



Facilitating Participation Procedures

As a centre for Social Enterprise, FSG Australia is committed to delivering on the values of Freedom, Social Justice and Growth.

© Copyright of all material contained in this document is owned by FSG Australia. You may print and reproduce this material in unaltered form only, for your personal use, educational use, or non-commercial use within your organisation, provided the copyright to such material is attributed to FSG Australia. Requests and inquiries for authorisation concerning reproduction and rights of any material should be directed to copyright@fsg.org.au. For further information please refer to the [Copyright Act 1968](#) (Commonwealth).

V13 – 12/5/16

Document is considered uncontrolled once printed

TABLE OF CONTENTS

SECTION A – INTRODUCTION.....	4
Glossary	4
Scope	4
Human Services Quality Standards	5
Home Care Standards	5
National Standards for Disability Services	5
NSW Disability Service Standards	6
Legislation	8
Position statement	9
SECTION B - PROCEDURE	10
1.0 Worker training, knowledge and awareness.....	10
2.0 Informing people of their rights and responsibilities.....	11
2.1 <i>All workers</i>	11
2.2 <i>Coordinator</i>	12
3.0 Facilitating an adult’s right to alcohol and tobacco products.....	12
3.1 <i>All workers</i>	12
3.2 <i>Coordinator</i>	13
4.0 Consent	14
4.1 <i>General consent</i>	14
4.1.1 <i>All workers</i>	14
4.1.2 <i>Coordinator</i>	14
4.2 <i>Children’s consent</i>	14
5.0 Funding transfer.....	15
6.0 Decision making and choice	15
6.1 <i>Decision-making spectrum</i>	15
6.1.1 <i>All workers</i>	15
6.2 <i>Facilitating decision making and choice</i>	16
6.2.1 <i>All workers</i>	16
6.2.2 <i>Coordinators</i>	18
6.3 <i>Decision making capacity</i>	18
6.4 <i>Assessing and managing risks related to decision making and choice</i>	18
6.5 <i>Duty of care</i>	19
6.5.1 <i>All workers</i>	19
6.6 <i>Values and attitudes of substitute decision makers</i>	19
6.7 <i>Direct service employee preference</i>	20
6.8 <i>Co-tenant preference</i>	20
7.0 Advocacy	20
7.1 <i>Nominating an advocate</i>	20
7.2 <i>Assisting the advocate</i>	21
7.3 <i>Managing a person’s conflict with an advocacy service</i>	22
7.3.1 <i>Coordinators</i>	22
8.0 Facilitating decision making related to personal relationships and/or sexuality....	22
8.1 <i>All workers</i>	22
8.2 <i>Coordinator</i>	23
8.3 <i>Consent and sexual relationships</i>	23
9.0 Family relationships	24
9.1 <i>All workers</i>	24

9.2 Coordinators.....	24
10.0 Individual planning	25
10.1 Person-centred approach to individual planning	25
10.2 All workers involved in individual planning process.....	26
<i>Table 1: Information to be reviewed as emergent needs arise or annually at the time of the individual planning or review.</i>	28
10.3 Coordinators	28
10.4 Community integration.....	29
10.5 Aged-care specific individual planning.....	30
11.0 Diversity.....	30
12.0 Communications	31
12.1 Complaints & feedback.....	31
12.2 FSGA membership.....	31
12.3 Consultation with customers and members	31
12.4 FSGA website	32
12.5 FSGA documents	32
12.6 Stakeholder meetings.....	32
12.7 Customer Advocate.....	33
APPENDIX A – Principles in action	34
APPENDIX B – Decision-making opportunities	36
APPENDIX C - Factors affecting decision making capacity	38
APPENDIX D – LINC Transition Process	40
APPENDIX E – Personal relationships and sexuality workers self-awareness checklist	41

SECTION A – INTRODUCTION

Glossary

Refer to [FSG Australia glossary](#)

Scope

This document applies to all FSG Australia (FSGA) workers working in a disability, aged care or mental health service apart from the exceptions listed in this scope.

A person is a worker if the person carries out work in any capacity for FSGA, including work as:

- (a) an employee; or
- (b) a contractor or subcontractor; or
- (c) an employee of a contractor or subcontractor; or
- (d) an employee of a labour hire company who has been assigned to work at FSGA or
- (e) an outworker; or
- (f) an apprentice or trainee; or
- (g) a student gaining work experience; or
- (h) a volunteer.

Customers will be in receipt of disability, aged or mental health services and may be adults, young persons or children.

This document does not apply to all activities in the Kaia Program, refer instead to the [Kaia Practice Manual](#).

Refer to: [headspace Capalaba Engaging Family, Carers and Friends Policy](#) and [headspace Capalaba Mature Minor Policy](#) for procedures relevant to headspace Capalaba.

Refer also to related policies such as [Complaint Policy](#).

Other procedures related to service delivery include:

[Facilitating intake, exit and referral procedures](#)

[Providing Medical & Health Services Procedures](#)

[Managing personal information under the Australian Privacy Principles procedures](#)

[Managing direct service delivery risks procedures](#)

FSG Australia overarching policy is available at [FSG Australia Overarching Policy](#).

Human Services Quality Standards

Standard 3: Responding to individual need

1. The organisation uses flexible and inclusive methods to identify the individual strengths, needs, goals and aspirations of people using services.
2. The organisation formulates service delivery that respects and values the individual (e.g. identity, gender, sexuality, culture, age and religious beliefs).
3. The organisation ensures that services to the individual/s are delivered, monitored, reviewed and reassessed in a timely manner.
4. The organisation has partnerships and collaborates to enable it to effectively work with community support networks, other organisations and government agencies as relevant and appropriate.
5. The organisation has a range of strategies to ensure communication and decision-making by the individual is respected and reflected in goals set by the person using services and in plans to achieve service delivery outcomes.

Standard 4: Safety, wellbeing and rights

1. The organisation provides services in a manner that upholds people's human and legal rights.
4. People using services are enabled to access appropriate supports and advocacy.
5. The organisation has processes that demonstrate the right of the individual to participate and make choices about the services received.

Standard 6: Human resources

3. The organisation provides people working in the organisation with induction, training and development opportunities relevant to their roles.

Home Care Standards

Standard 1: Effective management

- 1.6 The service provider is actively working to identify and address potential risk to ensure safety of customers, staff and the organisation.

National Standards for Disability Services

Standard 1: Rights

- 1.7 The service supports individuals with information and, if needed, access to legal advice and/or advocacy.

- 1.8 The service recognises the role of families, friends, carers and advocates in safeguarding and upholding the rights of people with disability.

Standard 2: Participation and inclusion

- 2:1 The service actively promotes a valued role for people with disability, of their own choosing.
- 2:2 The service works together with individuals to connect to family, friends and their chosen communities.
- 2:3 Staff understand, respect and facilitate individual interests and preferences, in relation to work, learning, social activities and community connection over time.
- 2:4 Where appropriate, the service works with an individual's family, friends, carer or advocate to promote community connection, inclusion and participation.
- 2:5 The service works in partnership with other organisations and community members to support individuals to actively participate in their community.

Standard 3: Individual outcomes

- 3:1 The service works together with an individual and, with consent, their family, friends, carer or advocate to identify their strengths, needs and life goals.
- 3:2 Service planning, provision and review is based on individual choice and is undertaken together with an individual and, with consent, their family, friends, carer or advocate.
- 3:3 The service plans, delivers and regularly reviews services or supports against measurable life outcomes.
- 3:4 Service planning and delivery is responsive to diversity including disability, age, gender, culture, heritage, language, faith, sexual identity, relationship status, and other relevant factors.
- 3:5 The service collaborates with other service providers in planning service delivery and to support internal capacity to respond to diverse needs.

NSW Disability Service Standards

Standard 1 - Rights

- 1.1 Each person is aware of their rights and can expect to have them respected
- 1.2 Each person will receive a service that maximises their choices for social participation and cultural inclusion
- 1.5. Each person can expect service providers to support and encourage self-protective strategies and behaviours that take into account their individual and cultural needs
- 1.6 Each person can expect service providers to uphold their right to make decisions, including medical treatments and interventions, and when this is not possible, assisted or substituted (alternative) decision making is in line with the person's expressed wishes, if known and if not, with their best interest
- 2.2 Service providers encourage and support access to advocacy services by people with a disability to promote their rights, interests and wellbeing

2.5 Service providers take into account individual choice and the rights of each person and act in their best interests in relation to nutritional and behaviour management practices in line with relevant legislation, convention, policies and practices

Standard 2 – Participation and inclusion

1.1 Service providers support each person to make decisions about how they connect with their chosen community, respectful of their choices and plans including work, learning, leisure and their social lives

1.3 Service providers work with people with a disability and their community to promote opportunities and support their active and meaningful participation

1.4 Service providers, with the consent of the person with a disability, work with an individual's family, carer, significant other or advocate to promote their connection, inclusion and participation in the manner they choose

2.1 Service providers actively seek information about other supports and services in their local community to enable people with a disability to achieve their goals and to minimise barriers to participation

Standard 3 – Individual outcomes

1.1 Service providers respect the right of each person to be at the centre of decision making and to have responsibility, as much as possible, for each decision which affects them

1.2 Service providers support each person to determine the involvement of their family, carers and advocates in planning and decision making processes

1.3 Service providers respect the views of family and carers in planning and decision making processes. The person with a disability has the final say in the process

1.4 Staff and volunteers respond in innovative and flexible ways to each person's need for decision support which reflect their individual and cultural needs

1.5 Service providers make every effort to enable a person to make a decision or assist families, carers and advocates to come to an agreement before a substitute decision maker is engaged.

2.1 Service providers work together with the person to develop and implement a plan that identifies and builds on the person's strengths, aspirations and goals. Plans should draw on broader family, cultural and religious networks and community organisations

2.2 Service providers support each person, and (when necessary with consent) their family, carer or advocate to develop, review, assess and adjust their plan as their circumstances or goals change

2.3 Service providers recognise the importance of risk taking and enable each person to assess the benefits and risks of each option available to them and trial approaches even if they are not in agreement

Legislation

Refer to [Legislation guide for more information](#)

Aged Care Act 1997 (Cwlth)

Australian Human Rights Commission Act 1986 (Cwlth)

Child Protection Act 1999 (Qld)

Child Protection (Working with Children) Act 2012 (NSW)

Crimes Act 1900 (NSW)

Crimes (Forensic Procedures) Act 2000 (NSW)

Criminal Code Act 1899 (Qld)

Disability Inclusion Act 2014 (NSW)

Disability Services Act (Qld) 2006

Disability Services Act 1986 (Cwlth)

Disability Services Regulation 2006 (Qld)

Guardianship Act 1987 (NSW)

Guardianship and Administration Act 2000 (Qld)

Powers of Attorney Act 1998 (Qld)

Queensland Civil and Administrative Tribunal 2009 (Qld)

Useful links:

http://www.adhc.nsw.gov.au/_data/assets/file/0006/228084/Decision_Making_and_Consent_Policy_and_Procedures_Apr_2012.pdf

http://www.adhc.nsw.gov.au/_data/assets/file/0005/228290/DADHC_PersonCentred201208.pdf

http://www.adhc.nsw.gov.au/_data/assets/file/0005/241088/Lifestyle_Planning_Policy_Aug_2012.pdf

Position statement

1. In the first instance customers are presumed to have the [capacity](#) to make their own decisions.
2. A presumption of capacity applies each time a customer is required to make a decision about a new issue or in a new situation.
3. Customers may expect to be supported to make decisions that affect them if support is required.
4. Decisions about day-to-day issues are made by customers and if support is required, [family](#), close friends and workers provide it informally.
5. When a customer is unable to make a critical decision without assistance, significant persons in their life, with regard to the best interests of the customer, may provide informal support to make the decision.
6. In the cases of any disagreement about what constitutes the best interest of the customer or particularly critical decisions, a [substitute decision maker](#) with the specific decision making function may be required to give or withhold consent.
7. Parents and guardians of customers under 16 years have the right to make decisions for them unless services are funded by Child Safety Services.
8. Customer' views are taken into account whether they are the ones making decisions or are having decisions made by a [substitute decision maker](#).
9. Where there is conflict, dispute or disagreement about what is best for the customer, and the customer does not have the capacity to make the decision, FSGA must first attempt to resolve the conflict informally.
10. Customers who are unable to make decisions with or without support, and who have a legally appointed guardian with a specific function, or an administrator/financial manager, are to be represented by that person whenever this is required.
11. Within available resources, services provide information about all reasonable options to assist a customer and legally appointed guardian to make decisions that are in the best interests of a person. ‘

SECTION B - PROCEDURE

1.0 Worker training, knowledge and awareness

All FSGA workers are trained in Human Rights in Practice with the aim to ensure that service development, implementation and review procedures respect and appreciate customers, is driven by a [strengths-based](#) and [person-centred](#) approach and always considers the principles of [least restrictive alternative](#), [social role valorisation](#), human rights, [inclusion](#) and [self-determination](#).

Where required to facilitate communication, workers may also be required to have skills in or receive training in [alternative and augmentative communication](#) (AAC) e.g. Makaton. AAC strategies are designed to support a person's speech abilities and to replace speech when, for varying reasons, such as physical disability, speech development is not possible. AAC may be a combination of methods used for communication. Communication is a two-way process; an individual must be able to successfully send a message to another individual who in turn must be able to successfully receive it. AAC may involve strategies for both sending and receiving messages for both the individual using AAC and their communication partner/s. The aim of AAC is to provide an individual with a means of independent communication and to maximise their ability and opportunity to successfully participate in everyday environments. Quality of life and feelings of well-being improve when AAC is used successfully by people with complex communication needs. AAC includes all forms of communication that are used to express thoughts, needs, wants, and ideas. We all use AAC when we make facial expressions or gestures, use symbols or pictures, or write. AAC may be used to support the understanding of communication as well as to promote expressive communication. AAC strategies need to be tailored to the person so they "fit in" with lifestyle, environments, social circumstances and peers.

1.1 All workers

You must:

- attend training if directed, to enable you to facilitate a person's decision making and participation in service development, implementation and review
- attend Human Rights in Practice Training and refresh the training in accordance with FSGA requirements
- fully understand a person's service-specific rights and responsibilities (this may require you to read information which is given to a person using an FSGA service)

- be aware of a person's capacity and inform the Coordinator if the level of service requires changing to ensure the least restrictive support.

1.2 Coordinator

You must:

- ensure workers are competent and confident to facilitate a person's decision making and participation in service development, implementation and review
- provide access to information detailing customers' rights.

2.0 Informing people of their rights and responsibilities

2.1 All workers

- You should inform the person (or their [substitute decision maker](#)) of their rights and responsibilities.
- If you are participating in a person's service review, which is held at least annually, you are to discuss the person's rights and responsibilities with them or their [substitute decision maker](#). A record is kept of this on the planning document which is placed on the person's file.
- As well as formal procedures, you should at all times encourage and provide opportunities for people to discuss concerns or express ideas in an informal manner.
- You should use [alternative and augmentative communication](#) whenever it will facilitate decision making and understanding.
- When required, arrange interpreters to facilitate decision making and understanding in accordance with the [Aboriginal and Torres Strait Islander Policy](#) and the [Culturally and linguistically Diverse Policy](#).
- Where appropriate, you should provide [Fact Sheet 4 Rights and Responsibilities](#) which has information about a person's right to approach external organisations e.g. the State Ombudsman, Public Guardian, Children's Commissioner, Health Rights Commission, advocacy services, Queensland Police Service or program funding body as appropriate.

2.2 Coordinator

- At the time of intake you must ensure that sufficient information is provided to inform people or their [substitute decision maker](#) of the customer's rights and responsibilities.
- Ensure a new customer or their [substitute decision maker](#) is provided with [Fact Sheet 10 Advocacy Fact Sheet](#) and [Fact Sheet 4 Rights and Responsibilities](#) (or service-specific alternative). The recipient is asked to sign off understanding of the fact sheets on the [Record of Fact Sheet Provision](#). You may provide [Pictorial Fact Sheets](#) where this will facilitate understanding.
- Children and young people placed by the Child Safety Services are provided with program-specific documents. Refer to the [Kaia Program Practice Manual - Foster Care](#) and [KAIA Program Practice Manual - Residential Care Services](#) for more details).
- Other service-specific information is provided as necessary.
- You are required to ensure that at least annually, at the time of individual planning, people are reminded of their rights and responsibilities.

3.0 Facilitating an adult's right to alcohol and tobacco products

3.1 All workers

- When a service is provided to an adult who does not have capacity to consent to their consumption of alcohol and tobacco products and the person is requesting access to alcohol and/or tobacco products, you are to access the person's file to check whether you are authorised by the [substitute decision maker](#) to provide access to these substances.
- When a service is provided to an adult who does not have capacity to make their preferences known, you are to access the person's file to check whether these preferences have been recorded by the [substitute decision maker](#).
- When required to store alcohol and tobacco products on behalf of an individual, you must store them in a manner which does not allow access to other people using FSGA services.

3.2 Coordinator

- You are responsible for placing on a person's file, current and sufficient information which is required to meet the person's individual needs.
- You must have a system in place to review the information on the person's file at least annually or as required to ensure it is current and sufficient.
- When a service is provided to an adult who does not have capacity to consent to their consumption of alcohol and tobacco products and the person may request access to alcohol and/or tobacco products, you are to ensure the [substitute decision maker](#) provides consent and place notification on the person's file.

4.0 Consent

Also refer to [8.3 Consent and sexual relationships](#).

4.1 General consent

4.1.1 All workers

A person's [consent](#) can be withdrawn at any time, so if a person's reactions may be indicating withdrawal of consent for a particular activity, you must seek assistance immediately to involve the person in a review of the service. Refer also to [Providing Medical & Health Services Procedures](#) for procedures relating to medical consent.

A person, wherever possible, is to exercise consent personally.

The person may not have the [capacity](#) to consent if the person is unable (even with assistance and advice) to:

- understand the nature and effect of his/her decision (including the consequences of declining a service)
- freely and voluntarily make the decisions
- communicate the decision in some way.

You are unable to give consent of a legal nature on behalf of a person receiving an FSGA service unless you also have another relationship with the person which gives you this authority e.g. you are the person's parent.

4.1.2 Coordinator

You are responsible for ensuring that relevant [consent](#) forms are current (updated at least annually) and placed on the person's file.

If an adult does not have the [capacity](#) to give consent, and when all other suitable alternatives have been tried, you are to seek advice from the Civil and Administrative Tribunal.

4.2 Children's consent

For [consent](#) procedures for children who access a service funded by the Department of Communities, Child Safety and Disability Services - Child Safety Services, refer to the

[Kaia Program Practice Manual - Foster Care](#) and [KAIA Program Practice Manual - Residential Care Services](#).

Where written consent is required related to services delivered to children (less than 18 years of age), you are to seek the written consent from the [child representative](#).

Whether or not written consent is required, you are to ensure children (particularly in the case of adolescents) are provided with increasing opportunity and support, in line with the person's increased maturity and understanding of service provision, to give their view on the service they receive.

5.0 Funding transfer

Payroll & Finance ensures that policies and procedures facilitate the timely transfer of funding between service providers, thus ensuring responsiveness to a person's needs and requests.

6.0 Decision making and choice

Refer also to [APPENDIX A – Principles in action](#)

Part of this section is available in the [Work Area Orientation Manual](#).

6.1 Decision-making spectrum

6.1.1 All workers

FSGA recognises there are levels of support required by people to make decisions i.e. advice, support and informal arrangements through to more formal arrangements and [substituted decision making](#). You are required to provide an environment in which the least restrictive decision-making level is encouraged for each decision and individual.

From least restrictive to most restrictive, the levels of decision making include:

1. [Autonomous decision making](#)
2. [Supporting decision making](#)
3. [Supported decision making](#)
4. [Substitute decision making](#)

You are required to understand the types of decisions people might need to make. These include, but are not limited to:

Day to day: what to wear, meal times and diet, sleeping routine.

Lifestyle and recreation: [family](#) and friendships, relationships and sexuality, involvement in cultural and religious events, fitness regime, shopping, social media, smoking/drinking, entertainment, holidays and recreational activities.

Employment and education: choosing work, applying for jobs, attending training/education.

Living arrangements: where and with whom to live, type of accommodation and decorating, maintaining accommodation.

Access to services: choosing service providers, choosing services and times, choosing direct service employees.

Healthcare and medical: routine medical and dental checks, emergency arrangements, specialised treatment providers.

Financial: saving, spending, getting a loan, lending money.

Legal: entering into contracts, providing consent, power of attorney, advanced health directive, wills, relationship-related contracts.

6.2 Facilitating decision making and choice

6.2.1 All workers

Where necessary to facilitate a person's decision making and choice you are required to:

- allow time for people making decisions to explore their thoughts and feelings
- understand that it's difficult to make decisions about some issues and that it's normal not to have an answer straight away
- encourage people to make up their own mind about what they think
- take the time to ask people their opinions and not assume what they want
- help to set up situations where people have real choices, refer to [APPENDIX B – Decision-making opportunities](#)
- take the time to get to know the person and other important people in their life

- find out how the person communicates best and understand what they are trying to communicate
- follow up requests by people to try new things, even if they aren't clear what they want to try
- offer people information, including risks and the associated controls, about a range of options
- understand that people may need time to explore and/or try new activities
- work at creating an environment in which risk is tailored to each person
- create opportunities for people to explore their thoughts and feelings before, during and after decisions
- assist people to obtain information that will explain any consequences of changing a decision with the person, including any financial or legal obligations
- seek to understand the values and attitudes of any person who is involved in decision making
- respect the values of the person and any decisions or actions based on these
- respectfully consider concerns raised by a person's [substitute decision maker](#) with regard to their decision making
- assume a person has capacity to make decisions in the first instance
- consider the factors which might affect a person's decision making ability before making further assumptions about a person's [capacity](#)
- uphold the culture of there being no 'right' or 'wrong' decisions and that it is okay for people to change their mind
- consider your own values and motives for questioning a person's decisions
- where appropriate, document, and be able to justify, reasons for thinking that the person does not have capacity and refer this to your Line Manager
- discuss decision-making concerns with the Line Manager before taking any action to seek [substituted decision making](#)
- consider and manage risks at a level that is appropriate to the issue
- take time to understand FSGA's values and [Code of Conduct](#)

- raise any concerns with the Line Manager about any decisions with which they disagree.

6.2.2 Coordinators

Where necessary refer a person for specific support or assistance e.g. advocacy services.

6.3 Decision making capacity

Please also refer to [APPENDIX C - Factors affecting decision making capacity](#)

You are to assume [capacity](#) as a starting point as it ensures respect for a person's individual circumstances.

Capacity can be lost—temporarily or permanently—or regained depending upon a number of factors including:

- a person's current health condition, including mental health or the effects of drugs and alcohol
- levels of stress or recent traumatic events
- the timing of the decision
- a person's familiarity with the subject matter and appropriateness of any information they have been given
- the physical environment and any distractions.

6.4 Assessing and managing risks related to decision making and choice

[Risk](#) is a common issue that arises when considering decision making. FSGA believes that people should be able to take risks (this is known as [dignity of risk](#)). It assumes that a person has explored and understands the pros and cons of a decision or experience, including possibility of personal loss or injury. All this considered the person may still want to go ahead.

FSGA values the importance of risk as an experience in itself. Exploring, understanding and finding ways to address risk can be challenging but also highly rewarding.

Approaches to risk should be undertaken positively and in partnership with the person and, where relevant, their [substitute decision maker](#). This means working together to understand the nature of potential risks, consider creative measures to minimise any risks and determine the agreed action. Any measures taken should be appropriate to

the size of the risk and the activity. FSGA's [risk management framework](#) offers a way to assess risk and develop strategies to reduce the impact of any identified risk.

Workers need to be thoughtful about their own fears and anxieties and whether they are in perspective.

6.5 Duty of care

6.5.1 All workers

You have a [duty of care](#) to ensure that reasonable action is taken to minimise the risk of harm to anyone you are supporting. Reasonable action is to follow lawful work direction in line with the duties and obligations of the work position, qualifications held and the capacity of the people making the decision.

You are responsible for taking an active, imaginative and flexible approach to managing potential risks. You should support people to make decisions by offering information about options and risks.

FSGA's [risk management framework](#) offers a way to assess risk and develop strategies to reduce the impact of identified risk.

If a person is denied access to an activity subject to restriction based on the level of risk being unacceptable, you must document the reason, including any assessment used.

Documentation of the restriction must include evidence of all strategies considered and tried in attempting to reduce or manage the risks.

6.6 Values and attitudes of substitute decision makers

Some people are not able to make some or all of their decisions. In these situations a person may require some degree of [substituted decision making](#).

Whilst [substitute decision makers](#) may have the best interests of the person mind, this does not mean they share all the same values. Differences of opinion can still occur. It is important that you recognise the opinions of those who are important in the lives of people. However, this should not compromise the right of the person to have the final say in their decision.

6.7 Direct service employee preference

This Section does not apply to services provided by the Kaia Program; please refer to the [Kaia Program Practice Manual - Foster Care](#) and [KAIA Program Practice Manual - Residential Care Services](#).

At intake, individual plan review and at the request from the person or [substitute decision maker](#), opportunities are provided to express a worker preference. Preference may include, for example, gender, age, location, cultural background or experience. Direct Service Employee attributes are considered when matching Direct Service Employees to customers' need, in order to meet individual needs and respect a person's privacy and dignity. Preference is recorded on the [Direct Service Employee Preference Form](#) and placed on the person's file.

FSGA takes into consideration a person's needs and preferences when developing individual plans.

6.8 Co-tenant preference

This section does not apply to services provided by the Kaia Program; please refer to the [Kaia Program Practice Manual - Foster Care](#) and [KAIA Program Practice Manual - Residential Care Services](#).

When people are [co-tenants](#) in accommodation, in line with FSGA's Human Rights in Practice philosophy, people are supported and given the opportunity to express their preference for co-tenants e.g. sex, age and compatibility.

[Substitute decision makers](#) may be involved in the process depending on the [capacity](#) of the person to express their preference.

For the transition process please refer to [APPENDIX D – LINC Transition Process](#).

7.0 Advocacy

This section is included in part or fully in the [Work Area Orientation Manual](#)

7.1 Nominating an advocate

People are encouraged to be represented by either a formal advocate (advocacy service) or informal advocate ([family](#), friend, or interested party) to participate in decision-making processes affecting their lives.

People are informed that advocates must be independent of FSGA workers if there is the potential for a [conflict of interest](#) or the FSGA advocate may assist in these matters.

Delegated FSGA workers ensure that advocates have an interest in, or sensitivity to, the customer's needs and should only refer people to advocates or advocacy services that respect people's cultural, religious and linguistic identity.

Where appropriate, when people cannot speak or understand English, and/or are hearing impaired or deaf, delegated FSGA workers ensure that the person is aware that they have a right to have an interpreter present.

Where appropriate, delegated FSGA workers involve people in the advocacy referral process and ensure they are provided with the advocate's contact details.

7.2 Assisting the advocate

Information is provided to the advocate with the customer's [consent](#) or, where the person does not have [capacity](#) to consent, the [substitute decision maker](#):

- The [Complaints - Fact Sheet](#) is given to advocates when it is necessary to inform them of the person's right to complain and the process to do so.
- Advocates may be given information about a specific customer's issues and needs which are related to the advocacy role.
- Advocates may be given information about community activities and services which could be useful in meeting the customer's needs and which are related to the advocacy role.

The development of a positive and productive relationship is fostered between the advocate, customer and workers in order to enhance outcomes for the person. This relationship may be enhanced by:

- defining clear roles and responsibilities at a planning meeting
- developing an agreement outlining the person's needs, desires and goals which may be based on the relevant individual plan form. Refer to the [Kaia Program Practice Manual - Foster Care](#) and [KAIA Program Practice Manual - Residential Care Services](#) for procedures pertaining to the Kaia Program
- regularly reviewing the agreement with the person and the advocate
- clarifying confidentiality issues
- assisting/enabling customers to access the advocate when they choose
- respecting the advocate's right to visit and speak in privacy with the person

- encouraging regular contact between the person and the advocate.

7.3 Managing a person's conflict with an advocacy service

7.3.1 Coordinators

In the event of conflict (including a [conflict of interest](#)) between an advocacy service and an FSGA customer, you may facilitate access to information in appropriate formats about the advocacy service's complaints process. Where required, information and support to access and follow through on lodging a formal complaint may also be provided.

Should it be necessary, information and support may be provided to the person to enable them to access alternative advocacy services e.g. by providing the [Advocacy Fact Sheet](#).

Where necessary you may consult with management with the aim of obtaining the best outcome for the person and to renegotiate roles and responsibilities through individual planning as needed.

8.0 Facilitating decision making related to personal relationships and/or sexuality

8.1 All workers

Within legal constraints, when an FSGA service includes facilitating a person's decision making related to personal relationships and/or sexuality you are required to:

- provide guidance and information to the person which will enable to person to assert their rights, know their responsibilities and avoid exploitation
- encourage people to self-advocate, where possible, or access an advocate of choice (refer to [7.0 Advocacy](#))
- develop strategies to address personal relationship issues in accordance with the person's individual needs using the individual planning process (refer to [10.0 Individual planning](#))
- give adults information to make choices, where possible, and with consent you may refer them to external agencies if required following your programs referral procedures (refer to [4.0 Consent](#))

- recognise that the primary source of knowledge, values and emotional support to children in the area of personal relationships and sexuality is, in most instances, the [child representative](#)
- give children, who face challenges, information and refer them to other organisations, if appropriate, following your programs referral procedures and in consultation with the [child representative](#)
- maintain a customer focus where mediation may be required between them and their [substitute decision maker](#). You may be required to assist people to manage situations of [family](#) conflict and, where possible and appropriate, you should preserve existing relationships (refer to [9.0 Family relationships](#))
- talk to your Line Manager if you do not feel confident to provide a service related to personal relationships and sexuality.

8.2 Coordinator

If you are approached by a worker who expresses their lack of confidence to provide a service which relates to personal relationships and/or sexuality, use the checklist at [APPENDIX E – Personal relationships and sexuality workers self-awareness checklist](#) to assist them to discuss this with you.

8.3 Consent and sexual relationships

A customer has the legal right to consent to a sexual relationship if both partners are of legal age providing that the customer has given free and informed consent.

Before consenting to a sexual relationship a customer should be aware that the person with whom she or he is planning to have that relationship will be committing a crime if:

- the other person is a DSE supervising the customer; and/or
- the other person intends to take advantage of or sexually exploit the customer, and knows the customer has an intellectual disability.

Consent, as it relates to a customer with a disability consenting to a sexual relationship, is the permission or agreement given by the customer to the relationship, as long as both partners are of legal age. To give valid consent the customer must understand what they are physically consenting to, for example, petting, kissing or penetration. The customer must also understand the sexual nature of the touching, as opposed to non-sexual touching associated with washing or receiving medical treatment. The customer

does not need to understand associated issues such as pregnancy, sexually transmitted diseases or contraception for their consent to be considered valid.

Additionally, the consent given by the customer must be given freely and the customer must understand and be able to exercise the right to decline a sexual relationship.

When required, it is the responsibility of workers to provide information which facilitates customer decision making when they are wishing to engage in a sexual relationship.

9.0 Family relationships

Information in this section is available in the [Work Area Orientation Manual](#).

When an FSGA service includes involvement in [family](#) relationships, FSGA will encourage the person to maintain healthy relationships with their families whilst respecting their right to form networks and relationships of their choosing. FSGA recognises that a family which includes a person with a disability or a person with functional limitations due to age and frailty, may experience significant consequences as a result of the way their family functions and may require access to service/s to support family functioning.

9.1 All workers

You are required to inform the Coordinator if you become aware of a conflict between a customer and their [family](#).

Refer to the person's individual plan to get direction on your level of involvement and/or strategies related to family relationships.

9.2 Coordinators

When required, you are responsible for ensuring that FSGA facilitates communication between a customer and their [family](#) by:

- providing jargon-free communication to the family
- providing information about services
- collaborating with other services thereby getting the best possible outcomes for the customer
- fostering trust and respect between workers, families and customers
- providing a range of options to meet a person's needs and the opportunity to negotiate service delivery (within available resources)

- creating opportunities to develop links with families
- providing information about access to counselling and support networks
- providing information about advocacy services (refer to [7.0 Advocacy](#)).

At times there may be issues which cause conflict between family wishes and the customer's rights:

- Person over 18 years and the consumption of alcohol
- Person over 18 years and the forming of serious relationships
- Person over 18 years and participating in a high-risk activity e.g. sky diving
- Person over 18 years who asks for information not to be shared with family
- Person of any age who does not enjoy an activity which the family has chosen
- Person and their advocacy rights
- Person and statutory health rights

Once aware of the conflict you must ensure that conflicts are discussed with the customer and the family in a timely fashion with the aim to resolving conflicts. Issues are to be discussed and worked through in a responsible and non-judgmental manner. You may seek advice from management if required.

10.0 Individual planning

Procedures in this section are included in the [Work Area Orientation Manual](#)

10.1 Person-centred approach to individual planning

Refer also to: [Fact Sheet 3 Person-Centred Plan](#)

FSGA uses a [person-centred](#) approach in all aspects of individual planning. This approach focuses on strengths, gifts and talents with the belief that every single individual has their own life to lead—a life that is right for them. This means that the management and decisions are guided by the customer and [substitute decision maker](#) or parent/carer (where appropriate) through continuous cycles of planning, acting, observing and reflecting.

[Strengths-based](#) practice is implemented at FSGA by:

- approaching the person, workers, service providers and all stakeholders with a positive attitude about a person's dignity, capacities, rights, uniqueness and commonalities
- emphasising a person's ability to be their own agent of change by creating conditions that enable them to control and direct the process of change
- providing resources in a way that complements a person's existing strengths and resources—as opposed to compensating for deficits
- acknowledging and addressing power imbalances between workers and customers
- seeking to identify and address social, personal, cultural and structural constraints to a person's growth and liberation
- giving emphasis to the voice of the person and to those significant to them.

10.2 All workers involved in individual planning process

- If you are unsure about any aspect of the individual planning process e.g. how to communicate effectively with a customer, you should seek assistance before attempting to be involved in the process.
- Your role is to ensure that the individual plan is driven by the customer and:
 - accurately identifies the person's wishes, dreams, aspirations, needs and goals
 - records priorities
 - records unmet needs and strategies to address them
 - addresses needs without discrimination
 - describes the skills to be developed
 - describes the resources to be used
 - describes how services will be coordinated
 - describes informal support such as unpaid support
 - describes how the person's needs will be met including health and wellbeing, physical, [psychosocial](#), communication, cultural and decision making

- meets funding body requirements e.g. for services funded by Ageing, Disability and Home Care (NSW), the
 - [ADHC Lifestyle and Environment Review Form](#) is required to be completed prior to the individual planning process
 - [ADHC Baseline Skills Assessment](#) (primarily for customers with Down Syndrome over the age of 30 years) is reviewed at the time of individual planning
- records a review date (at least annually)
- records the names of people who participated in the process.

If not already recorded in the plan, you will be responsible for:

- ensuring that strategies are implemented in the least restrictive manner; balancing [duty of care](#) and [dignity of risk](#) (refer to [6.5 Duty of care](#))
- where possible, respecting the person's right to express a preference of Direct Service Employee (refer to [6.7 Direct Service Employee preference](#))
- ensuring that any [restrictive practices](#) discussed are implemented in accordance with the [Managing Direct Service Strategies](#) or [Restrictive Practices Procedures](#)
- requesting a review of the plan if emergent needs arise or at the person's request
- developing further documents to support the individual plan if required e.g. a care plan (refer to [10.5 Aged-care specific individual planning](#)).

You are responsible for reviewing the information relevant to the person as detailed in [Table 1: Information to be reviewed as emergent needs arise or annually at the time of the individual planning or review.](#)

Information	Review
ADHC Baseline Skills Assessment	Currency & completeness
ADHC Lifestyle and Environment Review Form	Currency & completeness
ADHC Reactions Support Plan	Currency & completeness
Anaphylaxis action plan	Currency & completeness
Carer information	Currency & completeness
Customer financial contribution agreement	Currency
Consent for diabetes consultation	Currency
Consent to pedicure and manicure	Currency
Consent to release personal information	Currency
Diabetes management plan	Currency & completeness
DSE preference	Currency
Epilepsy management plan	Currency & completeness
Fact sheet sign off	Information requested
Medication consent	Currency & completeness
No response to customer home visit plan	Currency
Positive support plan	Currency & completeness
PRN authorisation	Currency & completeness
Profile	Currency & completeness
Restrictive practices documentation	Currency & completeness
Verification of customer's safety home alone	Currency & completeness

Table 1: Information to be reviewed as emergent needs arise or annually at the time of the individual planning or review.

Note: Not all information may be relevant to an individual and the names of documents may vary between programs.

10.3 Coordinators

You are responsible for:

- ensuring that each person has a worker delegated to walk alongside them and, where necessary, provide assistance to record an individual plan

- ensuring the individual plan is negotiated as soon as possible and prior to receipt of service; however, if the service is short term there may only need to be a statement outlining the service to be provided
- monitoring the quality of the planning process and continuously improving the process e.g. ensuring training is arranged for workers as required (refer to [1.0 Workers training, knowledge and awareness](#))
- ensuring individual plans are recorded on FSGA-approved service-specific forms
- ensuring a procedure is in place to inform workers of the relevant content of individual plans prior to service delivery
- ensuring there is a procedure to prompt individual plan review dates as specified on the plan, as emergent needs arise or as requested by the person or [substitute decision maker](#)
- ensuring adequate information is provided to the person, including their plan, in a format they can understand e.g. hardcopy, telephone, face-to-face, home visit, to facilitate their decision making, participation in service development, implementation and review processes and expression of complaints, needs or ideas for improvement
- ensuring relevant information is provided at all stages of a customer's involvement with the service, including on first contact, during intake, on service commencement, during reviews and on an ongoing basis
- ensuring the service works closely with local service providers, businesses and agencies to link people to a variety of recreational, vocational and community experiences. This builds and strengthens both formal and natural support networks.

10.4 Community integration

Customers are given information and provided opportunities to enable them to make decisions about:

- accessing community activities of their choice
- developing friendships and social networks with members of the community
- nurturing relationships of their individual choice with parents, [family](#) and friends

- having opportunities to become aware of events and facilities available in their local community
- developing their skills and interests
- participating in decision making within the local community e.g. voting
- expanding their support and social networks wherever possible, beyond service providers and towards meaningful relationships within the community
- utilising informal community support people
- accessing opportunities to further enhance their health and education
- accessing opportunities to further enhance their current skills and competencies and learn new ones
- seeking employment opportunities.

10.5 Aged-care specific individual planning

In addition to the procedures detailed in this section, there are procedures specific to the aged care sector:

- Individual eligibility is checked at the referral stage of the [case management](#) process.
- When a carer is receiving support there is a documented [carer support plan](#).
- All Flexible Respite Services follow the [case management](#) process but may use service-specific documentation/processes to meet the needs of persons accessing that service.
- For Cottage Respite/Residential Respite/In-Home Respite, the individual care plan is the [care recipient support plan](#). Copies of the daily living plan for Cottage Respite guests, which by their nature are short term, are to be provided to the primary carer in advance of the guest's stay.
- The care plan implementation strategies are to be flexible, holistic and responsive to a care recipient's/carer's individual need.

11.0 Diversity

At FSGA, we recognise the value of and strongly support the principles of equal employment opportunities in the workplace. We expect everyone to treat each other

with respect and dignity. We promote the principles of merit and fairness in its employment practices. This means people are selected because they are the best person for the job.

We aim to recruit people with a diverse range of talents to help us achieve our goals.

We specifically acknowledge that there are many people who can add value to our organisation and we encourage and support anyone who would like to help us make a positive difference in our community and add to the organisation in all facets of decision making; including participation as a Board of Director, employee, volunteer, member of an advisory group or person giving us service delivery feedback.

12.0 Communications

Information in this section is available in the [Work Area Orientation Manual](#).

12.1 Complaints & feedback

Customers and stakeholders may make complaints formally and informally (refer to [Managing Complaints Procedures](#)) or make suggestions. Please also refer to [7.0 Advocacy](#).

Feedback on service delivery is via formal and informal means (refer to [Facilitating Service Delivery Feedback Procedures](#)).

12.2 FSGA membership

FSGA membership is open to everyone. Members assist in setting the direction of the organisation through voting rights at annual general meeting and extraordinary meetings. Member benefits include receiving updates and information about new services or changes to services.

12.3 Consultation with customers and members

In recognition of the role members, customers and stakeholders play in assisting in strategic endeavours, regular consultation with customers, members and stakeholders is undertaken. Consultation may be informal or through formal means such as surveys, research, contracting consultants, etc. Customers may also participate in advisory/steering groups as a mechanism for providing expert input into activities and services.

Assistance is provided to facilitate communication where required.

12.4 FSGA website

The FSGA website is a primary tool for distributing outgoing information and provides the means for customers to communicate with FSGA by:

- contributing to the website
- applying for membership
- linking to Facebook, Twitter and YouTube
- providing feedback to FSGA
- participating in the FSGA blog
- reading information on the website and then providing feedback or asking questions about FSGA.

The newsletter is available on the website and is produced quarterly with a diverse target audience.

12.5 FSGA documents

Documents such as annual reports, strategic plans and brochures are provided to customers, members and stakeholders with current information about FSGA's activities, performance and plans.

Relevant communication is in a format which is suitable for the target audience.

12.6 Stakeholder meetings

FSGA workers participate in regular meetings with relevant stakeholders to provide support, share information about current projects and issues and to gather feedback on services. Regular contact with stakeholders is part of FSGA's service delivery.

FSGA participates in the G8 Summit with the state's eight largest non-government disability service organisations to discuss unmet needs and to advocate for rights as a united voice.

G8 members share resources, information and work together to resolve common concerns and achieve collective goals. FSGA then submits these to government and to the community on behalf of the people we walk alongside.

FSGA is an active member of the following associations and organisations:

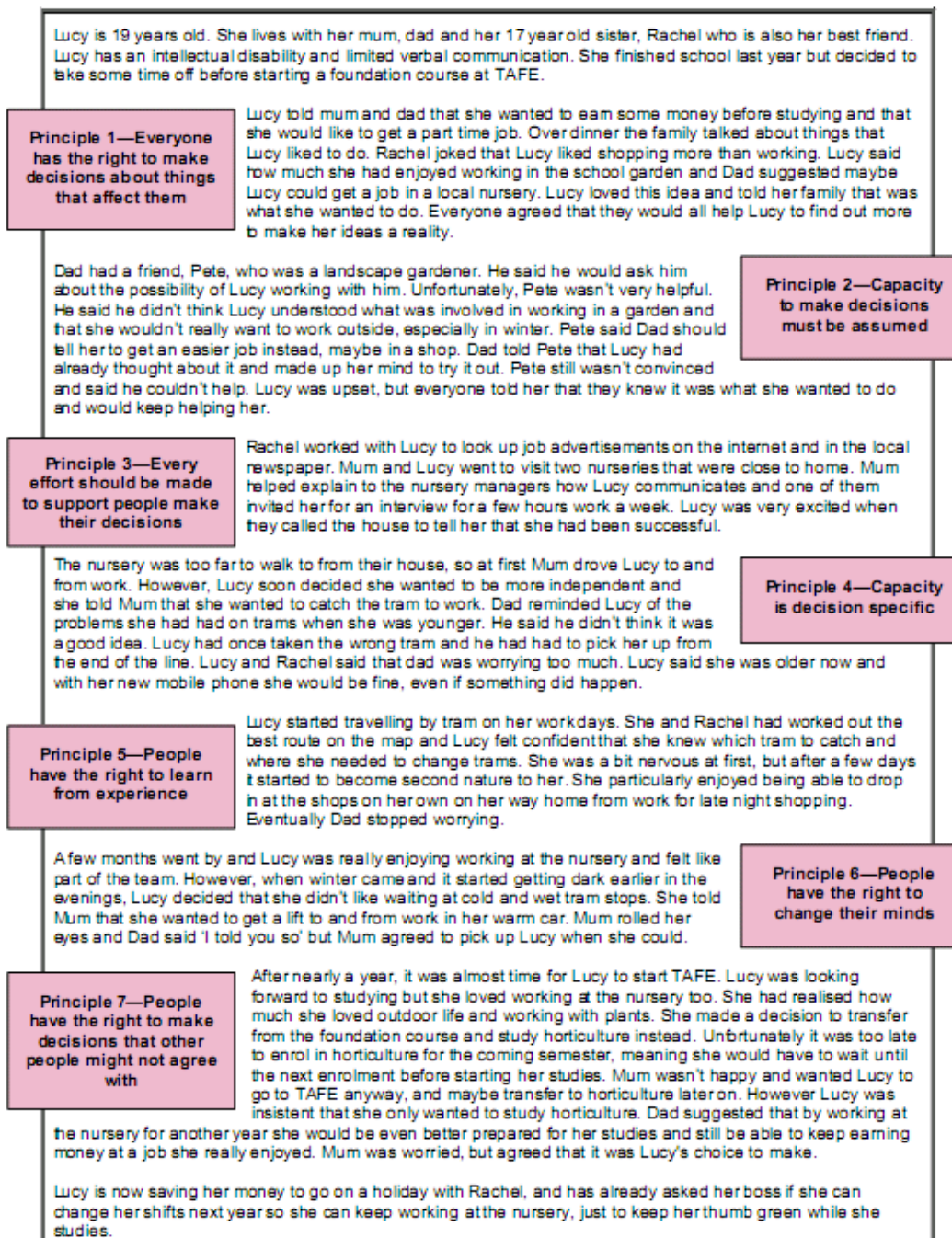
Queensland Shelter
National Disability Services (NDS)
Chamber of Commerce and Industry Qld
Queensland Alliance of Mental Illness
Asperger Services Australia
Aged Care Queensland
Nerang Community Respite Care Association
Australasian Society for Intellectual Disability (ASID)
Queensland Council of Social Services (QCOSS)
Institute of Business Leaders
Mental Fellowship of Queensland.

12.7 Customer Advocate

The Customer Advocate facilitates opportunities for individuals to attend focus discussions and have a voice. In fact, attendees set their own agenda and come up with great suggestions that make a positive difference in their lives. The Customer Advocate also advocates for people's needs such as equipment and mobility aids. ‘

APPENDIX A – Principles in action

Lucy's decisions



Ash's decisions

Ash is 25 years old. He lives in a group home with three men who are all older than him. He has a brother who lives in Canada but no other family. Ash loves music and lives for Friday nights at his local pub where bands play each week. He goes to the pub with Rod, one of his support workers. A few people in the pub have come to know Ash and they say hello, but mostly he and Rod keep to themselves, watching the bands.

A new group of people Ash and Rod started coming along to the pub to hear the bands and soon became Friday night regulars. Rod noticed that one of the women in the group caught Ash's eye. One night Rod started talking to people in the group and after overcoming his initial shyness, Ash also joined in. Ash found out the woman he liked was called Claire, and that they enjoyed the same kind of music. Ash had not had many opportunities to interact with women in social situations, but by the end of the night Ash felt very comfortable with Claire who obviously enjoyed talking with him.

Principle 1—Everyone has the right to make decisions about things that affect them

After a few Fridays in the pub it was clear Ash and Claire were growing fond of each other. Claire suggested that they meet up outside the pub and with Rod's help they arranged to go to the cinema and afterwards to a cafe. They both enjoyed the time together. When Ash got home he was really happy. He told Rod that he'd been thinking about Claire a lot and he wanted to invite her over to the house so they could spend some time together alone.

Rod told his co-workers about Ash's decision but everyone thought it was a bad idea. One said that he didn't think Ash understood what he was asking for or how to act on his own, especially with someone he might have feelings for. Another worker said that they should stay in the living area with everyone else.

Principle 2—Capacity to make decisions must be assumed

Principle 7—People have the right to make decisions that other people might not agree with

Ash had heard the staff talking this way and became very quiet and would not participate with the rest of the household. When Rod arrived for his shift he saw how unhappy Ash was. Rod pointed this out to the other staff and reminded them that this was Ash's home and he had a right to decide if he wanted to invite a guest over. The others weren't happy, but they agreed that if Rod was going to be around then he could deal with the situation. Rod set up his mobile phone so Ash could call Claire in private and invite her over for dinner. Claire said that she would love to see where Ash lives and spend time together. Ash was really happy and he and Rod spoke to his flatmates to let them know about Claire's visit. Ash started telling Rod about what food he wanted Rod to help him cook for everyone.

In the end the meal went very well. Claire came over and met all Ash's flatmates and the staff on shift. They all ate together and everyone said how much they liked the food that Ash had prepared. There was lots of chatter and everyone said they'd like Claire to visit again sometime. After the meal Rod said he'd do the washing up if Claire and Ash wanted to go and hang out together in his room.

Principle 3—Every effort should be made to support people make their decisions

Principle 6—People have the right to change their minds

About half an hour later Claire came out of Ash's room and told Rod that she thought she should go. She said goodbye to everyone and left. Rod went to see Ash to ask what happened. Ash was very sad and quiet and told Rod that he didn't know what to talk about with Claire when they were on their own. He said that it wasn't the same as with everyone around the table. Ash said he had been a bit embarrassed and had asked Claire to leave.

Rod told Ash not to worry too much. He told Ash that sometimes it can be difficult to find things to talk about in a one-to-one situation. He said Ash could have talked about some of the music that they both liked and shown Claire some of his music collection. Ash said he wished he had thought of that but he was shy and nervous. He said he wished he could try again. Rod said that Ash could use his mobile phone again to call Claire and try and explain.

Principle 5—People have the right to learn from experience

Principle 4—Capacity is decision specific

When the other staff heard what had happened they said they had told Rod this would happen. Rod reminded them that it was Ash's decision to invite Claire over and that he wanted to do it again. They said Rod was wrong to encourage Ash as he would just get hurt again. Ash came out of his room to give Rod his phone back and heard everyone talking. He told everyone he had said sorry to Claire and that they would talk about coming over again when they saw each other in the pub next Friday. Ash told everyone that he felt better about talking to Claire and that Rod had helped him to think how he could do things better next time.

A couple of weeks later Claire did come over again and this time everything went very well. They ordered pizza which they ate in Ash's room while listening to music and talked all evening. As Claire was leaving they went to see Rod and told him they might need help with their next decision – a weekend away at a music festival!

APPENDIX B – Decision-making opportunities

Within available resources, ensure people are actively encouraged to:

- choose the service they access
- choose their place of residence and with whom they reside
- participate in choosing and arranging activities
- understand they have a right to decline a service and that this will be respected.

Ensure that people have an opportunity and supported to:

- interview and recruit their workers
- appraise and evaluate workers from whom they receive a service
- develop and review policies.

Provide opportunities to:

- attend decision-making forums, including customer advisory bodies, where decisions are made about the service
- participate in formal evaluation of the quality of the individual service that they are receiving.

Feedback may be gained by:

- ongoing verbal or written feedback
- observation of customer responses
- listening and engaging in joint activities with the person.

Involve customers in decision-making

After investigating the range of service options or strategies available, people can be supported to evaluate the options using a range of methods such as:

- trialing service options
- asking questions

- discussing options in small groups
- discussing options with key stakeholders within their social networking support network
- discussing options with others who have experienced these strategies.

Support people in the decision-making process

Examples of strategies to support decision making could include:

- giving the person time and space without DSE involvement to adequately explore all the options and make some decisions
- asking open questions e.g. 'What do you think about ...?'
- listening to the person's concerns
- reflecting the feelings and content of customers' responses
- involving a trusted friend/mentor or other key people from support/professional networks.

APPENDIX C - Factors affecting decision making capacity

There are some common factors which can affect the ability to make good decisions.

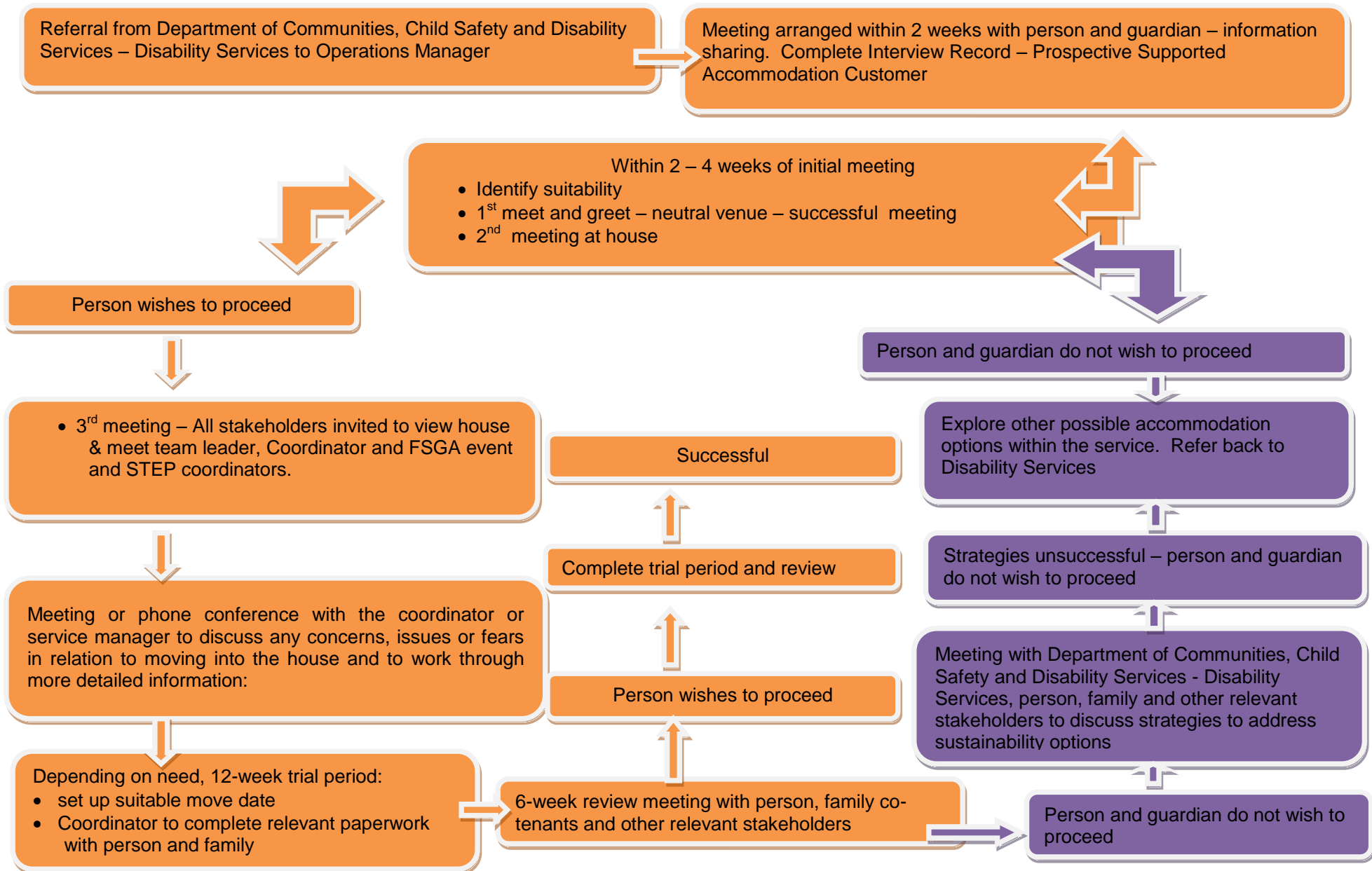
However, most can be addressed with some thought about how they affect each individual.

- *The type of decision being made* - this can range from the everyday decisions such as what to wear or eat, to more important decisions such as choosing where to live.
- *Timing* – most people have a time of day when they are at their best. Find out when a person likes to do their thinking. If a decision isn't urgent, wait for a time which is good for everyone.
- *The complexity of the decision* - decisions about complex issues decisions may require more information and take longer to consider. People should be given the time they require to understand what is being asked of them.
- *The urgency of the decision* - some decisions can be more urgent than others, for example, when there is an important deadline. It is important to explain the timeframe and what will happen if they don't make a decision.
- *Currency of the decision* – some people like to plan their lives well ahead, others like to be more spontaneous and deal with things as they happen. Consider if decisions are required for something now or in the future and how a person likes to approach planning.
- *The availability of information* - this includes advice and support from others, information that is read or seen on television or details remembered from past experiences. Consider what information someone has already and what else might help them to make their decision. Ask if they have any questions or would like any specific information and be creative in thinking what information might help.
- *The physical environment* - being in a noisy or busy place can affect a person's concentration. A person may feel anxious or pressured in certain environments. Look for signs if a person is bothered or unhappy. If possible offer an option to go somewhere else or try later on.
- *The sensitivity of the decision* – personal issues may affect a person's wish to obtain help or advice from others. It is important to respect a person's privacy. If

a decision involves a private issue, ask if there is a specific person they would like to help with the decision.

- *Personal issues faced by the person* – ill health (including mental health), medication or stress can impede clear decision making. A person may need help to manage other issues before they are ready to make a decision or leave the decision until later.

APPENDIX D – LINC Transition Process



APPENDIX E – Personal relationships and sexuality workers self-awareness checklist

- Am I the appropriate person to assist the person with the issue?
- Do I have the skills required? Who does?
- Have I considered my duty of care?
- Have I considered the issue of the person's informed consent?
- Have the person's needs been addressed through individual planning?
- Can I ensure the person is provided with information in a format that meets their communication needs, including visual aids and skill level?
- Have I considered my own values and their impact on my work with the person?
- Will the information I provide be accurate and factual?
- Will I provide the person with opportunities to enable them to exercise their rights and acquire skills?
- Will I ensure the person understands equally their rights and responsibilities with regard to personal relationships and sexuality?
- Do I want to perform this role?