

Example  
Policy & Procedure  
Manual

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Revised May 2006

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## ***How to Use This Manual***

This Policy and Procedures Manual has been designed to provide services with a handy ready reference file to keep copies of policy, procedures and other important documents.

The Manual has been written for a hypothetical Home and Community Care (HACC) agency - Acorn Home Support.

The policies and procedures in this Manual have been separated into eighteen sections.

Index	9. Financial Management
1. Organisation Information	10. Assets Management and Insurance
2. Incorporation	11. Staff Recruitment
3. Management	12. Position Descriptions and Conditions of Employment
4. Funding	13. Staff Management and Development
5. Records Management	14. Volunteer Management
6. Service Delivery	15. Occupational Health and Safety
7. Client Rights and Responsibilities	16. Administration and Office Procedures
8. Service Improvement, Planning and Evaluation	17. Information Technology

The examples in this manual have been provided to help you develop your own Policy and Procedures and to provide a guide to the kinds of areas in which to develop written policy.

Please feel free to adapt the examples in this manual and to copy the forms and documents for your own use.

Use the section dividers in the manual to set up your permanent policy and procedures manual.

***Remember:* A Policy and Procedures Manual will include many important documents. Use copies only - the originals should be kept in a secure place.**

## ***What is a Policy and Procedures Manual?***

A policy is a blue print or general guideline for action. Often, policy development in organisations is ad-hoc and not recorded. People agree on policies and try to remember them but people do not always remember the same things and unwritten policies often lead to confusion and conflicts.

A Policy and Procedures Manual is a written record of the agreed policies and procedures of an organisation. It should be readily available to all people involved in the management or work of an organisation and should be kept in a loose leaf file so it can be updated and added to, as policies and procedures are reviewed and amended.

### ***Please note:***

**The materials presented in this Manual are good practice examples only. It is each agency's responsibility to adapt the materials to its own requirements and to ensure the applicable award and legislative requirements are complied with.**

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## 6.1 PRINCIPLES OF SERVICE DELIVERY

Acorn Home Care abides by the HACC Service Standards and the Community Care Standards in the delivery of care to its clients. These are described below:

### 6.1.1 HACC SERVICE STANDARDS

1. Client's access to a service is decided only on the basis of relative need.
2. Each client is informed about his or her rights and responsibilities and the services available, and consulted about any changes required.
3. Clients receive the benefit of well-planned, efficient and accountable service management.
4. Each client receives coordinated services that are planned, reliable and meet his or her specific ongoing needs.
5. Each client's rights to privacy and confidentiality are respected, and he or she has access to personal information held by the agency.
6. Each client has access to fair and equitable procedures for dealing with complaints and disputes.
7. Each client has access to an advocate of his or her choice.

### 6.1.2 COMMUNITY CARE STANDARDS

- **Information and Consultation**

Each care recipient and prospective care recipient (or their representative) is to have access to information to assist in making an informed choice about available community care Services.

- **Identifying Care Needs**

Each care recipient is to receive quality services that meet their assessed needs.

- **Coordinated, Planned and Reliable Service Delivery**

Each care recipient (or their representative) is enabled to take part in the development of a package of services that meets the care recipient's needs.

- **Social Independence**

Each care recipient should be enabled where possible, and encouraged, to exercise their preferred level of social independence.

- **Privacy, Dignity, Confidentiality and Access to Personal Information**

The dignity and privacy of each care recipient are to be respected, and each care recipient (or their representative) will have access to their personal information held by the provider.

- **Complaints and Disputes**

Each care recipient (or their representative) has access to fair and effective procedures for dealing with complaints and disputes.

- **Advocacy**

Care recipient will have access to an advocate of their choice.

*(Community Aged Care Package (CACP) Program Guidelines 2004, Section 4.5: Community Care Standards)*

### 6.1.3 ACCESS

Clients are referred by ACAT, their doctor, other health professionals, family members or people in the community. Clients can also self-refer. Clients seeking a Community Aged Care Package must have an ACAT assessment.

A priority is given to those people most in need (see below: Prioritising Need).

### 6.1.4 CLIENT INVOLVEMENT

Clients will be consulted about the services that they receive. Where this is not possible, such as in the case of incapacity, the client's guardian or representative will be consulted.

Clients are encouraged to give feedback about the services provided, either through the complaint process or informally through the Coordinator, other staff or a Tell Us What You Think form. (See Section 8: Service Improvement, Planning and Evaluation for information on the Tell us What You Think form. A copy of the form is included in **Section 8 of the Original Forms File.**)

### 6.1.5 CLIENT CHOICE AND OPTIONS

Where possible staff present the client with a range of options, and take account of their preferences regarding care. Services are tailored to suit the client and meet their needs, both now and in the future.

Options for clients may include:

- The day or time of service
- A choice of carer if necessary and if possible, and
- A choice of activities that most suit the client's needs and preferences when possible.

Acorn Home Care tries to always respect the client's cultural preferences through ensuring staff understand the culture of the clients and that, where possible, services are tailored to meet cultural needs.

### **6.1.6 REFERRALS**

All services for clients are reviewed and monitored on an ongoing basis to ensure they are appropriate and effective. Where necessary, clients are referred to other appropriate services. All referrals are made using a Referral to Another Agency form (**See Section 6 of the Original Forms File**) or other appropriate form eg ACAT Referral form.

A copy of the referral form is filed in the client's file.

### **6.1.7 SAFE ENVIRONMENT**

Where we can, the organisation and staff of Acorn Home Care ensure that all services are provided in a safe environment in line with OH&S requirements and our duty of care to clients, staff and volunteers. Sometimes in client's home this is difficult to achieve. In these cases staff are made aware of the need to ensure the safety of the client and themselves. The Coordinator conducts an occupational safety and health assessment at the client's home when the client is accepted for service delivery. In addition, staff have access to Accident/Incident/Hazard forms to record occupational safety and health hazards in client's homes, which are then actioned by the Coordinator.

Further information regarding OH&S can be found in Section 15: Occupational Health and Safety. (The OH&S Assessment Form is included in **Section 15 of the Original Forms File**.)

### **6.1.8 CLIENT FILES**

Each client has two client files set up for them when they first contact Acorn Home Care: the Office File and the Home File.

The Office File includes:

- The ACAT (or other referral in the case of HACC services) referral form
- The client assessment/care plan and consent form
- Client reviews
- Any medical information
- Any correspondence
- Details of complaints and
- Other information relating to a client.

Client Office Files are securely stored in the Coordinator's office which is locked when unattended.

The Home File contains information relevant to the care of the client in the home such as:

- The client assessment/care plan and consent form
- The occupational safety and health assessment form

- Information regarding the management and administration of medications and any other relevant information to the care provided to the client.

The Home Files are kept in a secure place in the client's home. If the client does not wish the home notes to be stored in the home (or if the notes are at risk of being lost or destroyed) arrangements will be made for the staff delivering care to take the home notes into and out of the home each visit. It is essential for staff visiting the client's home, or providing other services outside of the client's home, to have access to the care plan, medication instructions and other records.

### **6.1.9 PRIVACY AND CONFIDENTIALITY**

Acorn Home Care is committed to the principles outlined in the Privacy Act (Amendment 2001) and has in place procedures that ensure the privacy and confidentiality of client information is respected at all times.

See 7.2 Client Privacy and Confidentiality.

## 6.2 ELIGIBILITY AND ACCESS TO SERVICES

### 6.2.1 TARGET GROUP – HACC CLIENTS

The target group of Acorn Home Care is frail aged or younger people with a functional disability that prevents them from looking after themselves properly. Services can also be provided to the carers of clients.

Services are provided to people living within the Acorn district.

NOTE that HACC services are not provided to people just because they are old – they must still need some help to live independently.

### 6.2.2 TARGET GROUP – CACP CLIENTS

CACPs are designed for frail older people (generally considered to be aged 70 and older for non-Indigenous people, and 50 years and over for Indigenous people) living in the community who would be assessed by an Aged Care Assessment Team as eligible to receive at least low level residential aged care, if they applied, and who have:

- Complex care needs arising from physical, social and psychological needs
- A need for a coordinated package of care services
- A preference to remain living in the community with appropriate and reliable supports
- A need for ongoing monitoring and review of changing care needs, and
- The ability to live in the community with appropriate community care.

There are no citizenship or residency restrictions on accessing a CACP. However, the intention of CACPs is ongoing care and not temporary care.

Services can also be provided to the carers of clients.

Services are provided to people living within the locality of Acorn and surrounds.

### 6.2.3 PRIORITISING NEED – HACC CLIENTS

To ensure that those people most in need receive services Acorn Home Care uses two needs assessment forms in the event that more people are requesting services than there are services available. These forms are: Deciding Priorities for Assistance and Deciding Priorities for Respite Care. (Copies of these forms are included in **Section 6 of the Original Forms File.**)

When deciding priorities for clients the following are considered:

- Is the home physically unsafe?
- Is family support at risk of breaking down?
- Does the client need medical or nursing help?
- Does the client live alone, or with a carer who is also frail aged or has a disability?
- Does the client experience difficulty with a range of daily living tasks?
- Is the client socially isolated?
- When deciding priorities for respite care the following are considered:
  - Is the carer caring for a person with a severe disability?
  - Is the carer a sole carer, has poor support networks or has dependent children?
  - Is the carer frail, ill, stressed or has a disability?
  - Does the carer have extensive commitments which may stop them providing care?
  - Is the carer socially or geographically isolated?
  - Is the carer financially disadvantaged?

#### **6.2.4 PRIORITISING NEED – CACP CLIENTS**

ACAT prioritises clients when they conduct an ACAT assessment and informs Acorn Home Care of the client's needs.

<i>Acorn Home Care</i>	<i>Date Amended:</i>
	<i>Date Approved by Committee:</i>

## 13.1 INDUSTRIAL RELATIONS ADVICE

Acorn Home Care has access to industrial relations advice through the Chamber of Commerce and Industries Western Australia (CCI). CCI can be contacted in relation to any industrial issues on Ph: (08) 9365 7660.

Staff can seek advice in regard to industrial issues from:

- Their union, if appropriate
- Department of Consumer and Employment Protection – Labour Relations Ph: (09) 9222 7700
- Equal Opportunity Commission – Ph: (08) 9216 3900.

<i>Acorn Home Care</i>	<i>Date Amended:</i>
	<i>Date Approved by Committee:</i>

## 13.2 STAFF REPORTING PROCEDURES

### 13.2.1 COORDINATOR

The Coordinator provides a report to the Management Committee using the format outlined in Acorn Home Care Coordinator's Report in 3.4.5 Role of Coordinator at Management Committee Meetings.

(See also, Working with the Coordinator in 3.1.2 Management Committee Responsibilities.)

### 13.2.2 OTHER STAFF

Staff are to provide a brief work report to the Coordinator at the end of each month. This can be a verbal or written report and should note any issues which have arisen or any suggestions for improving service delivery or service management.

Reports from staff are used by the Coordinator in developing his/her report to the Management Committee. (See also, 3.4.6 Coordinator's Report.)

## 13.3 STAFF SUPERVISION AND SUPPORT

### 13.3.1 SUPERVISION SESSIONS

Supervision and support are important for ensuring that staff are supported in their work and that their work is carried out effectively. Additionally, supervision sessions provide an opportunity to follow up on staff development issues noted in staff performance reviews.

The small number of staff working in Acorn Home Care means that ongoing supervision and support is continuously provided informally. To ensure that staff do have an opportunity to address problems or issues the Coordinator will also provide staff with a formal supervision session once every six (6) months. One of these sessions will be a performance review. (See 13.4 Performance Reviews)

The Chairperson of the Acorn Home Care Management Committee (or other nominated Management Committee member) is responsible for providing supervision and support to the Coordinator. The Management Committee member responsible will have relevant skills and experience.

Supervision sessions will cover the following points:

- Review of performance
- Work related issues
- Feedback on performance including identification of strengths and weaknesses
- Identification of strategies for development.

<i>Acorn Home Care</i>	Date Amended:
	Date Approved by Committee:

## 13.4 PERFORMANCE REVIEWS

Acorn Home Care 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 providing a quality, professional service at all times.

Performance reviews are conducted annually and salary increases above the CPI are linked to these.

The Coordinator will conduct the performance review of the Administration Officer. The Chairperson of the Management Committee or another delegated Management Committee member will conduct the performance review of the Coordinator.

Performance reviews are based on position descriptions and agreed work plans.

The aims of the staff performance review are:

- To allow free and confidential discussions about work between the employee and supervisor
- To discuss the employee's job performance, in comparison with set standards
- To discuss any work problems and search for a solution
- To discuss means of improving work performance including identification of training and development needs.

Issues related to the performance of an employee are raised with the employee at the time the issue arises. Performance issues are not left to the performance review to be managed. Performance issues dealt with throughout the year may be raised in the performance review as part of the overall assessment of the employee's performance and will not be a surprise to the employee.

(A copy of the Performance Review Form is included in **Section 13 of the Original Forms File.**)

### 13.4.1 THE PERFORMANCE REVIEW PROCESS

The person conducting the performance review should:

1. Review and be familiar with the job requirements outlined in the position description.
2. Review specific goals or key performance indicators specified in previous performance reviews, the position description or Offer of Employment Contract.

3. Arrange a time and venue for the review.
4. Provide the employee with a copy of the Performance Review Form to complete before the review session and inform them when this is required to be completed.
5. Review the employee's history:
  - skills
  - training
  - experience
  - previous performance reviews.
6. Using the Performance Review Form, assess the employee's job performance against the expectations of the position using all sources of information available to you. Note areas where further information is required.
7. Meet with the employee.

Engage in dialogue with the employee to gather further information and to direct discussion.

Discuss strengths, weaknesses and opportunities for development. Provide specific examples and constructive feedback.

Try to be positive even when dealing with negative issues. Keep in mind that this is a positive meeting for the benefit of the employee and yourself.

Set and agree new performance goals with the employee.
8. Write up the performance review

Include all issues covered, action to be taken, time lines and employee comments.
9. Follow Up

Ensure any action to be taken is taken within the specified timelines.

<i>Acorn Home Care</i>	<i>Date Amended:</i>
	<i>Date Approved by Committee:</i>

## 13.5 STAFF DEVELOPMENT, EDUCATION AND TRAINING

By providing opportunities for staff development and encouraging staff to expand their knowledge and skills, Acorn Home Care believes that the improved abilities of its staff will be reflected in continuing improvements to services.

Staff development, education and training is tied to the performance review and staff supervision process.

### 13.5.1 BASIC TRAINING REQUIREMENTS

The Coordinator is responsible for ensuring that the basic training needs of staff are met. This may be through:

- The provision of workplace information, including the policy and procedures manual.
- The provision of 'in-house' training or on the job training.
- Referral to an external training course.

Basic training for staff is specified in the Staff/Volunteer Induction Checklist and includes as a minimum:

- The content and use of this Policy and Procedures Manual relevant to the staff person's position
- Occupational health and safety issues, including the use of equipment
- The legal responsibilities associated with the person's work
- Training related to the services provided to the client group.

(A copy of the Staff/Volunteer Orientation Checklist is included in **Section 11 of the Original Forms File.**)

### 13.5.2 STAFF DEVELOPMENT OPPORTUNITIES

The training needs of staff should be discussed with the Coordinator or Management Committee member on recruitment, at the annual staff performance review and at supervision sessions.

Acorn Home Care will support its staff in staff development, education and training activities which are relevant to, and will benefit the organisation. Support may include:

- Staff attendance for up to three (3) days per year for workshops, seminars and conferences.
- Flexibility of working hours to participate in an accredited course of study at a recognised educational institution.
- Purchasing resources such as videos and research literature.

Staff should provide feedback to their supervisor on any training activities that they have attended and the value of the activity to their work and to any issues identified in the staff performance review. Information relevant to the functions of the Management Committee should be presented at board meetings.

Any staff wishing to participate in staff development opportunities should discuss this with their supervisor. An application to attend should be made to the Management Committee at least 14 days prior to the activity.

### **13.5.3 FIRST AID TRAINING**

All staff should be trained in basic first aid.

First Aid Training is arranged for at induction. All staff must maintain a valid first aid certificate through refresher courses and further training as required.