



Verified Provider

Policy and Procedure Manual

Address: 21 Dowe Street Tamworth NSW 2340

Phone: 02) 6766 3153

ABN: 63 612 528 971

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Work Health Safety Environmental Management Policy and Procedure

1.0 Purpose

Work Health and Safety (WHS) regulations place an obligation on decision-makers of the service to take reasonable steps to gain an understanding of the hazards and risks associated with working and support activities, and to allocate appropriate resources and processes, to eliminate or minimise these risks to health and safety.

These legal requirements extend to eliminating risks to Staff members, participants, subcontractors, and volunteers whenever it is practical; if it is not feasible to eliminate all risks then they will be minimised wherever possible.

2.0 Scope

Staff members, participants, volunteers and sub-contractors are also obligated to protect their own and other people's health and safety. Their responsibilities also extend to identifying hazards and risks, managing WHS risks and applying appropriate treatments. They should also consult with other people, including supervisors or management, about these risks.

3.0 Policy

Walk Easy Pedorthics Australia PTY LTD aims to promote and maintain the highest degree of physical, mental and social wellbeing of all individuals in the workplace. The organisation will comply with all relevant federal and state legislation to ensure a safe workplace. All personnel have a responsibility to ensure a safe workplace by implementing safe systems of work.

Walk Easy Pedorthics Australia PTY LTD will provide the resources required to comply with relevant acts and regulations associated with workplace health and safety to ensure that the organisation's workplaces are safe and without risk to health.

Walk Easy Pedorthics Australia PTY LTD will undertake regular reviews and take steps to enhance workplace health and safety on a continuous improvement basis.

3.1 Statement of injury management and return to work

Walk Easy Pedorthics Australia PTY LTD is committed to:

- establishing and reviewing the return to work program, that is consistent with the injury management program, to ensure injured workers return to work in a timely and safe manner
- managing effectively all claims and the return to work of Staff injured in the workplace
- establishing individualised injury management plans according to legislative requirements, as outlined in the policy and procedures
- consulting with Staff and other stakeholders on health and safety issues
- complying with relevant work health and safety legislation and regulations and other associated legislation
- providing and maintaining equipment and appropriate personal protective equipment for the safety of our Staff
- providing Staff with information, training and supervision, as necessary, to enable them to work in a safe manner and without risks to health
- documenting, investigating and reviewing incidents
- displaying, documenting and distributing this 'Work Health Safety Environmental Management Policy and Procedure' and all other associated documentation in the workplace, including the Return to Work Program
- maintaining the required insurance cover
- appointing a designated person to manage all claims for workers' compensation, occupational rehabilitation and return to work programs
- outlining clearly the roles and responsibilities of all relevant parties in the return to work process
- regularly reviewing workers compensation claims.

3.2 Environmental management

Management will endeavour to minimise environmental impact in the following areas:

- Walk Easy Pedorthics Australia PTY LTD waste
- site contamination and spills
- noise emission
- damage to flora and fauna
- unnecessary energy consumption.

Walk Easy Pedorthics Australia PTY LTD will actively take part in:

- identifying waste streams and options for effective waste management
- reviewing purchasing behaviour, e.g. buy recycled materials; reduce waste; use less harmful/volatile chemicals

- improving storage, e.g. reduce the quantity of waste and spills; reduce odours by keeping containers closed
- conserving energy, e.g. install eco-friendly lights; turn lights off when not needed; purchase energy-efficient emergency equipment; use greener fuel sources
- conserving water, e.g. install water-saving accessories; repair leaks
- preserving waterways, e.g. mark and protect stormwater drains
- creating an Emergency Plan and spill response
- improving education and awareness
- notifying relevant authorities in the event of a major environmental impact.

3.3 Incident management

Incident management is an integral element of the Walk Easy Pedorthics Australia PTY LTD's planning processes. All stakeholders are encouraged to raise any concerns regarding risk, incidents or safety. Support delivery issues, and their contributing factors, are identified and utilised as Walk Easy Pedorthics Australia PTY LTD's performance measures:

- Walk Easy Pedorthics Australia PTY LTD management are ultimately accountable for incident management throughout Walk Easy Pedorthics Australia PTY LTD's services.
- Walk Easy Pedorthics Australia PTY LTD's reinforces our accountability by using governance structures including policy, performance management and delegations; and defines the acceptable level of risk for Walk Easy Pedorthics Australia PTY LTD.

Craig Laird is responsible for:

- overseeing the incident management system including monitoring, reviewing and reporting on its effectiveness
- managing, reviewing and implementing the contingency disaster plan, including establishing and maintaining all service agreements
- implementing incident management processes
- advising results and analysis of incident investigations
- evaluating and documenting actual and potential risks with a formal risk assessment
- ensuring all Staff within Walk Easy Pedorthics Australia PTY LTD have a responsibility to identify and engage in the minimisation of risks that may exist in service delivery.



3.3.1 Responding and reporting obligations

- Walk Easy Pedorthics Australia PTY LTD has a responsive risk management hazard, incident and accident reporting system in place.
- All incidents, of any nature, are a matter of concern and, as such, should be recorded using incident and hazard reports.
- All notifiable incidents are to be reported to state WorkCover authorities and the NDIS Commission, as per regulatory requirements.
- Details of incidents will be documented through the incident management system.

3.3.2 Documentation

- All information is gathered with due regard to privacy and confidentiality, recorded comprehensively and stored securely.
- The Incident Investigation Form is for the use of Craig Laird only, as it will contain identifying information. Minimum information required includes a description of the event, damage, injuries, reporting requirements, parties/persons involved and recommendations.
- When discussing the incident findings and recommendations in a meeting, care must be taken not to minute any identifying information.

3.3.3 Evaluation and feedback

- Staff involved in the incident will be advised of the findings and recommendations of the incident investigation.
- Information will be reported through the meeting system.
- Walk Easy Pedorthics Australia PTY LTD may trend incidents, accidents and critical events.
- Reviews of policy, procedure and equipment may occur because of an incident or accident.

3.3.4 Support for stakeholders

- Any Staff member, participant or visitor involved in, or affected by, an incident is offered support.

3.4 Manual handling

- Walk Easy Pedorthics Australia PTY LTD has a minimal lift policy, and all Staff are instructed in this procedure at induction, and as required.
- Maintenance of the participants' independence by encouraging mobility is a priority.
- The manual handling needs of participants are assessed and documented on entry to Walk Easy Pedorthics Australia PTY LTD.
- Manual handling is a component of the education and training program.
- Staff members are instructed on the correct manual handling and lifting techniques.
- All Staff members are assessed on their manual handling techniques during induction, monthly, during probation, and then regularly.
- All manual handling injuries and incidents are reviewed, risk assessments are conducted, and then strategies implemented to control risks.
- Risk identification, assessment and control are carried out in consultation with Staff.
- Incidents, accidents and hazards, identified from manual handling activities, are reported through the communication meeting and other associated meetings, as deemed by management as required.
- Appropriate equipment is provided so manual handling activities can be safely executed.
- Personal manual handling equipment such as 'slide sheets are maintained according to infection control guidelines.
- Craig Laird will ensure that the general layout of the workplace is conducive to the safe handling of participants and the safe use of equipment.

3.5 Work health and safety (WHS) consultation

Walk Easy Pedorthics Australia PTY LTD will establish and maintain systems for work health and safety consultation to enable Staff to contribute to the decision-making process regarding matters that affect their health, safety and welfare at work.

The intended outcomes of this policy include:

- prevention of risk of injury to workers and others
- consultation with workers regarding the risk management process
- reduction of social and financial costs of work health and safety hazards
- establishment and maintenance of safe systems of work
- regulatory compliance maintenance
- prompt consultation on work health and safety matters, taking into consideration the level of risk involved in any specific issue
- training is updated according to current work health and safety regulatory requirements and made available to Staff.

3.5.1 Nature of consultation

The purpose of the WHS consultation with Staff is to:

- share health and safety information
- provide Staff with a reasonable opportunity to:
 - express their views
 - raise work health and safety issues
 - contribute to the decision-making process
- consider the opinions of Staff
- promptly inform Staff of outcomes.

3.5.2 When consultation is required

Consultation is required when:

- identifying and assessing risks to health and safety
- deciding ways to eliminate or minimise those risks
- deciding on the adequacy of facilities for worker welfare
- proposing changes that may affect the health and safety of workers.

3.5.3 Work health and safety resolution

- Staff are to be consulted on proposed changes to the work environment, equipment, policies, protocols and procedures that may affect their health and safety.
- Information on hazards, WHS activities and achievements will be disseminated to Staff through Staff meetings, memos or similar.
- Staff may approach Craig Laird to bring forward issues in the workplace.
- Craig Laird will attempt to resolve the issue locally.
- Walk Easy Pedorthics Australia PTY LTD will always make a reasonable effort to achieve a timely, final and effective resolution of WHS matters.

Work-related problems, concerns or complaints concerning work health and safety will be managed in accordance with our 'Human Resource Management Policy'.

Only after reasonable efforts have been made to resolve the issue can the parties seek the assistance of an inspector. This right arises whether all, some or only one of the parties have made reasonable efforts to have the work health and safety issue resolved; this means that a party's unwillingness to resolve the issue would not prevent an inspector being called in.

The inspector's role is to assist in resolving the issue which could involve the inspector providing advice or recommendations or exercising any of their compliance powers, e.g. issuing a notice.

Even if an inspector has been requested to assist in resolving a work health and safety issue, the rights of a worker to cease unsafe work remain under the *Work Health and Safety Act 2011* model.

When an issue is resolved, the details of the issue and the resolution will be set out in writing to the satisfaction of all the parties, as soon as reasonably practicable:

- Worker/s affected by the issue will be informed of the details of the agreement between the parties.
- A copy of the agreement to the resolution of an issue may be forwarded by any of the parties involved or Walk Easy Pedorthics Australia PTY LTD that represents the party.

3.6 Workplace incidents

Walk Easy Pedorthics Australia PTY LTD will:

- hold current workers' compensation insurance policy that covers all workers
- notify a worker of any workplace incidents, as per legislative requirements
- make suitable duties available to injured workers
- maintain a record of wages according to regulatory requirements
- maintain a register of workplace-related injuries and illnesses
- forward any workers' compensation payments to injured workers
- avoid dismissing an injured worker because of their injury, within six months of the injury or illness occurring, and the injured worker's incapacity to work
- maintain a register of acceptable modified duties
- prepare an offer of modified duties in writing and provide these to the injured worker and healthcare practitioner
- educate Staff about the causes of the injury and subsequent risk
- keep associated records as required
- ensure all Staff are aware of responsibilities and rights concerning return to work (RTW) through training and education
- manage disputes according to regulatory requirements.

3.6.1 Notification of injuries

- Craig Laird will be notified of all injuries, as soon as possible.
- All injuries are to be recorded.
- The workers' compensation agent will be notified of any injuries within forty eight (48) hours.
- Workers will be notified immediately of any serious incidents involving a fatality or a serious injury or illness.

3.6.2 Recovery

- Craig Laird will ensure that the injured worker receives appropriate first aid and medical treatment as soon as possible.
- The injured worker must nominate a treating doctor who will be responsible for the medical management of the injury and assist in planning a return to work.

3.6.3 Return to work

Craig Laird will:

- arrange a suitable person to explain the return to work process and the injury management plan to the injured worker
- ensure the injured worker's right to the confidentiality of medical information
- ensure no information will be used to discriminate against the injured worker
- provide mechanisms to communicate across cultures including ethnicity, gender and age
- ensure all RTW plans are completed within the legal time frames
- prepare return to work plans based on the advice of the Staff member's own treating health practitioner/doctor and the workplace rehabilitation provider
- follow the relevant legislation and agreed consultation procedures
- create availability of suitable work where possible, when a Staff member's injury does not allow a return to immediate pre-injury duties. These suitable duties shall be made available temporarily
- maintain contact and communication with an injured Staff member during the period of incapacity and absence from work
- ensure the confidentiality of the injured Staff member's information and records.

3.7 Work health and safety management program

The management program consists of a set of activities, policies and procedures that are updated as required, which relate to all aspects of work health and safety, including:

- WHS training and education
- work design, workplace design and standard/safe work procedures
- emergency procedures
- provision of WHS equipment, services and facilities
- workplace inspections and evaluations
- reporting, recording and reviewing incidents, accidents, injuries and illnesses
- hazard identification activities
- equipment assessment procedures and practices

- participant risk assessment procedures and practices
- Staff risk assessment procedures and practices
- provide information on WHS to Staff, participants and their families
- implement safe manual handling procedures and safe work procedures.

3.8 Education/training

Every Staff member, within seven (7) days of commencing employment, shall be provided instruction regarding:

- identification and minimisation of hazards in/around a participant's home and in the workplace
- procedures to be followed in the event of an emergency.

Every Staff member will receive emergency training at least annually. Education/training will always be conducted by appropriately authorised and skilled personnel.

3.9 Hazard identification and risk management

Management actively encourages the reporting of hazards and promotes a positive and timely response; Staff and contractors are informed of the mechanism for hazard identification.

On identification and reporting of a hazard, Staff and sub-contractors will:

- take immediate action to minimise the hazard(s), where possible
- immediately report to the person in charge when the action is beyond role limitations, and the hazard poses a high risk
- record the hazard according to the hazard reporting requirements.

Identified hazards are reported and reviewed using Walk Easy Pedorthics Australia PTY LTD's continuous improvement and risk management processes (see the 'Risk Management Policy and Procedure' and the 'Continuous Improvement Policy and Procedure').

3.10 Risk management

Walk Easy Pedorthics Australia PTY LTD considers risk management to be fundamental to good management practice. Effective management of risks will provide an essential contribution to the achievement of Walk Easy Pedorthics Australia PTY LTD's strategic and operational objectives and goals. Risk management must be an integral part of Walk Easy Pedorthics Australia PTY LTD's decision making and must be incorporated within the strategic and operational planning processes, at all levels, across Walk Easy Pedorthics Australia PTY LTD.

Walk Easy Pedorthics Australia PTY LTD will maintain strategic and operational risk management plans. Management is committed to ensuring all Staff are provided with adequate guidance and training on the principles of risk management and their responsibilities so they can implement risk management effectively.

Walk Easy Pedorthics Australia PTY LTD will regularly review and monitor the implementation and effectiveness of the risk management process, including the development of an appropriate risk management culture across Walk Easy Pedorthics Australia PTY LTD.

4.0 Definition

Terminology	Definition
Bullying	<ul style="list-style-type: none"> • Unreasonable and inappropriate workplace behaviour that may intimidate, offend, degrade, insult or humiliate a Staff member (or other person), in front of others. • It can include physical or psychological behaviours.
Clinical risk management	<ul style="list-style-type: none"> • Clinical risk management is an approach to improving the quality of care which places special emphasis on identifying circumstances which place participants at risk of harm, and then acting to prevent, control or accept those risks. • The aim is to improve the quality of care for participants and to reduce the costs of risks for care providers.
Dangerous goods	<ul style="list-style-type: none"> • Substances that create an immediate physical effect, e.g. fire, explosion, vapour release, and are defined as such under WHS legislation.

<p>Due diligence</p>	<ul style="list-style-type: none"> • Where a person conducting a business or undertaking (PCBU) has a health and safety duty. • An officer of the PCBU is required to exercise 'due diligence' to ensure the PCBU complies with their duty under WHS legislation. • Due diligence means taking reasonable steps to: <ul style="list-style-type: none"> ○ gain and update knowledge of WHS matters ○ understand the nature of the business, operations and the general hazards and risks involved ○ ensure the PCBU has appropriate resources for eliminating/minimising risks and that resources are used ○ ensure the PCBU has processes for receiving, reviewing and responding to information about incidents, hazards and risks ○ ensure the PCBU implements processes that comply with their duties including: <ul style="list-style-type: none"> • Consultation • providing training and instruction • reporting of notifiable incidents • facilitate cooperation between the PCBU and workers in instigating, developing and carrying out measures designed to ensure the workers' health and safety at work; and are to be followed or complied with at the workplace, and to assist in developing standards, rules and procedures relating to health and safety.
<p>Environment</p>	<ul style="list-style-type: none"> • Components of the earth, including: <ul style="list-style-type: none"> • land, air and water • any layer of the atmosphere • any organic/inorganic matter and any living organism • human-made or modified structures and areas including interacting natural ecosystems.
<p>Hazard</p>	<p>Something with the potential to cause injury, illness or disease.</p>
<p>Hazardous substances</p>	<ul style="list-style-type: none"> • Substances, including carcinogens, which can cause • detrimental health effects, e.g. damage to the respiratory tract, skin, eyes, etc. and which are defined as such under WHS legislation.

Health and Safety Representative (HSR)	<p>The HSR is a person elected by members of a work-group within the PCBU, or across several businesses, e.g. multiple workplaces, to represent that work-group during consultation on work health and safety issues.</p>
Health and Safety Committee (HSC)	<ul style="list-style-type: none"> • A PCBU must establish a HSC when requested to do so by the HSR, a minimum of 5 or more workers at the workplace or at the PCBU's initiative. • The HSR can be a member of the HSC if they consent. • The key functions of the HSC are: • additional functions under the regulation or as agreed to between the PCBU and the HSC • determining the likelihood of a hazard or risk happening • identifying consequences (or degree of harm), if it does occur • identifying what a person knows, or should know, about the hazard/risk and ways of eliminating or minimising it • determine availability and suitability of ways to eliminate or minimise the risk.
Incident	<ul style="list-style-type: none"> • Incidents can be an event that has occurred or a 'near miss' and include all complications of care, accidents and side effects. • A common feature is that incidents are either potentially, or are harmful.
Notifiable incident	<p>Means:</p> <ul style="list-style-type: none"> • death of a person • serious injury or illness of a person • a dangerous incident • abuse or neglect of a person • unlawful sexual or physical contact or assault of a person • sexual misconduct committed against, or in the presence, of a person. • unauthorised use of a restrictive practice, in relation to a person.

Dangerous incident	<p>Means: an incident in relation to a workplace that exposes a worker, or any other person, to a serious risk to their health or safety emanating from immediate or imminent exposure to:</p> <ul style="list-style-type: none"> (a) an uncontrolled escape, spillage or leakage of a substance (b) an uncontrolled implosion, explosion or fire (c) an uncontrolled escape of gas or steam (d) an uncontrolled escape of a pressurised substance (e) an electric shock (f) the fall or release from a height of any plant, substance or thing (g) the collapse, overturning, failure or malfunction of, or damage to, any plant that is required to be authorised for use in accordance with the regulations (h) the collapse/partial collapse of a structure (i) the collapse or failure of an excavation or of any shoring supporting an excavation; or (j) the inrush of water, mud or gas in workings; in an underground excavation or tunnel (k) the interruption of the main system of ventilation in an underground excavation or tunnel (l) any other event prescribed by the regulations but does not include an incident of a prescribed kind.
Safety Data Sheet (SDS)	<ul style="list-style-type: none"> • Information containing data regarding the properties and effects of a particular substance that must be provided by the manufacturer, supplier or importer of the hazardous substance/dangerous good. • An SDS must be current - within five (5) years of the issue date - and meet specific legislated format requirements.
Officer of the PCBU	A person who makes, or participates in making, decisions that affect the whole, or a substantial part, of the business or undertaking.
Person conducting a business or undertaking (PCBU)	A PCBU is a person or entity that conducts the business or undertaking, alone or with others, where the business or undertaking is conducted for profit or gain.
Personal Protective Equipment (PPE)	Safety clothing or equipment for specified circumstances or areas used to minimise risk where the nature of the work involved, or the conditions under which people are working, requires its wearing, or use, for their personal protection.

Provisional Improvement Notice (PIN)	A written notice from a Health and Safety Representative to a person, or the PCBU, advising of a breach of the Act that is likely to be repeated or a current breach of the Act.
Reasonably practicable	<ul style="list-style-type: none"> • Taking all steps, a duty holder was reasonably able to, considering: • the cost of eliminating or minimising the risk and whether this cost far exceeds the level of reduction of risk • a person who holds a current first aid certificate issued after successful completion of a WorkCover approved first aid course • a person who holds a current occupational first aid certificate issued after successful completion of a WorkCover approved occupational first aid course • a registered nurse.
Risk	<ul style="list-style-type: none"> • The chance of something happening that will have an impact on the services Take Control Plan Management provides. • Measured in terms of likelihood and consequences.
Risk analysis (incident)	The seriousness of the event's consequences and its likelihood and frequency of occurring again; this provides a Category Code (CAT), generating a numerical rating which guides appropriate action.
Risk identification	Data sources that assist identification of risk include Coroners' reports, clinical indicators, variance analysis, incident reporting, complaints and other feedback.
Risk register	<ul style="list-style-type: none"> • All levels of Take Control Plan Management are responsible for the continual monitoring of the strategic risk profile. • A risk register identifies major risks for Take Control Plan Management, including an indication if existing controls or management systems are in place to manage that risk.

Risk treatment	<ul style="list-style-type: none"> • Risk can be avoided, controlled, retained or eliminated. • Two major approaches to control risk are: <ul style="list-style-type: none"> ○ Reducing risk before it arises using proactive system design, e.g. WHS Risk Management Site for Safe Work Method Statement; equipment maintenance. ○ Reducing the risk after the problem arises, e.g. countermeasures or barriers such as increased training.
Serious injury or illness	<p>Means:</p> <p>an injury or illness requiring the person to have:</p> <p>(a) immediate treatment as an in-patient in a hospital</p> <p>(b) immediate treatment for:</p> <p>(i) the amputation of any part of his/her body</p> <p>(ii) a serious head injury</p> <p>(iii) a serious eye injury</p> <p>(iv) a serious burn</p> <p>(v) the separation of his or her skin from underlying tissue, e.g. de-gloving or scalping</p> <p>(vi) a spinal injury</p> <p>(vii) the loss of a bodily function</p> <p>(viii) serious lacerations</p> <p>(c) medical treatment within 48 hours of exposure to a substance</p> <p>(d) any other injury or illness prescribed by the regulations but does not include an illness or injury of a prescribed kind.</p>
Shift work	<p>Any system of working whereby out of hours work is required including weekend, afternoon, night and rotating shifts, split or broken shifts, extended shifts, rostered overtime and (unrostered) extended working hours.</p>
Trained first aid personnel Worker	<ul style="list-style-type: none"> • Either an ambulance officer or a medical practitioner. • Anyone carrying out work, in any capacity, for a PCBU. • This includes direct Staff members; contractors and subcontractors and their Staff members; labour-hire Staff members engaged in working in the business or undertaking; out-workers; apprentices, trainees and students on work experience; volunteers.

Work group	<ul style="list-style-type: none"> • A group of people represented by the HSR; this could be a specific department, shift (e.g. day/night shift), location, or type of worker. • Workgroups are determined by negotiation between the PCBU and workers, and their representative if required.
Work Health and Safety (WHS)	The main objective of the model <i>Work Health and Safety Act</i> is to <i>'provide for a balanced and nationally consistent framework to secure the health and safety of workers and workplaces'</i>
Workplace	Where work is carried out for a business or undertaking and includes any place where a worker goes, or is likely to be, while at work.
Work health and safety entry permit holder	<ul style="list-style-type: none"> • A representative of a relevant workers union for consultation on work health and safety matters. • They provide advice on those matters to one or more relevant workers who wish to participate in the discussions.

5.0 Related documents

- Complaints and Feedback Form
- Complaints Register
- Continuous Improvement Policy and Procedure
- Emergency Plan
- Hazard Report Form
- Incident Investigation Form
- Position descriptions
- Return to work program documents
- Risk Management Policy and Procedure

6.0 References

- NDIS (Quality and Safeguards Commission) 2018
- Safe Work Australia National Code of Practice
- Work Health and Safety Act 2011 (Australia)

Risk Management Policy and Procedure

1.0 Purpose

Walk Easy Pedorthics Australia PTY LTD is actively working to identify, address and monitor potential risks to promote a safe environment for participants, Staff and visitors and to maintain adequate and viable business operations to:

- support effective decision-making that is guided by our mission and vision
- ensure a consistent and effective approach to risk management
- formalise our commitment to the principles of risk management and incorporating these into all areas of the business
- foster and encourage a risk-aware culture, where risk management is understood to be a positive attribute of decision-making, rather than a corrective measure
- align the Walk Easy Pedorthics Australia PTY LTD planning, quality and risk management systems and integration into all areas of our operations
- implement robust corporate governance practices to manage risk while allowing innovation and development.

2.0 Scope

Risk management is built into all areas of our operations, including service delivery and corporate governance. Risk management is the responsibility of all Staff and all areas of the organisation. It's the responsibility of Craig Laird to carry out risk management analyses for the organisation and to take appropriate measures.

3.0 Policy

Walk Easy Pedorthics Australia PTY LTD recognises the importance of managing risk and ensuring that all stakeholders are aware of their role in identifying, analysing, evaluating, treating, monitoring and communicating risk in a systematic risk management approach.

Walk Easy Pedorthics Australia PTY LTD understands the organisation may be at risk when:

- a well-functioning governance structure is not in place
- management plans, policies and processes are inadequate
- team member roles and responsibilities are unclear
- participants are not required to sign consent forms or waivers

- equipment and facilities are not safe for the intended use
- implementation of a comprehensive Risk Management Plan hasn't occurred.
- finances are managed inappropriately resulting in inadequate financial sustainability and cash flow
- insurance is inadequate or inappropriate
- operations are not evaluated regularly.

4.0 Definition

Terminology	Definition
Risk	<ul style="list-style-type: none"> • The possibility of something occurring that will have an impact on the service's objectives. • Often risks involve constraints, failures, obstacles and losses that may arise in the future. • Risk is measured in terms of consequences and if it the risk will have a positive or negative impact.

5.0 Procedure

5.1 Identification



Our organisation implements processes to effectively manage risk, such as:

- analysing hazard data
- conducting risk assessments including environmental and equipment assessments
- reviewing incident/accident information
- seeking Staff, participant and visitor feedback/complaints
- maintenance of log items
- ongoing review of all policies and procedures

- seeking input from Staff at Staff meetings
- incorporating appropriate strategies identified during planning days, e.g. strategic and operational planning sessions
- incorporating new information obtained via education and training into the business
- conducting financial audits
- conducting internal and external audits.

5.2 Planning

Walk Easy Pedorthics Australia PTY LTD has established and maintained a Risk Management Plan. The plan identifies and addresses:

- **Risks to Walk Easy Pedorthics Australia PTY LTD** - Including loss of funding, inability to deliver funded outcomes within budget, embezzlement of funds, lack of suitably qualified Staff, extended Staff illness, damage to reputation and relationships, changes in compliance requirements and eligibility, decisions by Craig Laird and loss of data due to natural disasters.
- **Risks to Staff** - Including lack of suitably qualified Staff, extended Staff illness, Staff injury due to WHS risks, changes in training and education compliance requirements, impacts of natural disasters and infection.
- **Risks to participants** - Including environmental, fire, falls, transport, Staff working in a participant's home, changes in the consistency of performance of activities, interruptions to service delivery and exit plans (transitioning services to another service provider).

The Risk Management Plan includes:

- details of the risk
- date the risk was identified
- risk rating; possible consequence/s of the risk
- actions required to eliminate, mitigate or control the risk
- review dates, new controls and changes to existing controls.

Craig Laird reviews the Risk Management Plan every two (2) months, or more frequently as required, in response to information received via WHS, audit and continuous improvement systems.



5.3 Managing risks

5.3.1 Controls

Controls are strategies used to manage risk. Identified risks are balanced against the cost and inconvenience of the control to the organisation prior to implementation. Controls used by Walk Easy Pedorthics Australia PTY LTD to manage risks include:

- implementation of a Strategic Plan
- implementation of a Risk Management Plan
- thorough Staff orientation, education and training
- implementation of new processes identified during a risk assessment
- effective internal and external information systems, including meetings and memos
- strict adherence to policies, procedures and work instructions by all Staff
- utilisation of position descriptions
- ongoing capital maintenance and setting appropriate equipment budgets and plans
- maintaining all current registrations and insurances.

5.3.2 Improvement Committee

Members of the Improvement Committee are representatives of the Walk Easy Pedorthics Australia PTY LTD workforce. The committee's function is to identify risks through the review of information (see '5.0 Procedure' and '5.1 Identification'). The committee meets every quarter.

Separate to the committee review, all risks will be reviewed independently by Walk Easy Pedorthics Australia PTY LTD's Craig Laird.

Where risks are ongoing, they will be included in the Risk Management Plan and Continuous Improvement Plan. It is management's role to ensure all actions required to manage identified risks are undertaken within the nominated time frames.

5.3.3 Hazard identification

Where a hazard or potential hazard is identified, Staff must complete in detail a Hazard Report Form and provide this, on the same working day, to Craig Laird.

When consequences of hazards are assessed as high or extreme Staff must contact Walk Easy Pedorthics Australia PTY LTD to inform Craig Laird immediately, or as soon as it is safe to do so. Craig Laird will take steps to address extreme or high hazards immediately.

Detailed documentation of action taken must be included in the Hazard Report Form and Risk Assessment Form and, where required, on the Continuous Improvement Plan.

All Hazard Report Forms are provided to the Walk Easy Pedorthics Australia PTY LTD Improvement Committee for review.

5.3.4 Monitoring

Risk management processes and systems are audited regularly as part of the audit program.

5.3.5 Reporting

Walk Easy Pedorthics Australia PTY LTD will use the data gained from the risk management process to inform decisions and plans to improve practices continuously. The analysis will be conducted to assist changes in services, policies and procedures. The analysis will include, but is not limited to:

- complaints and feedback
- financial risk
- Staffing issues
- participant satisfaction
- risks to participants and Staff
- amendments to legal or compliance requirements
- training and education.

5.4 Consequence Rating Table

Insignificant	Minor	Moderate	Major	Extreme
The participant				
Less than a first aid injury or brief emotional disturbance.	First aid injury or emotional disturbance impacting more than 2-days but doesn't require treatment.	Substantial injury resulting in medical treatment. Temporary impairment or development/exacerbation of mental illness requiring treatment. Some cases of abuse/neglect.	Significant injury causing permanent impairment Severe, long-lasting or significant exacerbation of mental illness requiring long-term treatment. Significant faults that allow serious abuse/ neglect of people receiving support.	Avoidable death of a person. Systemic faults. Allowing widespread abuse/neglect of people receiving support.
Support worker and others				
Nil or minor first aid injury. Brief emotional disturbance.	First aid injury. Psychological injury impacting more than 2-days but doesn't require treatment.	Substantial injury resulting in medical treatment. Temporary impairment or development/exacerbation of psychological injury requiring treatment.	Significant injury causing permanent impairment. Severe, long-lasting or significant exacerbation of mental illness requiring long-term treatment.	Preventable fatality.

6.0 Related documents

- Emergency Plan
- Complaints and Feedback Policy and Procedure
- Complaints and Feedback Form
- Continuous Improvement Policy and Procedure
- Hazard Report Form
- Risk Assessment Form
- Risk Indemnity Form
- Risk Management Plan
- Continuous Improvement Plan
- Continuous Improvement Register
- Actions from environmental risk assessments and all other Walk Easy Pedorthics Australia PTY LTD risk assessments
- Documentation, including meeting minutes and memos
- Policies, procedures and work instructions
- Position descriptions
- Capital maintenance and equipment budgets and plans
- Maintenance of current registrations and insurances

7.0 References

- NDIS Practice Standards and Quality Indicators 2018
- Privacy Act (1988)
- Work Health and Safety Act (2011)

Complaints and Feedback Policy and Procedure

1.0 Purpose

This policy is intended to ensure that complaints are handled fairly, efficiently and effectively.

Our complaint management system is intended to:

- allow us to respond to issues raised by individuals making complaints in a timely and cost-effective way
- boost participant confidence in our administrative process
- provide information to be used by us to deliver quality improvements in our services, supports, roles and complaints handling process.

2.0 Scope

This policy provides guidance to our Staff and participants who wish to make a complaint on the fundamental principles and concepts of our complaint management system.

3.0 Policy

Walk Easy Pedorthics Australia PTY LTD will create an environment where complaints and concerns, compliments and suggestions are welcomed and viewed as an opportunity for acknowledgement and improvement. This process is to ensure that individuals have the right to make complaints and are encouraged to exercise their right in a blame-free and resolution-focused culture, respecting an individual's right to privacy and confidentiality.

It is acknowledged that all comments and complaints are vital to review internal performance and processes and to develop continuous improvement of services as we seek to achieve our care commitment.

Participants, families, advocates or other stakeholders may submit a "Complaints and Feedback Form" regarding Walk Easy Pedorthics Australia PTY LTD's supports, services, Staff, or contractors. The participants can be provided information in Easy Read format if required.

It is our policy to follow the principles of procedural fairness and natural justice and comply with the requirements under the National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018.

Walk Easy Pedorthics Australia PTY LTD maintains that complaints and feedback can be managed effectively through:

- implementing an open and transparent complaint handling system
- observing the principles of natural justice and compliance with relevant mandatory reporting under Australian law
- committing to the right of stakeholders to complain either directly or through a representative
- undertaking procedural fairness to reach a fair and correct decision
- taking reasonable steps to inform the complainant of the NDIS Commission Complaints Process, including the use of various communication means, e.g. oral and written
- maintaining complete confidentiality and privacy
- abiding by the NDIS Code of Conduct
- training Staff in our complaint process and the rights of all stakeholders to complain
- considering all complaints seriously and respectfully
- advising participants and Staff's of their rights to complain; informing them on how to make a complaint during assessment and orientation processes; including guidance on the complaint process outlined in the welcome information provided to participants
- provision of support for people who may need assistance to make a complaint
- protection of complainants against retribution or discrimination
- prompt investigation and resolution of complaints
- communicating and consulting with participants, family and advocates during the complaints process and providing feedback and resolutions
- interpretation and application of policies and processes
- providing opportunities for all parties to participate in the complaint resolution process
- accepting Walk Easy Pedorthics Australia PTY LTD and Staff accountability for actions and decisions taken due to a complaint
- committing to resolve problems at the point of service or through referral to alternatives
- committing to use complaints as a means of improving planning, delivery and review of services through our continuous improvement processes
- referring complaints and feedback into our 'Continuous Improvement Policy and Procedure'
- auditing annually the 'Complaints and Feedback Policy and Procedure'.

4.0 Definition

Terminology	Definition
Complaint	An expression of censure, discontent and dissatisfaction or a circumstance regarded as a cause for such expression.

5.0 Procedure

5.1 Complaint process

Complaints and suggestions can be made by:

- using the Complaints and Feedback Form
- contacting a member of Staff, verbally or in writing. The Staff member must offer to document the complaint on behalf of the participant if required and refer the matter to Craig Laird
- contacting Craig Laird, verbally or in writing
- responding to questionnaires and surveys
- sending an email to our contact email
- attending meetings/care conferences
- contacting external complaint agencies, e.g. NDIS Quality and Safeguards Commission
- communicating orally, in writing, or any other relevant means.

Complaints may be made by:

- Staff
- participants
- members of the general public
- advocates
- family members
- carers
- anonymous person/s.

Results are recorded in a Complaint Register which allows for input into our continuous improvement processes. The Continuous Improvement Register will be used to record improvements that are established after the finalisation of the complaint management process.

If a complaint is about:

- support or services; the complaint will be dealt with by Craig Laird
- Staff member/s; the complaint will be dealt with by Craig Laird
- Craig Laird; an external person or body may be approached, e.g. NDIS Quality and Safeguards Commission.

Staffs, participants, family and advocates, visiting health professionals and visitors are informed of our complaints process via:

- participant welcome information
- initial access to supports
- Staff orientation, induction and training
- meetings
- participant agreements
- contractor agreements.

5.2 Complaint management process

The process and investigation must adhere to the principles of impartiality, privacy, confidentiality, transparency and timeliness. Complaints will not be discussed with anyone who does not have responsibility for resolving the issue. Walk Easy Pedorthics Australia PTY LTD must take into consideration any cultural and linguistic needs of a participant and provide the relevant support mechanism such as an interpreter or similar.

Step 1. Acknowledge

1. Acknowledge all complaints quickly, within one (1) working day, where possible.

Step 2. Review of the complaint

- Consult with the participant regarding their desired outcome.
- Inform the complainant of support regarding:
 - their right to an advocate and interpreter
 - stages of decision-making
 - mechanisms to protect privacy
 - their right to complain to the NDIS Quality and Safeguards Commission
 - progress and outcomes.
- Determine the type of complaint, i.e. service, support or process.
- Notify the complainant of each stage of their complaint.
- If a meeting is required, it will be held in a safe environment that has been determined by the complainant and at a time relevant to the participant.

- Where the complainant is a recipient of disability services under the NDIS, check the participant record for a preferred contact for complaints; ask the participant if they would like to nominate a contact from one of the Walk Easy Pedorthics Australia PTY LTD's persons assigned to handle complaints.

Step 3. Assessing the complaint

- When assessing a complaint, Craig Laird, or their delegate, must prioritise the complaint and determine a resolution pathway (where required).
- After the pathway is established, the complaint will be investigated.

Step 4. Investigation and decision process

- At the time of lodging the complaint Craig Laird should determine if it is practicable to find an immediate resolution.
- Craig Laird must keep the complainant informed about the complaint.
- Consult with the complainant to gather information about the underlying issue.
- Analyse antecedents and underlying issues when determining a decision.
- Written responses must be approved by Craig Laird before being sent out.
- Respond to the complainant with a clear decision.

Step 5. After the decision

- After investigation and a satisfactory response has been documented, Craig Laird will:
 - inform the complainant/s of the decision, including the reason for the decision, and provide options for reviewing the decision
 - ensure that the complaint investigation is satisfactorily completed
 - determine if the complainant is satisfied with the outcome
 - follow up and consult with complainant/s about any concerns
 - ascertain preventative actions and continuous improvement
 - consider if there are any systemic issues that need addressing
 - record the information about the complaint in the Complaint Register
 - Record the details of the improvement stemming from a complaint in the Continuous Improvement Register, if required.

The complaint resolution will be monitored according to the audit schedule and feedback will be provided to the complainant personally.

5.3 Documentation

- All complaints will be recorded in a Complaint Register.
- Information in the register will include:
 - complaint details
 - identified issues
 - actions undertaken to resolve the complaint
 - outcome of the complaint.
- All documents, including Complaint and Feedback forms, are to be uploaded into the computer system.
- Copies of any information provided to the complainant are stored in the file.
- A copy of all complaint documents is retained in the file for seven (7) years from the day of record.
- Statistical and other information will be collected to:
 - review issues raised
 - identify and address systematic issues
 - report information to the Commissioner, if requested by the NDIS Quality and Safeguards Commissioner.
- A policy review will occur if there are legislative changes or when determined by a regular or annual review.

5.4 Unresolved complaints

Unresolved complaints will be referred to Craig Laird for investigation and resolution. Should the complaint not be resolved to the complainant's satisfaction, the complaint will be escalated to a person nominated by the complainant (with the complainant's permission).

When complaints cannot be resolved internally, the complainant may be referred to:

NDIS Quality and Safeguards Commission

Phone: 1800 035 544 (free call from landlines) or TTY 133 677

National Relay Service and ask for 1800 035 544

Interpreters can be arranged.

To complete an NDIS Complaint Contact Form online go to business.gov.au

6.0 Related documents

- Complaint and Feedback Form
- Complaints Process Checklist
- Complaint Register
- Continuous Improvement Policy and Procedure

- Continuous Improvement Register
- NDIS Complaint Contact Form
- Risk Management Policy and Procedure
- Service agreement

7.0 References

- NDIS (Complaints Management and Resolution) Rules 2018
- NDIS Practice Standards and Quality Indicators 2018
- Privacy Act (1988)
- Work Health and Safety Act (2011)



Reportable Incident, Accident and Emergency Policy and Procedure

1.0 Purpose

Walk Easy Pedorthics Australia PTY LTD will comply with the National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018.

It is our objective to maintain an incident management system that covers incidents that consist of acts, omissions, events or circumstances that:

- occur in connection with the provision of supports or services to a person with a disability
- has, or could have caused harm to a person with a disability.

2.0 Scope

All Staff are responsible for ensuring the safety of all participants who access our services. All incidents must be reported as per this policy. Management is responsible for ensuring that Staff are trained and undertake the Worker Orientation training module.

3.0 Policy

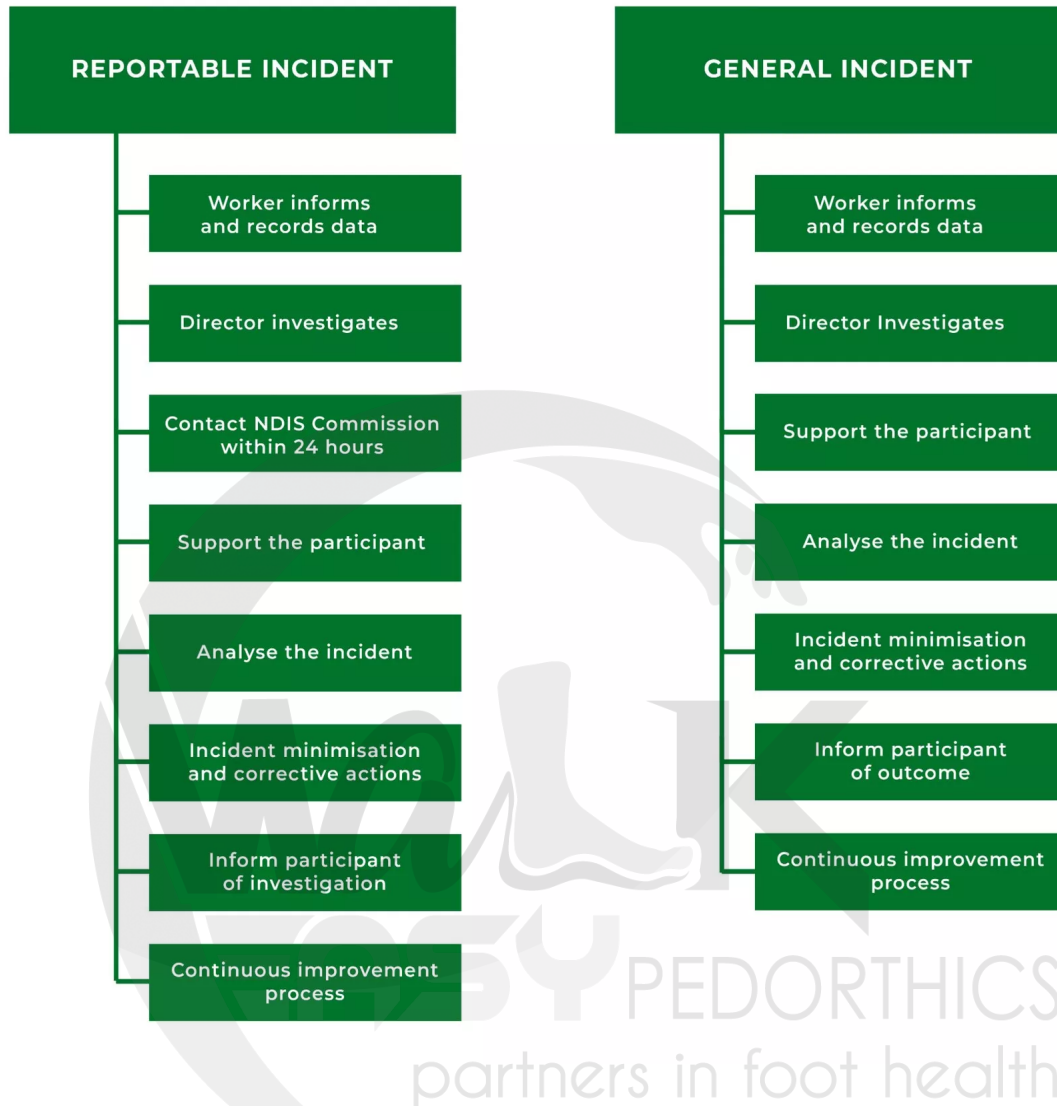
Walk Easy Pedorthics Australia PTY LTD recognises that many of the participants using Walk Easy Pedorthics Australia PTY LTD services are at risk of incidents and accidents. Walk Easy Pedorthics Australia PTY LTD's 'Reportable Incident, Accident and Emergency Policy and Procedure' seeks to:

- minimise risk and prevent future incidents through the development of appropriate participant-centred plans, Staff training, assessment and review
- ensure that there's immediate management of an incident, accident or emergency and that each of these events are prioritised, managed and investigated appropriately
- identify opportunities to improve the quality of participant supports by ensuring that the incident system is planned and coordinated and is linked to the quality and risk management systems.

Participants will be provided information in Easy Read format, as required.

4.0 Procedure

4.1 Incident management procedure



Walk Easy Pedorthics Australia PTY LTD will establish a procedure that identifies, manages and resolves incidents, as follows:

Step 1. Inform of incident

- Support worker to report the incident to Craig Laird.
- Support worker completes an Incident Investigation Form that identifies and records details relating to the incident, i.e. people, place, time and date.

Step 2. Investigation

- Craig Laird will determine, from the information provided, if the incident is classified as a reportable incident by the NDIS Quality and Safeguards Commissioner or a different type of incident:
 - A reportable incident must comply with the reportable incident reporting process.
 - Walk Easy Pedorthics Australia PTY LTD will comply with the National Disability Insurance Scheme (Incident Management and Reportable) Rules 2018.
 - A general incident is an accident with non-reportable injuries.
- Craig Laird will review details of the incident, including:
 - people involved
 - location
 - circumstances
 - outcome, e.g. injury.
- Craig Laird will investigate the incident/accident in accordance with the process outlined in the Incident Investigation Form to determine the:
 - immediate reasons for the event
 - underlying reasons for the event
 - immediate actions required to fix the cause of the event
 - preventative actions required for the future.
- Any information learned from incidents/accidents will be incorporated into our continuous improvement cycle to enable prevention of the incident/accident in the future.
- The analysis and investigation of each incident will vary based on the seriousness of the incident.

Step 3. Support participant

- Craig Laird ensures that the affected participant is supported and assisted by:
 - informing them that they have access to an advocate; if the participant does not have an advocate Craig Laird can assist in accessing an independent advocate
 - reviewing their health status to assist and support
 - assessing the environment to ensure their safety and to prevent any recurrence
 - ensuring their wellbeing and assisting in developing the participant's confidence and competence, so they don't lose any function/s.
- Craig Laird or their delegate will review the incident with the participant.
- Walk Easy Pedorthics Australia PTY LTD will collaborate with the person/s involved to manage and resolve the incident.

Step 4. Analyse incident

As part of our continuous improvement process, the information gained from an incident is used to amend or implement new practices, this includes:

- when an investigation by a registered NDIS provider is necessary to establish the cause/s of an incident, its effect, any operational issues that may have contributed to the incident occurring and the nature of the investigation
- if an incident requires the implementation of corrective action, an appropriate plan will be developed to adjust practices according to the nature of the action required.
- Craig Laird or their delegate will undertake the analytical process to:
 - determine the cause of the incident
 - ascertain if the incident was an operational issue
 - consider the participant's perspective, including:
 - whether the incident was preventable
 - how the incident was managed and reviewed
 - determining any remedial action required to minimise future impacts and prevent recurrence
 - identify why the incident occurred, e.g. environmental factors, participant's health
 - ascertain if current strategies or processes require review and improvement
 - devise new strategies or procedures, if required
 - plan Staff training of any new strategies
 - implement new strategies
- evaluate the success of new strategies.

All Incident Investigation Forms must be closed out by Craig Laird or their delegate, and one other person.

Step 5. Incident/accident minimisation and corrective action

- Walk Easy Pedorthics Australia PTY LTD will risk-assess all participants in conjunction with our 'Risk Management Policy and Procedure'.
- Incident, accident, emergency minimisation and procedures are taught during Staff orientation and in regular ongoing training sessions.
- Risks will be identified, and control mechanisms agreed upon with participants.
- Walk Easy Pedorthics Australia PTY LTD will consult with participants, and relevant stakeholders, to design specific risk control mechanisms to reduce risk to participants and their environment.
- Effectiveness of mechanisms will be evaluated via:
 - participant review processes; including support plan review

- participant feedback
- case conferencing
- internal and external risk audits
- reviews of policies and procedures.

Corrective actions

On completion of the incident analysis procedure, any corrective action will be implemented. Each corrective action identified will be evaluated to ascertain the effectiveness of the action, as per our 'Continuous Improvement Policy and Procedure', i.e. plan, do, check, act.

Step 6. Informing participants

Walk Easy Pedorthics Australia PTY LTD will inform participants, or their advocate, of the outcome/s of the incident; either in writing or verbally dependent on the participant and the situation. Collaborative practice will be undertaken to ensure the participant and their advocate are involved in the management and resolution of the incident.

4.2 Staff training

Walk Easy Pedorthics Australia PTY LTD recognises the importance of prevention to ensure the safety of both Staff and the participant. Our orientation process includes training in work health and safety practices, including manual handling, infection control, safe environments, risk and hazard reduction.

Upon commencing employment with Walk Easy Pedorthics Australia PTY LTD, all Staff's are trained in organisational incident management processes, including how to report an incident and who to report an incident to, i.e. (Craig Laird). To provide further guidance, access to all of our policies and procedures is provided to Staff at this time.

4.3 Reportable incidents

Craig Laird is responsible for reporting all reportable incidents to the NDIS Quality and Safeguards Commission. Reportable incidents are serious incidents, or allegations, which result in harm to any NDIS participant.

Walk Easy Pedorthics Australia PTY LTD, as a registered provider, is required to report serious incidents (including allegations) arising from the organisation's service provision to the NDIS Quality and Safeguards Commission. Reportable incidents, involving NDIS participants, include:

- death
- serious injury
- abuse or neglect
- unlawful sexual or physical contact or assault
- sexual misconduct committed against, or in the presence of, an NDIS participant including grooming for sexual activity
- unauthorised use of a restrictive practice.

4.3.1 Reportable incident procedure

- Staff must immediately notify Craig Laird.
- Craig Laird will follow the process outlined in this policy.
- Craig Laird or their delegate will notify the NDIS Quality and Safeguards Commission within 24 hours of becoming aware of a reportable incident, via the NDIS Commission Portal: <https://www.ndiscommission.gov.au/providers/ndis-commission-portal> or at reportableincidents@ndiscommission.gov.au
- Within 5 business days of becoming aware of a reportable incident or allegation occurring in the course of, or in connection with NDIS supports or services:
 - For the initial notification of an unauthorised restrictive practice
 - As a follow up notification of all other reportable incidents

The Manager will complete a 5 Day Notification online form and submit to the NDIS Commissioner. This form is available through the ['My Reportable Incident'](#) page on the NDIS Commission Provider Portal. The form will be submitted with copies of all copies of all documents relating to the incident.

Assessment of the incident by Craig Laird, or their delegate, will involve:

- assessing the incident's impact on the NDIS participant
- analysing and identifying if the incident could have been prevented
- reviewing management of the incident

- determining what, if any, changes are required to prevent further similar events occurring
- recording all incidents and responsive actions taken to prevent recurrence.

4.4 Documentation

- All reportable incident reports and registers must be maintained for seven (7) years.
- This policy is to be reviewed on an annual basis, or when legislation changes occur.
- All participants, families and advocates are informed of this policy in the Participant Handbook or verbally.
- All Staff will be trained in the procedures outlined in this policy. Training details are recorded in Staff personnel files.

5.0 Related documents

- Incident & Accident Form
- Incident Register
- Orientation Checklist
- Risk Management
- Support Plan

6.0 References

- NDIS (Incident Management and Reportable Incidents) Rules (2018)
- NDIS Practice Standards and Quality Indicators 2018
- Privacy Act (1988)
- Work Health and Safety Act (2011)

Human Resource Management Policy and Procedure

1.0 Purpose

Walk Easy Pedorthics Australia PTY LTD's policy objective is to safely and effectively manage our Staff. It's also Walk Easy Pedorthics Australia PTY LTD's goal to create a structured, fair, safe and supportive environment that supports Walk Easy Pedorthics Australia PTY LTD's Staff to meet organisational requirements and to facilitate delivery of high levels of participant service and satisfaction.

2.0 Scope

Human resources are used to describe both the people who work for our organisation and the management of resources related to our Staff members. This policy is designed to incorporate many aspects of human resources and to comply with the *Fair Work Act 2009* and NDIS Quality and Safeguards Commission requirements.

3.0 Policy

3.1 Human resource management principles

Our human resource management principles are as follows:

- Only employ Staff with appropriate qualifications, skills and competence are recruited.
- All Staff are required to undertake, and successfully pass, the NDIS Worker Screening Check, NDIS Worker Orientation Program and any other state requirements.
- Adequate levels of Staff are maintained to provide quality support that meets the assessed needs of participants and organisational requirements.
- Skills and competency levels of all Staff are improved through ongoing supervision and support and through the implementation of comprehensive training programs and annual performance reviews.
- All Staff are to hold current legislated work checks, professional registrations, licences, insurances and any other employment requirements (as needed).
- Poor Staff performance or allegations of misconduct will result in performance management

- Human resource management procedures are continually reviewed and improved.
- Expert external advice and information on human resource management is accessed by management, as and when required.
- Working conditions for Staff will comply with relevant legislation and be comparable with industry standards.
- Walk Easy Pedorthics Australia PTY LTD will apply the following principles to all aspects of our relationship with Staff:
 - equity and fairness
 - respect for individuals, their privacy and confidentiality
 - accountability for actions and performance
 - encourage and support professional development
- workplace flexibility and understanding of personal needs.

3.2 Corporate governance management

A review of all persons who influence the Walk Easy Pedorthics Australia PTY LTD's governance is instigated to ensure they hold the relevant experience and knowledge to undertake their role. If a person requires additional expertise, then Walk Easy Pedorthics Australia PTY LTD will arrange for the relevant education or training necessary.

3.3 Staff recruitment

Individuals are appointed based on their ability to meet criteria that are consistent with their role and position description. We employ Staff with a range of skills and experience to ensure that our organisation is managed effectively and our services meet the needs of all participants. Roles are outlined in the organisational structure within Walk Easy Pedorthics Australia PTY LTD's 'Corporate Governance Policy and Procedure'.

All Staff are recruited according to our Equal Employment Opportunity Policy (see below - '3.4. Equal Employment Opportunity Policy'). All permanent vacancies are advertised externally and internally. Only Staff who successfully pass the NDIS Worker Screening Check and NDIS Worker Orientation Program will be employed. Craig Laird is responsible for the recruitment of Staff and administration Staff.

3.4 Equal Employment Opportunity (EEO) Policy

Walk Easy Pedorthics Australia PTY LTD commits to:

- providing equal employment opportunity to all prospective and current Staff
- promoting a fair and equitable work environment
- complying with all relevant anti-discrimination legislation
- creating and maintaining an environment in which diversity is valued, human dignity is respected, and people are treated with equity and tolerance
- ensuring Staff and visitors are free from any form of discrimination, harassment or victimisation.

Our organisation chooses the best person for the job, regardless of:

- race
- nationality or ethnic origin
- disability (physical, intellectual or psychological)
- gender
- age
- sexual orientation
- marital status
- family status and responsibility; including pregnancy
- religious or political beliefs
- activities or practices.

3.5 Code of Conduct

All people who are engaged by Walk Easy Pedorthics Australia PTY LTD must abide by both the NDIS Code of Conduct and Walk Easy Pedorthics Australia PTY LTD's Code of Conduct.

3.5.1 NDIS Code of Conduct

- Act with respect for individual rights to freedom of expression, self-determination and decision-making, in accordance with applicable laws and conventions.
- Respect the privacy of people with disabilities.
- Provide supports and services safely and competently and with care and skill.
- Act with integrity, honesty and transparency.
- Promptly take steps to raise and act on concerns regarding matters that may impact the quality and safety of supports and services provided to people with disabilities.
- Take all reasonable steps to prevent and respond to all forms of violence, exploitation, neglect and abuse against people with disabilities.

- Take all reasonable steps to prevent and respond to sexual misconduct against people with disabilities.

3.5.2 Walk Easy Pedorthics Australia PTY LTD Code of Conduct

- Abide by the philosophy of our organisation.
- Observe all the rules of our organisation.
- Provide supports to participants in a safe, ethical manner with care and skill.
- Work in a safely and competently, in accordance with the policies and procedures of our organisation.
- Respect the dignity, culture, values and beliefs of all individuals.
- Don't discriminate against participants on any basis.
- Respond in flexible and innovative ways to support participant decision-making.
- Don't discuss confidential issues with people outside the organisation; regard all information provided by a participant as confidential, and never disclose personal information to a participant.
- Do not harass other Staff or members of our organisation.
- Do not alienate participants from their family or representatives.
- Do not take illegal drugs or consume alcohol when on duty, or on the organisation or participant's premises.
- Never accept gifts or purchase items from participants.
- Do not engage in sexual misconduct with participants.
- Staff are never to take a participant to their (Staff) home or engage in a relationship with a participant outside of a professional association.
- Always positively represent our organisation.
- Always wear appropriate work clothes or a uniform while at work.
- Adhere to all our record keeping and accounting procedures.
- Provide quality services.

4.0 Procedure

4.1 Process for filling a vacant position

4.1.1 Review the position

1. Clarify the role and the need for the position; develop or review the position description.
2. Develop essential and desirable selection criteria, as per the position description.
3. Determine how each of the selection criteria is assessed, e.g. written application and interview.

4.1.2 Advertise the position

1. Positions are advertised internally and externally.

4.1.3 Interview applicants

- Craig Laird conducts the interviews and uses the appropriate Interview Form. All applicants will be asked the same questions. The questions will explore the applicant's relevant skills and experience to perform required duties.
- When interviews are completed, the preferred applicant will be selected.
- Recruitment decisions and reasons for decisions made are documented.
- Pre-employment/reference checks will take place.
- The successful applicant will be notified, and feedback provided to unsuccessful applicants.
- An offer of employment will be made to the successful applicant, conditional on pre-employment checks:
 - reference checks (if the position is a risk assessed role)
 - mandatory worker screening, i.e. criminal record check and working with children check as per state requirements
 - registration check (as applicable to the role)
 - insurances (as applicable to the role)
 - licences (as applicable to the role)
 - NDIS Worker Orientation Program Certificate.

Once appropriate checks are completed and satisfactory, an offer of employment will be sent to the applicant for signing prior to commencing employment.

4.2 Procedure for new Staff

1. Craig Laird will complete an orientation procedure with all new Staff members.
2. A Staff Orientation Checklist will be completed by new Staff members and signed off by Craig Laird.
3. All forms and documents signed by the Staff are filed in a personnel file with copies provided to the Staff, as appropriate.

4.3 Supervision of new Staff

- New Staff inducted into their role and supervised appropriately.
- Craig Laird mentors senior Staff.

- A supervisor will appoint a delegated Staff member to support the development of a new Staff member's skills and knowledge. This orientation process will vary according to the experience of the new Staff member but is usually for a minimum of two (2) shifts.

4.4 Position descriptions

- All Staff are provided with a position description which specifies their roles and responsibilities.
- Position descriptions are reviewed and updated regularly.
- Every Staff member is provided with a copy of their position description before commencing employment and whenever their position description is changed.

4.5 Code of Conduct and Privacy and Confidentiality Agreement

- All Staff are required to comply with the Code of Conduct, which encapsulates the respectful, safe and professional delivery of support to our participants, representatives, community and any other stakeholders.
- Staff are required to sign a Code of Ethics and Conduct Agreement and a Privacy and Confidentiality Agreement on commencement. Disciplinary action will be taken if Staff do not abide by the agreements.

4.6 Staff information

Walk Easy Pedorthics Australia PTY LTD's policies and procedures contain critical information that all Staff must know to complete their roles safely and effectively. New Staff are provided the time to read all policies and procedures and are reminded during Staff meetings and through communication with co-Staff to do so. A Staff Handbook is provided to all Staff, to be used as a reference guide only.

4.7 Staff uniform

Staff representing Walk Easy Pedorthics Australia PTY LTD are required to wear our uniform or another form of identification, so participants can identify them as belonging to our organisation. Staff uniforms must be clean and neat before commencing work.

4.8 Record keeping

A Staff personnel file is maintained for each Staff member. These files may include the following:

- employment application
- criminal record check
- working with children check
- professional registrations
- signed offer of employment
- photocopy of driver's licence, car registration and insurance (wherever applicable)
- signed Code of Conduct Agreement
- signed Privacy and Confidentiality Agreement
- training offered
- training provided
- mandatory training attendance record
- evaluation of training events
- mandatory NDIS Worker Screening Check
- mandatory NDIS Worker Orientation Certificate.

Staff are entitled to view their file at any suitable time arranged with Craig Laird.

Walk Easy Pedorthics Australia PTY LTD must never employ a person as a Staff member unless satisfied that all regulatory checks are current and in place.

4.9 Staff supervision and support

Supervision and support are essential to making Staff feel supported in their work and ensuring they perform satisfactorily. Additionally, supervision sessions provide an opportunity to follow-up on Staff development issues noted in Staff development reviews. Walk Easy Pedorthics Australia PTY LTD will supervise performance issues at Walk Easy Pedorthics Australia PTY LTD offices, in participants homes and in the community.

Upon employment, all Staff are provided with Walk Easy Pedorthics Australia PTY LTD's contact details. Craig Laird are available to be contacted over the phone by Staff, alternatively they are available to meet with Staff if they require time to discuss any issues or concerns.

A Staff member's annual competency assessment, education and training, and performance appraisal also provide other avenues for our organisation to provide Staff support and supervision. All Staff can attend meetings and care conferences to ensure they're aware of participant support changes and to take the opportunity to provide input and feedback.

4.10 Performance development reviews

- Walk Easy Pedorthics Australia PTY LTD is committed to supporting Staff to improve their efficiency and effectiveness. Staff are expected to perform their duties to the best of their ability and to show a high level of personal commitment to always provide quality and professional service.
- Performance development reviews are conducted annually in consultation with individual Staff.
- Performance development reviews are based on a position description and agreed work plans.
- The aims of the review are to:
 - conduct an honest and confidential discussion regarding work performance and the workplace between the Staff member and Craig Laird
 - discuss job performance in the context of a position description
 - discuss work problems and develop appropriate solutions
- discuss possible ways of improving work performance; including identification of training and development needs or changes to work practice.

4.11 Staff education and training

Walk Easy Pedorthics Australia PTY LTD provides appropriate training and development opportunities for all Staff, this includes:

- identifying training needs through annual performance development reviews and ongoing Staff and management input
- providing appropriate training to meet identified needs
- providing training opportunities for all Staff
- evaluating training to ensure it meets Staff needs and is assisting to improve operations and services
- completing a training needs analysis
- devising appropriate training plans to meet Staff performance requirements.

4.12 Staff development opportunities

Walk Easy Pedorthics Australia PTY LTD creates Staff development opportunities, as follows:

- Staff attendance for up to three (3) days per year at workshops, seminars and conferences.
- Flexible working hours, so Staff can participate in accredited study courses at recognised educational institutions.
- Provision of learning resources for Staff education, e.g. videos, research literature.
- Training needs are discussed with each Staff member on recruitment, during annual performance reviews and supervision sessions.

01

Human Resources

- Determine type of staff required as per participant's needs and services being provided
- Devise a position description for each position

02

Seeking Staff

- Advertise for staff
- Interview and reference check for eligibility and suitability
- Clearances sighted, Worker Orientation Module Certification sighted
- Copies of qualifications and professional organisation certification kept (as required)
- Offer position as per position description

03

Commencement

- Orientation on process and procedures including HR requirements, complaints, incidents, WHS, continuous improvement (Staff Handbook issued)
- Agreements and documents signed (wages, payments, position description)
- Supervisor or delegate to introduce staff member to participant and work at least two (2) sessions with the worker

04

Reviews

- Annual performance review undertaken
- Professional development and training plan developed to meet individual needs
- Staff development and training on practices including NDIS Code of Conduct

4.13 Staff performance dispute procedure

Outlined below is the procedure used to deal with a Staff performance dispute, not involving misconduct.

Misconduct is an action by Staff that results in instant dismissal.

4.13.1 Verbal warning

The Staff member is told, as soon as possible, of any complaint concerning their work performance and is provided with an opportunity to discuss the complaint.

Craig Laird, in consultation with the Staff member, will outline how the Staff member must improve their performance. Any assistance needed by the Staff member to improve their performance is identified and provided, wherever possible.

A date to review the Staff member's performance will be set, with consideration given to providing adequate time for the person to resolve the issue and reduce risk to the organisation.

4.13.2 First written warning

If the Staff member's performance is still unsatisfactory at the time of the second review, further discussion will take place. This review will include the Staff member, a representative of their choice (optional), and Craig Laird.

The complaint against the Staff member and plans for improvement will be put in writing and will clearly state that a lack of development by a given date, will result in a final written warning being issued. A copy of the first written warning will be provided to the Staff member.

4.13.3 Final written warning

If at the given date set, the Staff member's performance has not improved, there will be further discussion with the Staff member. This review will include the Staff member, a representative of their choice and Craig Laird.

The complaint against the Staff member and plans for improvement are recorded in writing, clearly stating that a lack of growth by a given date will result in termination of employment. A copy of the final written warning will be provided to the Staff member.

4.13.4 Termination of employment

If the problem persists, after the date set in the final written warning, the Staff member's employment may be terminated. Craig Laird must approve the termination. If the termination is not approved, an alternative process for managing the performance issue will be developed. Detailed notes of performance dispute management are recorded and kept in the individual Staff member's personnel file.

4.14 Staff grievance procedure

If a Staff member has a grievance related to their employment, or concerning another Staff person, the following processes apply:

4.14.1 Discussion

The Staff may approach Craig Laird to discuss the issue and seek advice on the issue. The consultation will be confidential. The Staff member may put the matter in writing to a senior Staff member and request that the issue be raised. A decision on the issue and a discussion with the Staff member will occur within seven (7) business days.

If the Staff considers that the discussion has not addressed their concerns adequately they can seek external advice; this may be with their union representative or another independent body.

4.14.2 Misconduct

Misconduct includes severe breaches of our policies and procedures or unacceptable behaviour that warrants the immediate dismissal of a Staff member.

Examples of misconduct include:

- theft of property or funds from our organisation
- wilful damage of property belonging to our organisation
- intoxication through alcohol or other substances during working hours
- verbal or physical harassment or discrimination of any other Staff member or participant
- disclosure of confidential information regarding the organisation to any other party, without prior permission
- disclosure of participant information, other than information that is necessary to assist participants and to ensure their safety
- conducting a private business from our premises or using the organisation's resources for private business without permission
- falsification of any records belonging to the organisation
- failure to comply with the organisation's Code of Conduct.

4.14.3 Seek advice

Craig Laird must be informed immediately following receipt of an allegation of misconduct. If necessary, Craig Laird will obtain external professional advice. Staff should consider seeking advice from their union or another independent body.

4.14.4 Suspension of duties

A Staff member is informed, as soon as possible, of any allegation of misconduct. The Staff member may be suspended, with full pay, pending an investigation of the claim. A letter outlining the time, date and alleged misconduct will be provided to the Staff member.

4.15 Leave

4.15.1 Application for leave

Any Staff member taking leave must complete an Application for Leave Form. If the application form is not completed, payment will not be made for leave taken.

The application must be completed and approved before annual leave, long service leave, or if unpaid leave is taken.

4.15.2 Sick leave

A doctor's certificate is required for sick leave of more than two (2) consecutive days. When sick leave is required, Craig Laird should be informed as soon as possible and, at a minimum, at least two (2) hours before the Staff member's usual start time. An Application for Leave Form must be completed immediately upon the Staff member returning to work after sick leave.

The 'Continuity of Support Policy and Procedure' will be implemented to support participants during Staff absences.

4.15.3 Personal/carer's leave and compassionate leave

Personal/carer's leave and compassionate leave are defined in the relevant award (this only applies if Staff are under an award). To qualify for personal leave, an individual's reason for leave must meet the definition of personal/carer's leave and compassionate leave within the award.

An Application for Leave Form must be completed immediately after a Staff returns to work. When leave is required, this should be communicated to Craig Laird as soon as possible and, at a minimum of at least two (2) hours, before the usual start time of the Staff member.

4.15.4 Recording annual leave

Annual leave taken and owing to Staff is tracked on the Walk Easy Pedorthics Australia PTY LTD Xero time sheets.

4.15.5 Time sheets

Each Staff member is required to maintain up-to-date time sheets. Time sheets must be submitted to Craig Laird, as per the work agreement. Craig Laird or their delegate will check time sheets against the roster hours to determine accuracy, before forwarding them to the administration office for payment.

4.16 Workers compensation

When a Staff member suffers an injury or suffers from a disease, and work is a substantial contributing factor to that illness or injury, Walk Easy Pedorthics Australia PTY LTD ensures that financial benefits and other assistance is provided, as required by the relevant state legislation and regulations.

4.17 Staff member exit procedure

When a Staff member leaves Walk Easy Pedorthics Australia PTY LTD, the following procedure applies:

1. Craig Laird conducts the exit interview and the Staff member is asked to provide useful feedback.
2. The exit interview is documented.
3. Completed documentation is viewed as relevant and used to ensure continuous organisational improvement.

5.0 Related documents

- Application for Leave Form
- Code of Ethics and Conduct Agreement
- Complaints and Feedback Form
- Human Resource Management Policy and Procedure
- Interview Form
- Delegation of Responsibility Policy and Procedure
- New Staff member details
- Offer of employment
- Personnel File Contents Checklist
- Privacy and Confidentiality Agreement

- Staff Handbook
- Staff Orientation Checklist
- Training needs analysis
- Warning letters:
 - First written warning
 - Second written warning
 - Termination of employment

6.0 References

- Anti-Discrimination Act 1977
- Fair Work Act 2009
- National Disability Insurance Scheme (Practice Standards-Worker Screening) Rules 2018 NDIS (Code of Conduct) Rules 2018
- NDIS Practice Standards and Quality Indicators 2018
- Privacy Act 1988
- Workers Compensation Regulation
- Work Health and Safety Act 2011
- Workplace Gender Equality Act 2012

