



*Mater Dei: Client Safety and Security
National Standard6 – Service Management*

201409004	CLIENT SAFETY AND SECURITY
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Applies to: Children, Students, Young People and Service Users
Specific responsibility: All staff, Management,

Version:	001
Date approved:	09/14
Next review date:	09/16

Policy context: This Policy relates to	
Standards or other external requirements	NSW Disability Services Standards 1993
Legislation or other requirements	Community Services Complaints and Appeals Monitoring Act (NSW) 1993 Disability Services Act (NSW) 1993 Human Rights and Equal Opportunity Commission Act (Commonwealth) 1986 Disability Discrimination Act (Commonwealth) 1992 Anti-Discrimination Act (NSW) 1977 Disability Inclusion Act 2014 National Safe Transport Principles
Contractual obligations	Family & Community Services (FaCS) National Disability Insurance Scheme (NDIS) Disability Care Australia (DCA)

POLICY STATEMENT

Mater Dei is committed to the personal safety and the right of people with a disability to live in dignity and security without fear of threat or harm and to be free from exploitation and abuse.

The Organisation will:

- ensure the physical environment is safe
- conduct thorough screening of both staff and volunteers working with all clients
- assist and support clients to assess and manage risks
- support clients to safely and effectively manage and/or self-administer medication
- provide all staff with information and training on duty of care
- promote and comply with the National Safe Transport principles
- ensure that clients are protected from abuse or neglect, and that any incidents of harm are



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promptly addressed and investigated, and

- provide staff induction and training and regularly review staff levels to ensure appropriate levels of care.

PROCEDURES

1. Physical environment

It is the responsibility of Mater Dei to minimise physical risks to clients. The Organisation will meet reasonable community standards and comply with all legal requirements affecting the physical and environmental safety of clients. This includes fire safety, motor vehicle safety, water safety, swimming pool safety and public health requirements. The Organisation will implement a regular review process annually and update their compliance with community standards and legal requirements.

The Organisation will comply with Fire Risk Management guidelines which outline specific requirements relating to building construction, furnishings, smoke detection systems, fire extinguishing equipment, means of exit, fire prevention, fire safety management, evacuation capability, fire and emergency evacuation plans, emergency procedures and maintenance of essential fire safety services. Staff must be trained in relation to these guidelines. It is the responsibility of Mater Dei Leadership and Management to ensure that compliance requirements are met.

2. Staff screening

Prior to commencing work with clients, all staff and volunteers will undergo a comprehensive screening process which will include Criminal Record Check, Working with Children Check, referee checks and interviews. The findings of the screening are to be documented in the personnel files of staff and volunteers.

3. Risk assessment

A risk assessment will be undertaken by staff jointly with clients at each stage of care.

Clients will be supported to identify and manage risks in their own environment and in any activities they undertake by:

- identification and explanation of risk or potential risk
- provision of plain English information on risk management
- undertaking risk assessment jointly with staff
- following-up on written information and specific assistance to clients who may experience cultural or language barriers, and
- provision of specialised advocacy or support when required.

Where clients do not have the capacity to understand risks to their personal safety, Mater Dei will liaise with:

- appropriate authorities



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- FaCS (Family and Community Services)
- The Guardianship Tribunal, and/or
- Advocates or Advocacy Services

For services conducted in the client's home, the Early Intervention Program or Living Skills Program assessment will also include:

- Risk Assessment
- WHS Assessment, and
- Environmental Assessment.

4. Suicide and self-harm

All clients presenting with suicidal and/or self-harming behaviour will be referred to external specialist organisations to be assessed to determine the level of risk and immediacy of suicide and/or self-harm risk.

The assessment for clients with self-harming and/or suicidal behaviour will include interviews with the client; observation; medical, psychiatric and personal history; feedback from other staff and information from family/carers.

If a client is assessed as being at risk of suicide and/or self-harm, intervention strategies to decrease the risk are to be identified and a management plan developed and implemented. The external provider will provide ongoing support, guidance and assistance in an ongoing or time-limited basis as determined and agreed upon.

Where staff members are concerned about a client's immediate suicide and/or self-harm risk, the client's physical safety should be addressed without delay as a priority.

5. Risk management

Where risks of harm are identified, a range of harm minimisation strategies which may include behaviour management plan, avoidance of triggers, family support, reassurance with familiar objects and education will be discussed with the client and family. Agreed actions will then be documented in the client file and a risk management plan developed and implemented.

Risk management and harm minimisation strategies will minimise and wherever possible eliminate the need for restraint.

Where staff are required to use restraint to prevent harm to the client and/or others, this will be documented on the client file note and the *Incident, Injury and Illness Form*. The Incident Register will also be completed. An investigation of the incident and the response will be undertaken and a report prepared outlining whether any further action is required.



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All risk assessments and harm minimisation plans will be documented and included in the client's file.

6. Medication management

Staff involved in the storage, transportation, administration and/or prompting of medication will be trained in the *Mater Dei Medication Policy and Procedures* and assessed as competent prior to undertaking any medication function. Staff training will be documented and recorded in Personnel Files.

7. Transport of clients

All clients will be transported in accordance with the National Safe Transport principles.

8. Abuse and neglect risks and reporting and management procedures

Mater Dei has a duty of care to implement prevention strategies that include suitable recruitment screening processes and protocols for identifying the risk indicators for abuse and neglect. It is the responsibility of the Organisation to minimise the risk of abuse including sexual assault, physical, emotional and financial risks and neglect to clients.

Any suspected or reported allegations of abuse or neglect will be dealt with promptly and investigated and responded to in accordance with the *Protection of Human Rights and Freedom from Abuse Policy and Procedure*.

9. Record keeping

- In the case of any accident or incident causing harm to a client, a detailed written report *Incident Injury and Illness Form* will be completed within 24 hours. The report should include:
 - description of the nature and extent of the incident
 - the name and contact details of all those involved, including any witnesses to the incident
 - action taken
 - the date and signature of the person making the report, and
 - any on-going or follow up action
- Records must be stored securely in a locked filing cabinet and only accessed by specified persons including CEO/Principal, Director of Services, Clerical Assistant to the CEO/Principal or designated staff with a legitimate reason.

Staff induction and training

All staff and volunteers will participate in an induction program prior to commencement of employment. The induction program will include training on duty of care, risk assessment and management, professional boundaries, ethical behaviour and Work Health & Safety.

Training will also cover areas including but not limited to Client Rights, Positive Approach to Challenging Behaviour, Medication, Abuse & Neglect, Emergency Procedures, Community Access and Participation.



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Staffing levels will be reviewed every 12 months though these may also be reviewed at the following times: client intakes, on staff request, following an increase in challenging, client behaviour or incidents.

Staff training and/or in-service on duty of care and client safety will occur every quarter (three months).

The staff training program will be reviewed regularly and be responsive to enable any emerging issues impacting on client safety and security to be addressed as a matter of priority.

DOCUMENTATION

Documents related to this Policy	
Related Policies	Duty of Care Client Rights and Service Charter Medication Management Client Decision Making and Choice
Forms, record keeping or other Organisational documents	Incident Injury & Illness Form Emergency Management Form Risk Assessment File Note

Reviewing and approving this Policy		
Frequency	Person responsible	Approval
Two Yearly	Director of Services WHS Committee	Board of Directors

Policy review and version tracking			
Review	Date Approved	Approved by	Next Review Due
1			
2			
3			