure that our staff and workers work in a safe environment.
- ✓ **H&H Care** is committed to review the restrictive practices used (incident reporting if applicable), assessment of appropriateness and alternatives, and for aggregated reporting

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regularly.

- ✓ In cases that there is a challenging behaviour, positive behaviour support approach will be used by **H&H Care.**

23. Worker Acknowledgement

I have read, understood, and accepted the requirements within this Handbook, and agree to perform my tasks using the instructions that are provided in the workplace, and other supporting policies and procedures that are part of the NDIS system and may be issued from time to time.

I understand this handbook has been prepared to ensure that I am aware and fully understand what my duties and responsibilities will be. I can ask any questions I have and raise them to my Manager.

If I am unsure of anything, I agree I will seek assistance and clarification in the first instance from my Manager.

I am aware that, I will need to take part in NDIS Workers screening check to work in a NDIS Registered Provider.

_____	_____	_____
Name of worker	**Signature of Worker**	**Date**

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