



ETHNIC DISABILITY ADVOCACY CENTRE Inc.

POLICIES AND PROCEDURES MANUAL

Reviewed and endorsed: Sept 2012
Updated – Sept, 2017

Signed:

(President)

On behalf of the Management Committee / Board

Dated: Sept, 2017

Policy and Procedures Manual

EDAC INDEX TO POLICIES

| Policy No. | Policy Title |
|------------|--|
| | INTRODUCTION |
| NSDS | POLICIES RELATING TO National Standards for Disability Services STANDARDS 1-6 |
| 1 | Human Rights |
| 1.1 | Making Choices and Decisions |
| 1.2 | Privacy |
| 1.3 | Confidentiality |
| 1.4 | Freedom From Abuse and Neglect |
| 2 | Community Participation and Inclusion |
| 2.1 | Valued Status |
| 3 | Individual Outcomes and Planning |
| 3.1 | Duty of Care |
| 3.2 | Working with Family/Carers |
| 4 | Feedback and Complaints Resolution |
| 5 | Access to Services |
| 5.1 | Exiting the Service |
| | POLICIES RELATING TO SERVICE MANAGEMENT (Std. 6) AND HUMAN RESOURCES |
| 6 | Service Management |
| 6.1 | Recruitment and Selection of Staff |
| 6.2 | Induction of Staff and Volunteers |
| 6.3 | Board of Management Code of Conduct |
| 6.4 | Employee and Volunteer Code of Conduct |
| 6.5 | Professional Development / Staff Training |
| 6.6 | Staff Supervision and Performance Management |
| 6.7 | Staff & Volunteer Grievance Resolution |
| 6.8 | Conflict of Interests |

| | |
|------|--|
| 6.9 | Policy Development and Review |
| 6.10 | Equal Opportunity |
| 6.11 | Use of Private Vehicles for Work |
| 6.12 | Supervision of Students and Volunteers |
| 6.13 | Use of Electronic Media |
| 6.14 | Police Clearances and Working with Children Checks |
| 6.15 | Occupational Safety and Health |
| 6.16 | Emergency Procedures |
| 6.17 | No Smoking Policy |
| 6.18 | Accounting and Expenditure |
| 6.19 | Use of EDAC Credit Card |
| 6.20 | Insurance and Indemnity |
| 6.21 | Study Leave |
| 6.22 | Time Off In Lieu |
| 6.23 | Annual Leave |

INTRODUCTION

This Policy and Procedure Manual was developed to guide and inform the Ethnic Disability Advocacy Centre's staff and Management Committee in their work duties.

People from CaLD (Culturally and Linguistically Diverse) backgrounds who have disabilities are doubly disadvantaged in being able to access services, supports and opportunities that other people have, because of their disability and their ethnicity, and often barriers related to language and colloquialisms. Problems faced by this group have been widely reported in various consultations and studies undertaken by government departments and academics. There are different cultural attitudes about disability including the isolation of families; lack of knowledge about services and systems; and family reluctance to use services. It is estimated that people with disabilities from CaLD backgrounds represent about 14% of the population with disability, and yet they have low participation rates in disability related supports and services delivered by government and non-government agencies.

In 1993 the Ethnic Communities' Council (ECC) undertook an access and equity project in employment for ethnic people with disabilities in WA. One of the recommendations from the evaluation of this project was the development of an advocacy service for ethnic people with disability in WA in order to facilitate better access to all disability and mainstream services for people with disabilities and their families/carers from CaLD backgrounds. Such a service would increase their representation in disability related programs so that they can exercise control over their lives and participate in all levels of society.

Funding was approved in March 1995 for the establishment of the Ethnic Disability Advocacy Centre (EDAC).

For the purposes of this manual, the term "client" refers to the person with a disability OR their family/carer from CaLD backgrounds who EDAC provides advocacy supports and services to, and on behalf of.

EDAC (Inc.)

Policy and Procedures

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| Title | HUMAN RIGHTS | EDAC. Policy No. 1 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to establish standards of practice that recognise and respect that all people involved with EDAC have inherent dignity and the same rights as other people in the community. The policy is written in accordance with the principles outlined by the Australian Human Rights and Equal Opportunity Commission Act (1986). It has been framed around Standard 1 of the National Standards for Disability Services and aims to conform to the United Nations Convention on the “Rights of Persons with Disabilities which came into force on 3 May, 2008. The Convention aims to ensure that persons with disabilities enjoy all human rights on an equal basis with others.

The purpose of this policy is to:

- Promote the human rights of all people with disabilities, with particular focus on those from CaLD backgrounds;
- Promote the human rights of EDAC clients,
- Create and maintain a service culture which promotes the rights of all people, including freedom of expression; choice making, and freedom from abuse, neglect or exploitation.
- Create a service where risks to the rights and well-being of clients are minimised; and
- Ensure that if EDAC becomes aware of an instance of abuse, neglect or exploitation, that EDAC responds professionally and compassionately to address the situation in accordance with the requirements of the National EDACs Standard 1 – “Rights” (2013)

The Standard states “**Rights:** *The service promotes individual rights to freedom of expression, self-determination and decision-making and actively prevents abuse, harm, neglect and violence*”

This policy relates to all EDAC activities and applies to all employees, volunteers, students, advocates, Board Members and others who may act on behalf of EDAC.

Other policies relevant to this policy include, but are not limited to the following:
Policy - Employee and Volunteer Code of Conduct

Policy - Board of Management Code of Conduct
Policy– Feedback and Complaints Resolution
Policy No. DSS1.3 - Privacy and Dignity
Policy No. DSS1.4 - Confidentiality
Policy No. DSS 3.3 - Duty of Care

2. POLICY STATEMENT – HUMAN RIGHTS

EDAC affirms the rights of all people including people with disabilities to be respected, to have their dignity and privacy upheld, to have their right to expression and decision-making opportunities safeguarded, and that they are not exposed to any form of abuse or neglect while using our service, so they can feel safe from harm, as far as possible.

We expect that everyone who is associated with EDAC, will share our commitment to maintaining an organisational culture that:

- upholds the value and dignity of our clients;
- ensures all clients and families/carers are treated with courtesy and respect;
- builds trusting relationships with our clients, their families and carers;
- provides services in an environment that is safe and welcoming for everyone;
- advocates for the rights of people with disabilities and their families/carers.
- supports and encourages people to express their views and wishes of the service
- supports people to make choices about the services they receive
- empowers our clients by helping them to understand their rights and providing information about service options and community supports;
- makes everyone feel safe to raise concerns;
- responds proactively to concerns and complaints when they arise; and
- fosters collaboration with other organisations in upholding clients' human rights and preventing abuse and neglect.

3. PROCEDURES

Staff, volunteers and Board members of EDAC will –

- 3.1 Treat all clients and their families/carers with dignity and respect.
- 3.2 Uphold the rights of clients and their families/carers to express their views, choices and concerns, in relation to the service and effects it has on their lives.
- 3.3 Recognise the role of families, carers and other advocates in safeguarding the rights and well-being of people with disabilities.

- 3.4 Ensure that staff do not speak about clients/family members in front of them, but always discuss issues with clients/family members.
- 3.5 Support clients and their families/carers to make decisions about their lives by providing accurate, timely information about their rights and responsibilities; and the responsibilities of the service.
- 3.6 Work to prevent, as far as possible; any abuse, neglect, exploitation or other harm to its clients and their families/carers.
- 3.7 When it is made aware of any breach of human rights of a client or family/carer; respond promptly with strategies to address the issue; including reporting incidents and putting safeguards in place. (Please see Policy and Procedures on Freedom from abuse and Neglect)
- 3.8 Provide clients and their families/carers with information about other supports, and when needed, access to advocacy support and/or referral to legal advice.
- 3.9 Respect the privacy of people with disabilities and their families/carers
- 3.10 Keep personal information about clients and families/carers confidential.
- 3.11 Provide services in ways that pose the least restrictions on clients and their families/carers; whilst still implementing safeguards to ensure their well-being is protected.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 Our clients and their families/carers report they feel respected and welcomed by all service staff and volunteers.
- 4.2 Clients and families/carers freely express their needs and wishes about the service.
- 4.3 Clients and families/carers report trusting our service to advocate for their rights and the meeting of their needs.
- 4.4 Clients and Families/carers raise concerns and issues as they arise within the service.
- 4.5 Clients and families/carers are aware of DOS's services and other services available to them in the community.

REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer

appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

Policy and Procedures

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|---------------|-------------------------------------|------------------------------|
| Title | Making Choices and Decisions | EDAC Policy No. 1.1 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to ensure that people who come to EDAC have the opportunity to participate as fully as possible in making decisions about their daily lives and services they receive. The policy has been framed around Standard 1 of the National Standards for Disability Services (2013) - "Rights". This policy applies to all of EDAC's programs and activities.

2. POLICY STATEMENT – MAKING CHOICES AND DECISIONS

EDAC aims to offer its clients choices wherever possible whilst assisting them to make reasoned decisions about the services and supports they receive. EDAC will also take into account the views of carers when decisions about services are being made in accordance with the Carers Recognition Act (2004).

3. PROCEDURES

The following procedures are to be implemented to enable the organisation to meet its policy objective of ensuring that clients and where applicable, families/carers have primary involvement in, and influence over, decisions that affect them; as well as support to be able to make choices based on accurate information.

EDAC will:

- 3.1 Advocate for individuals and families/carers to be able to make informed choices about the services and supports they access in the community.
- 3.2 Structure its programs and services to be flexible and responsive to the individual needs and preferences of clients.
- 3.3 Advise the client, family members and/or advocates of the full range of services that the organisation currently provides, and other services where appropriate, and support them to choose services that suit their needs.
- 3.4 Offer clients choices wherever possible/appropriate in all activities supported by EDAC.
- 3.5 Invite clients and families/carers to express their preferences about the services they receive, and where applicable; work with the client and families/carers to develop an individual service plan to document their choices about services.

- 3.6 Make every effort, within available resources, to accommodate the client's service preferences and choices in the individual service plan and services provided.
- 3.7 Where appropriate, encourage clients, family members and advocates to nominate for positions on the Board.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All EDAC employees are familiar with EDAC's Policy on Making Choices and Decisions and a staff copy of the policy is kept in EDAC office.
- 4.2 EDAC clients and families have access to its Policy on Making Choices and Decisions and have been given a copy of the policy if requested.
- 4.3 The organisation's programs and services have been structured so as to permit maximum flexibility and responsiveness to individual clients' preferences and choices.
- 4.4 Clients and families/carers have a sense of driving their own services and making choices about all aspects of services they receive to meet their needs.
- 4.5 EDAC's full range of services has been portrayed in an easy-to-read hand-out, and on the website and is available to all current and prospective consumers.
- 4.6 If applicable a written current individual service plan has been developed by, or with clients and their families/carers if appropriate, and a copy has been provided to them.
- 4.7 There are clients, family members and/or advocates on the Board of Management.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy shall be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|----------------|------------------------------|
| Title | Privacy | EDAC Policy No. 1.2 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to establish standards of privacy and dignity in the organisation's dealings with prospective, current and past clients of EDAC's services. The policy has been framed around individuals' rights as they are specified in the Privacy Act (2014), Freedom of Information Act (1982), The Disability Services Act (1993) and Standard 1 of the National Standards for Disability Services (2013).

This policy applies to all of EDAC's programs and activities.

2. POLICY STATEMENT – PRIVACY

EDAC is committed to ensuring that all clients and families/carers have the same level of privacy as is expected by the general community.

3. PROCEDURES

The following procedures are to be implemented to ensure that the organisation meets its policy objective of ensuring that all clients of the organisation have the same level of privacy, dignity and confidentiality as is expected by the rest of the community. EDAC staff and board members will:

- 3.1 Provide services in ways that enhance the dignity and positive social image of clients and family members and which respect people's privacy.
- 3.2 Ensure that facilities for changing and toileting for clients provide privacy.
- 3.3 Only collect information about the client that can be shown to be directly relevant to effective service delivery and EDAC's duty of care responsibilities.
- 3.4 Ensure that personal information is stored securely and is not left on view to unauthorised staff or the general public.
- 3.5 Advise the client and family of the nature of the personal information that is held by EDAC about the client.
- 3.6 Advise the client and family/carer of their right to view the information that EDAC keeps in respect of the client.

- 3.7 Ensure that personal information about a client is only held by EDAC as long as it remains relevant to the delivery of effective services and EDAC's duty of care obligations.
- 3.8 Promptly investigate, remedy and document any consumer grievance regarding privacy.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 4 are implemented effectively:

- 4.1 All clients and families/carers have access to EDAC's Policy on Privacy.
- 4.2 All employees have been encouraged to read EDAC's Policy on Privacy and a staff copy of the policy is kept on the premises.
- 4.3 Feedback from clients and family/carers demonstrate that they feel their privacy is respected by EDAC personnel.
- 4.4 Clients and families have been informed about why the information sought is required by the organisation.
- 4.5 Toilets and change rooms at EDAC have closable/lockable doors.
- 4.6 Photographic, video or other identifying images are not displayed or aired publicly without the written prior permission of the client or designated family member/carer.
- 4.7 Client files have been periodically reviewed to ensure that personal information that is no longer relevant, or more than seven years old, is culled from files and shredded.
- 4.8 Any grievances have been addressed in accordance with the privacy, dignity and confidentiality principles outlined in the Policy on Feedback and Complaints.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

Policy and Procedures

| | | |
|---------------|------------------------|------------------------------|
| Title | Confidentiality | EDAC Policy No. 1.3 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to establish standards of confidentiality in EDAC's dealings with its prospective, current and past clients. The policy has been framed around individuals' rights as they are specified in the Privacy Act (1988), Freedom of Information Act (1982), The Disability Services Act (1993) and Standard 1 of the National Standards for Disability Services.

This policy applies to all of EDAC's programs and activities.

2. POLICY STATEMENT - CONFIDENTIALITY

EDAC is committed to protecting the privacy of all its clients and to ensuring that all their personal information remains confidential.

EDAC collects only that information which is necessary for providing effective and relevant service to clients.

Information is only passed on with the consent of the client concerned, or their delegated authority, or where the sharing of information is necessary between EDAC employees to ensure effective and safe service delivery to clients and/or family/carers.

EDAC's Procedures comply with the National Standard on Disability Services Standards on "Feedback and Complaints" and the Privacy Act (1988).

3. PROCEDURES

The following procedures are to be implemented to ensure that the organisation meets its policy objective of ensuring that information about all clients and/or their families/carers are kept in confidence appropriately and that only that information about clients which is necessary for effective and safe service provision will be requested from clients or shared within the service. Information about clients and their families/carers will not be shared outside the service without their consent.

EDAC will:

- 3.1 Require all staff and volunteers of EDAC to sign a "Confidentiality Agreement" stating that they will keep confidential any personal information about clients and their families/carers" unless given prior consent by the individual and/or their primary carer to share that information with another service.

- 3.2 Seek the written consent of the client or family/carer prior to obtaining information from any other source.
- 3.3 Seek the written consent of the client or family prior to releasing information to any other source.
- 3.4 Ensure that staff do not speak about clients and or their family/carers to others inappropriately.
- 3.5 Ensure that personal information is stored securely and is not left on view to unauthorised staff or the general public.
- 3.6 Promptly investigate, remedy and document any consumer grievance regarding confidentiality.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All EDAC employees are familiar with EDAC's Policy on Confidentiality and a staff copy of the policy is kept in EDAC office.
- 4.2 EDAC clients and their families have been provided access to a copy of EDAC's Policies and Procedures on Confidentiality and given a copy if requested.
- 4.3 Clients and families have been informed of the reasons information sought is required by EDAC.
- 4.4 Authority to Release Information forms have been completed by clients or families prior to information being collected from or shared with other sources.
- 4.5 EDAC maintains a client information system that houses all personal information pertaining to an individual client in one secure locality.
- 4.6 Any files containing information about individuals are stored in lockable filing cabinets in a non-public place in the office and files are returned to their proper location as soon as they are no longer required.
- 4.7 Client names or other identifying information is not displayed on whiteboards or notice boards that may be open to view by other clients or the general public.
- 4.8 Any grievances have been addressed in accordance with the confidentiality principles outlined in this policy and the Policy Feedback and Complaints.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer

appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

Policy and Procedures

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|---------------|---------------------------------------|------------------------------|
| Title | Freedom From Abuse and Neglect | EDAC Policy No. 1.4 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to establish standards of practice that recognise and respect that all people involved with EDAC have the same rights to safety, bodily integrity, and freedom from violence and abuse as other people in the community. The policy is written in accordance with the principles outlined by the Australian Human Rights and Equal Opportunity Commission Act (1986). It has been framed around Standard 1 of the National Standards for Disability Services.

2. POLICY STATEMENT – FREEDOM FROM ABUSE AND NEGLECT

EDAC affirms the rights of all people including people with disabilities, to live their lives free from neglect, abuse and exploitation. EDAC also supports the rights of any person to have any observation or allegation of abuse, neglect or exploitation addressed, whilst safeguarding their well-being and dignity; and to have measures put in place to prevent any subsequent abuse occurring.

DEFINITIONS

Concerns

A concern is any situation where a staff member, or anyone who may act on behalf of EDAC, has information sufficient to raise a concern that a consumer is having their human rights infringed, or is suffering abuse, neglect or exploitation. It involves a perception or impression that abuse may be occurring based on known medical or social history, visual evidence and/or verbal communication. The information that warrants a concern is hearsay information and is documented as such, acknowledging the possibility that the concern may or may not be validated – but that attention needs to be paid to the matter.

Allegations - An allegation is a formal statement, written and/or signed by the person making the allegation, made to a staff member or to any external agency, reporting that a consumer has suffered or is suffering abuse, neglect or exploitation. The statement generally includes a specific description of events that is formally reported to have occurred that may lead to an accusation being made.

Serious Incidents

A serious incident can be defined as follows:

- An allegation of physical, sexual, or psychological abuse;
- Harm or omission of duty of care to a person with a disability
- Unlawful behaviour by a service provider, its staff or sub-contractors and their staff; and/or
- Any situation where there would be adverse publicity from the actions of a service provider, its staff or sub-contractor.

3. PROCEDURES – PROTECTION OF HUMAN RIGHTS

EDAC will:

- 3.1 Minimise the risk of clients' rights being infringed, or them being subject to abuse and neglect.
- 3.2 Have recruitment procedures of a high standard where the best available staff are appointed through:
 - a. pre-appointment screening of new staff, including national police clearances;
 - b. reference checking;
 - c. placing new staff on a minimum probationary period of thirteen weeks
 - d. ensuring new staff go through an induction and orientation process and that their performance is regularly monitored during probation; and
 - e. regular appraisal of the performance of all staff.
- 3.2 Implement sound staff and volunteer orientation and induction, which includes information about consumer rights, issues of abuse and neglect and the requirements of Standard 1 - Rights
- 3.3 Remind staff on a regular basis of their responsibilities for safeguarding consumers and to raise any matters of concern.
- 3.4 Provide refresher training to all staff at least once a year about issues relating to human rights, abuse and neglect and appropriate reporting and actions to be taken.
- 3.5 Provide information about Standard 1 to new clients and families/carers.
- 3.6 Empower clients and their family members/carers by informing them of community resources, supporting them in self-advocacy and reminding them of their rights.
- 3.7 Display posters and brochures to create an organisational environment that encourages awareness of the rights of all people, including people with disabilities and their families/carers.
- 3.8 Foster a safe, supportive environment which encourages everyone to raise concerns without fear of retribution.
- 3.9 Work collaboratively with other organisations, and establish referral practices and interagency policies and procedures with those that provide other services to our consumers.
- 3.10 Regularly monitor its services.

4. PROCEDURES – RESPONDING TO ALLEGATIONS OF ABUSE AND NEGLECT

If a consumer's rights are infringed, or we have reason to believe that they have been abused or neglected, EDAC will respond quickly, professionally and compassionately.

1. It is the personal responsibility of all paid staff, volunteers and Board members to communicate any concerns relating to an infringement of human rights, or the abuse or neglect of a consumer to EDAC's Manager or his/her delegate within 24 hours of the concern arising, or immediately if it is believed that the consumer is at imminent risk of harm. The Manager or his/her delegate and/or the Chief Executive Officer will decide how the matter should be managed.
2. The Manager or his/her delegate will reassure the reporting staff member that their concerns will be managed in a **confidential** and professional manner, and that they have acted correctly in bringing their concern to attention.
3. The Manager or his/her delegate or the CEO will assist the staff member raising the concern or allegation to factually and non-judgementally document an account of the concern or allegation, using the "Accident / Incident Reporting Form". This should be done within 24 hours of the concern being raised.
4. If the Manager or his/her delegate believes that the consumer is at immediate risk, he or she will take whatever steps are required to mitigate the risk, and ensure the consumer's safety while the matter is fully investigated.
5. Generally it will be expected that the Manager or his/her delegate will inform the consumer of the concern, reassure them and ensure their involvement in deciding the course of action to be taken. However, it is recognised that in some situations this might not be possible due to the consumer's circumstances, or the nature of the concern. If the consumer is not to be involved in the decision –making about the concern, the reasons for its decision will be documented, and consideration given to the need to involve an advocate to represent their interests.
6. Except for staff who have been given specific authority to do so, no staff member will undertake any level of investigation of a concern or allegation.
7. EDAC Chief Executive Officer will jointly decide on the appropriate action to be taken according to the circumstances and generally taking into account the client's / family members'/carers' views. The action could be:
 - a. to manage the matter within the organisation;
 - b. to engage in discussion with family members or advocate;

- c. to elicit the advice and expertise of another organisation or individual from outside of our organisation;
 - d. to involve an organisation with the required legislative mandate to take action (eg the Department for Community Development, WA Police, the Office of the Public Advocate);
 - e. to take no further action at this time, but continue to monitor the situation and review at a specified later date; and
8. The decision that is taken and the reasons that led to the decision will be documented by the Manager or his/her delegate and endorsed by signature by the CEO.
9. If the matter is assessed to involve any actions that are unlawful, the Chief Executive Officer must immediately advise the President of the Board.
10. Duty of care carries greater weight than the duty to maintain confidentiality in matters of care and protection. This means that the matter may be discussed between those reporting or investigating, but not with any other person. This includes confidentiality of consumer and alleged perpetrator information.
11. In reporting a concern/allegation, staff will ensure that the consumers' right to dignity, confidentiality and privacy is maintained in accordance with the National Standards for Disability Services and the Privacy Act.
12. If the matter is considered to be a serious incident, it must be reported to The Disability Services Commission by the CEO within seven (7) working days, in accordance with the Serious Incident Reporting policy.
13. The Manager or his/her delegate or CEO will provide feedback to support the staff member who raised the concern or made the allegation regarding the outcome.
14. Debriefing will be undertaken with all relevant individuals when the matter reaches a conclusion. The Chief Executive Officer will determine who the appropriate person is to conduct the debriefing.
15. When the matter is concluded, the Chief Executive Officer and/or his/her delegate will review the actions taken, to evaluate EDAC's response to the matter, and to identify opportunities to develop strategies to prevent a future occurrence of a similar incident; and inform the relevant parties of the outcome of actions taken.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

Policy and Procedures

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|---------------|------------------------------------|------------------------------|
| Title | Participation and Inclusion | EDAC Policy No. 2 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to ensure that EDAC's services are designed and delivered in ways that offer opportunities for people with disabilities and their families/carers from CaLD backgrounds to have maximum opportunities to be involved in the general community by being present, by being socially included and by having meaningful participation in the general community. The policy has been framed around Standard 2 of the National Standards for Disability Services (2013) – "Participation and Inclusion". The Standard states "**Participation and Inclusion:** *The service works with individuals and families, friends and carers to promote opportunities for meaningful participation and active inclusion in society*".

This policy applies to all of EDAC's programs and activities.

2. POLICY STATEMENT - COMMUNITY PARTICIPATION AND INCLUSION

EDAC is committed to providing services that assist clients and their families/carers to:

- Have opportunities to socialise and build relationships with members of the wider community.
- Pursue their interests in community settings;
- Continue and further develop relationships with family, friends, neighbours and advocates
- Make choices about which activities they engage in, in the community
- Develop skills which enhance their opportunities to participate in wider community activities;

3. PROCEDURES

The following procedures are to be implemented to enable EDAC to meet its policy objective of ensuring that people with disabilities and their families/carers enjoy maximum participation and inclusion in and with the community.

EDAC will:

- 3.1 Encourage all staff, volunteers and staff to read EDAC's policy on Community Participation and Inclusion and provide easy access to this policy.
- 3.2 Structure its programs and services to be provided in a way that facilitates the inclusion and participation of clients and their family/carers with other members of the community.
- 3.3 Support positive changes in services and legislation and also support individual clients to foster people's capacities to maintain positive relationships with their family, friends and other significant people in their lives.
- 3.4 Advocate for and support people to have increases in opportunities for people disabilities being able to pursue their chosen interests in the wider community, which may include hobby /interest groups, work, volunteering, learning, and sport or social activities.
- 3.5 Build into its programs strategies to make the greatest possible use of community facilities and services and which promote community connections.
- 3.6 Use community facilities and services in a manner and at times that coincide with those of the wider community.
- 3.7 Select staff and volunteers on the basis of their own involvement and connection with the wider community, amongst other attributes.
- 3.8 Involve other members of the community in the organisation's activities.
- 3.9 Collaborate with other community groups, and their members, to facilitate the inclusion of clients and their families/carers in their activities.
- 3.10 Implement strategies that facilitate community and cultural connection for people of all cultural and language backgrounds; including Aboriginal and Torres Strait Islander people.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All EDAC employees are familiar with EDAC's Policy on Participation and Inclusion, and it is made available to all staff and volunteers.
- 4.2 EDAC clients and families have access to its Policy on Participation and Inclusion and have been provided with a copy of the policy if requested.

4.3 EDAC's programs and services have been structured in a way that facilitates the inclusion and participation of clients and their families/carers with other members of the community, and where beneficial, with each other.

4.4 A range of community groups have working links with EDAC.

4.5 Staff and volunteers of EDAC have a range of connections with community services and groups.

4.6 People from all cultural and language backgrounds, including Aboriginal and Torres Strait Islander people, are welcomed by the service and are supported to make links in communities of their choice.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy shall be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|--|------------------------------|
| Title | Valued Status – Facilitating Skill Development and Helping People to take on Valued Roles | EDAC Policy No. 2.1 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to ensure that EDAC’s services provide its clients and their families/carers with opportunities to develop their skills in a range of areas which enhance their opportunities for community inclusion and participation. The policy has been framed around parts of Standards 2 and 3 of the National Standards for Disability Services (2013). This policy applies to all of the organisation’s programs and activities.

2. POLICY STATEMENT – VALUED STATUS

EDAC is committed to providing its clients with opportunities to develop and maintain skills and the opportunity to participate in activities that enable them to have valued roles in the community. This includes enhancing increased confidence and self-esteem and enhancing social image wherever possible.

DEFINITIONS

A “Valued Role” includes those roles to which we give a status or value in our society. It may be a role as a

- Family Member – brother , sister cousin, aunt, uncle, nephew etc;
- Tenant or house mate
- Employee - assistant, gardener, shop assistant, teacher, dancer, musician, lawyer
- Club Member – sporting groups, other interest groups
- Customer – buying things in a restaurant or shop
- Library user
- Social media user
- Helper – being able to help someone else

3. PROCEDURES

The following procedures are to be implemented to enable EDAC to meet its policy objective of facilitating clients to develop needed skills and achieve valued social roles in the community.

EDAC will:

- 3.1 Structure its programs and services so they take into account the age, interests, language and cultural background of clients and their families/carers.
- 3.2 Show how it values clients and their families/carers by listening to their ideas and following up on their suggestions wherever they advance their individual goals.
- 3.3 Wherever practicable, support clients to participate in learning in community settings, which helps to advance their skills and knowledge.
- 3.4 Ensure that EDAC staff and volunteers are properly equipped to co-ordinate and/or deliver the skills development activities in line with the goals of clients and their families/carers and with EDAC's service objectives.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All EDAC employees are familiar with EDAC's Policy on Valued Status and a staff copy of the policy is kept in EDAC office.
- 4.2 EDAC clients and families have access to its Policy on Valued Status and have been provided with a copy of the policy if requested.
- 4.3 The culture of the organisation promotes the intrinsic value of all people, of all cultural and language backgrounds and abilities.
- 4.4 Clients engage in activities that build on existing competencies and increase the prospect of increasing their confidence and fulfilling valued roles in the community.
- 4.5 EDAC staff and volunteers are properly equipped to co-ordinate and/or facilitate the skills development activities desired and needed by clients and their families/carers.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy shall be reviewed immediately and amended accordingly.

Policy and Procedures

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|---------------|---|------------------------------|
| Title | Individual Outcomes and Planning | EDAC Policy No. 3 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to establish standards of practice that recognise each client of EDAC as having unique skills, lifestyle preferences, personal aspirations and support needs. The policy has been framed around supporting people to work towards achieving the lifestyle of their choice, including meeting their goals for health, personal development, social interaction, personal relationships, recreation, and work or community contribution, specified in the Disability Services Act (1993) and Standard 3 of the National Standards for Disability Services (2013) which states: “**Individual Outcomes:** *Services and supports are assessed, planned, delivered and reviewed to build on individual strengths and enable individuals to reach their goals;*”

This policy applies to all of EDAC’s programs and activities.

2. POLICY STATEMENT – INDIVIDUAL OUTCOMES AND PLANNING

EDAC respects and responds to people with disabilities and their families/carers in accordance with their individual life experiences, culture, language and other individual factors which affect their needs and responses to their circumstances.

EDAC is committed to ensuring that all its clients receive services that are planned and delivered around their individual circumstances, needs, and preferences, which build on their strengths and work towards their chosen goals. EDAC services have a focus of positive outcomes for all clients. EDAC staff and volunteers work to facilitate positive outcomes in line with clients’ individual goals and where appropriate, those of their family/carers which may be in areas of:

- 1) **Health and Well-Being**
- 2) **Community Participation and Inclusion**
- 3) **Independence and/or Learning**
- 4) **Relationships with Family , Friends and Community members**
- 5) **Pursuing Interests or Leisure Activities**
- 6) **Housing, Safety and Security**
- 7) **Employment and/or financial security**

3. PROCEDURES

The following procedures are to be implemented to ensure that EDAC meets its policy objective of designing and delivering services to work towards opportunities for all people with disabilities and their families/carers from CaLD backgrounds to be able to pursue their goals and aspirations and which take into account their interests, strengths and support needs.

EDAC will:

- 3.1 Work with community agencies and government officers to help ensure that services and supports available to people with disabilities and their families/carers, and especially those from CaLD backgrounds are working to facilitate them being able to live their chosen lifestyles, have opportunities which are equal to other members of the community, and can pursue their goals or aspirations and their interests and talents as far as possible.
- 3.2 Advocate for the meeting of support needs for people with disabilities and their families/carers from CaLD backgrounds so they can pursue their chosen lifestyle choices and interests.
- 3.3 Meet with each client and if appropriate their family/carers to discuss their needs and preferences for supports and what they want from the service. This may include collecting necessary information to ensure the service can meet clients' needs, such as health, medical, safety, social and other personal information.
- 3.4 Develop an individual service plan with the client and their family/carers clarifying the client's goals for desired outcomes; and advocacy strategies that the service staff will use to work with the client to work towards those goals. The plan will reflect the client's desires for the future, and current situation including their interests, strengths and skills, support networks and needs.
- 3.5 Ensure that service plans are relevant and responsive to client's diverse needs and preferences, including their age, gender, cultural background, faith, heritage, sexual identity, relationships and other relevant factors.
- 3.6 Provide advocacy services and supports to individual clients in accordance with their plan; and in least restrictive ways to facilitate their progress towards achieving their goals.
- 3.7 Collaborate with other community agencies and services to provide a coherent, relevant service which fosters links with other community organisations and supports.
- 3.8 Document the client's progress towards their chosen goals, and any changes /modifications that need to be made to goals and/or strategies to ensure the service is supporting the client and family/carers in ways that are beneficial to them.
- 3.9 Provide a copy of the individual service plan to the client and /or their family/carer if they wish.

- 3.10 Document all plan revision and reasons for changes to goals and/or strategies.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All EDAC employees are familiar with EDAC's Policy on Individual outcomes, individual service planning, progress documentation and review. A staff copy of the policy is kept in EDAC office.
- 4.2 EDAC clients and families have access to its Policy on Individual Outcomes and have been given a copy of the policy if requested.
- 4.3 Clients and families/carers have been involved from the outset in designing the individual plan to advocate for the meeting of their needs.
- 4.4 Clients and families/carers report a sense of moving towards their goals with the support of the service, and are confident to express their views about how the service supports are benefitting them and any revisions of the plan and service strategies they want over time.
- 4.5 Necessary information to meet EDAC needs of clients is held by the organisation and treated in accordance with the Policies on Privacy and Confidentiality.
- 4.6 Clients and families have a current copy of the agreed advocacy plan if they wish, and can use it to guide progress.
- 4.7 Staff providing direct advocacy support services to clients have access to a current copy of the individual service plan and use it to guide the supports they provide and the regular documentation of each client's progress towards their goals.
- 4.8 Any grievances have been addressed in accordance with the principles outlined in this policy and the Policy on Consumer Complaints.
- 4.9 The service has collaborative working relationships with a range of other services and supports in the community which it refers clients to and works with to provide coordinated services which are effective for clients and their families/clients.

REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|---------------|------------------------------|
| Title | Duty of Care | EDAC Policy No. 3.2 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to establish standards of practice that recognise that EDAC has a duty to ensure the safety and well-being of all clients who use EDACs services and to ensure that they are not at risk of harm or injury whilst they are being supported by EDAC. The policy has been framed around Standard 1 – Human Rights, Standard 3 – Individual Outcomes and Standard 6 – Service Management of the National Standards for Disability Services (2013), which includes safety issues.

Duty of Care is a legal term which means that if a staff member's actions are not made with reasonable care, attention, caution, and prudence, their actions may be considered negligent. A duty of care can be breached either by action or inaction; that is, doing something that causes a person harm, or neglecting to do something which prevents or relieves harm to a person.

This policy applies to all of EDAC's programs and activities.

2. POLICY STATEMENT – DUTY OF CARE

EDAC staff have a duty to ensure that all reasonable care is taken to ensure the safety and well-being of clients, family members/carers and employees whilst they engage in EDAC activities.

3. PROCEDURES

All EDAC staff and Board Members will act in accordance with the policies and procedures of the organisation and in particular will take due care to be mindful of and act in compliance with the following policies:

- Safety Procedures
- Protection of Human Rights and Freedom from Abuse and Neglect
- Individual Planning and Outcomes
- Privacy
- Employee and Volunteer Code of Conduct

- Board of Management Code of Conduct

4. PERFORMANCE STANDARDS

- 4.1 All staff and volunteers understand their obligations in relation to duty of care.
- 4.2 All staff and volunteers are familiar with EDACs policies and procedures; and in particular those relating to safety procedures.
- 4.3 EDAC has zero or minimal numbers of serious incidents due to staff neglecting to act or causing harm to clients of EDAC.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

Policy and Procedures

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|---------------|------------------------------------|------------------------------|
| Title | Working with Family /Carers | EDAC Policy No. 3.3 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to encourage the awareness of the role of family/carers; the importance of working collaboratively with clients and their family/carers if they wish, and family/carers rights to be involved in the planning, implementation and evaluation of EDAC services as appropriate for their family members with disabilities. This policy is to facilitate the compliance of EDAC services with the Carers Recognition Act (2004). It applies to all of EDAC's programs and activities.

2. POLICY STATEMENT – WORKING WITH FAMILY/CARERS

EDAC recognises the role of family/carers in supporting and safeguarding the quality of life of people with disabilities. EDAC is committed to ensuring that the family/carers of children and adults with disabilities who access EDAC services are respected and worked with in collaborative ways to the benefit of all clients; and that the views and needs of family/ carers are taken into account in the planning, delivery and evaluation of EDAC services. EDAC works to comply with the Carers Charter (2004).

Definition – A “carer” is a person who provides ongoing care to a person with a disability, or who is frail aged or has a mental or medical health problem requiring care. The carer is not a volunteer or paid for their role as carer, but is often a parent, spouse, other family member or friend.

The Western Australian Carers Charter

1. Carers must be treated with respect and dignity.
2. The role of carers must be recognised by including carers in the assessment, planning, delivery and review of services that impact on them and the role of carers.
3. The views and needs of carers must be taken into account along with the views, needs and best interests of people receiving care when decisions are made that impact on carers and the role of carers.
4. Complaints made by carers in relation to services that impact on them and the role of carers must be given due attention and consideration.

3. PROCEDURES

The following procedures are to be implemented to ensure that EDAC meets its policy objective of working in partnership with family/carers of clients of the service, wherever possible and appropriate.

EDAC staff and volunteers will:

- 3.1 Be friendly and approachable to the family members/carers of clients of EDAC.
- 3.2 Treat all family/carers with respect.
- 3.3 Listen to the views and needs of the family/carers in relation to EDAC's services, and respond to them and/or follow up on them as appropriate.
- 3.4 Be understanding of the different ways family/carers may respond to the needs of people with disabilities according to their life experiences and cultural backgrounds.
- 3.5 Where a client is unable to speak for themselves, seek information and understanding of the clients AND the family/carers needs in relation to EDAC services, including their preferences for service delivery. The views and wishes of family /carers of all clients; wherever applicable will be taken into account when planning and delivering services.
- 3.6 Respond to any feedback or complaints from family/carers in a respectful and timely way, whereby their views are heard and the complaints procedures are followed.
- 3.7 Be provided with information about this policy and information about the Carers Recognition Act as part of their induction into EDAC, and a copy of the policy if requested.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All EDAC staff and volunteers are aware of the role of family /carers and their rights to participate in the planning, implementation and evaluation of services and to have any complaints heard and dealt with fairly.
- 4.2 Family/carers report that EDAC staff are approachable, listen to their views and needs, and respond in which recognise and support their roles as carer.
- 4.3 Complaints of family/carers have been dealt with fairly and in a timely manner, and in compliance with the policy and procedures on complaints resolution.

REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

Policy and Procedures

| | | |
|---------------|---|------------------------------|
| Title | Feedback and Complaints Resolution | EDAC Policy No. 4 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to establish mechanisms for clients and family members/carers/advocates to provide feedback to EDAC, or, to lodge a complaint or grievance. Complaints are also seen to have an important role in contributing to service improvement at EDAC. The policy has been framed around natural justice principles and individuals' rights as they are specified in the Standards Australia Complaint Handling Standard AS 4269-1995, The Disability Services Act (1993) and Standard 4 of the National Standards for Disability Services (2013), which states "**Feedback and Complaints:** *Regular feedback is sought and used to inform individual and organisation-wide service reviews and improvement.*"

This policy applies to all of EDAC's programs and activities.

2. POLICY STATEMENT – FEEDBACK AND COMPLAINTS RESOLUTION

EDAC welcomes feedback about its services including suggestions, commendations, requests for service improvements and complaints. Clients and their families/carers are encouraged to provide feedback and make complaints if necessary and made aware of how to do this; without fear of any adverse consequences. All Clients and families/carers are offered advocacy support when raising issues or complaints.

EDAC is committed to ensuring that all its clients and their families/carers are free to lodge grievances, to have them dealt with promptly, fairly and non-threateningly, and to have those grievances resolved if possible. Treatment of disputes and grievances will be fair to both complainant and respondent, will be responded to courteously and will be given high priority for resolution and remediation.

3. PROCEDURES

The following procedures are to be implemented to enable the organisation to meet its policy objective of ensuring that all consumers are encouraged to give feedback about the service, and are free to lodge and have resolved any disputes or grievances regarding EDAC, its staff or its services. EDAC will:

- 3.1 Operate in ways where clients, family members/carers and advocates feel that staff and volunteers are easily approachable and will listen to their feedback, suggestions for improvements or any complaints.

- 3.2 Regularly inform clients, families/carers that feedback about the service is welcomed, and inform them of how they can provide feedback at any time.
- 3.3 Designate a person to handle all complaints about EDAC and to be responsible for the keeping of complaints records and correspondence. The Complaints Coordinator may be the Chief Executive Officer, or a delegated paid staff member.
- 3.4 Ensure that all clients of EDAC clients and their family members/carers are made aware of their right to make a complaint and their options for how they can lodge a complaint, if they raise a concern.
- 3.5 Ensure that all clients of EDAC are informed that they have a right to have an independent advocate of their choice to support them when discussing service issues or making a complaint.
- 3.6 Ensure that all complaints are dealt with in ways which respect the privacy of the complainant and ensure complaints records are kept confidential in accordance with EDAC Policies on Privacy and Confidentiality.
- 3.7 Deal with complaints in a timely and fair manner, responding within five working days to a client or family/carer's concern.
- 3.8 If a person has a complaint or concern, in the first instance they should be encouraged to resolve the issue with the person concerned; that is, the staff member or volunteer with whom they have an issue to be resolved. The staff member should follow the designated procedure in the Operations Manual.

Procedure for Complaint Resolution is as follows:

- I. Complaints or issues of concern may be discussed and resolved with the staff member concerned in the first instance. If the client/family/carer wishes to have the complaint lodged; then they and/or a staff member can complete a Client Complaint Form, including the person's name, contact number and the date.
- II. If the matter is not resolved from this discussion, the aggrieved person should be directed to speak with the Manager or his/her delegate or the Chief Executive Officer of EDAC.
- III. All complaints received must be submitted to the Chief Executive Officer or his/her delegated staff member (Complaints Coordinator) immediately.
- IV. The Chief Executive Officer will:
 - a. contact the complainant within FIVE working days of receiving the complaint to determine the basis of the complaint.
 - b. ensure that the involved parties are interviewed to obtain relevant information in order to propose a course of remedial action within TEN working days after meeting with the complainant.
 - c. ensure all information relating to the complaint, the agency's action and responses are fully documented.

- d. advise the complainant of his or her rights to take the matter directly to the Management Committee / Board of EDAC in the event that the proposed course of remedial action is unsatisfactory.
- 3.9 The person may attend all complaints resolution meetings with their chosen advocate if they so desire.
- 3.10 Records of complaints need to include persons present at resolution meetings, including the advocate for the complainant if they require one.
- 3.11 Complaints registered with the Board should be responded to within seven days of the lodgement of the complaint.
- 3.12 EDAC will keep records of complaints and the issue surrounding the complaint, and track any trends in complaints which EDAC receives. These records should be reported to the Disability Services Commission as part of the Annual Self Assessment.
- 3.13 If the grievance is still not resolved, the complainant should be provided with information about other services to help them resolve their complaint, including the Office of Health and Disability Complaints.

4. PERFORMANCE STANDARDS

The following performance standards need to be met to ensure that the procedures specified in the Complaints Management Resource File are implemented effectively:

- 4.1 EDAC has a culture of listening to the views and needs of its clients and their family/carers; and these consumers feel that staff and volunteers are easily approachable to discuss any service issues.
- 4.2 All EDAC employees are familiar with EDAC's Policy on Feedback and Complaints Resolution and a staff copy of the policy is kept in EDAC office.
- 4.3 EDAC clients and families have access to its Policy on Feedback and Complaints Resolution and have been given a copy of the policy if requested as well as regularly reminded of
 - a. their rights to give feedback or make complaints
 - b. the process to provide feedback or make complaints to the service.
- 4.4 The service has records of feedback and complaints made to the service, and analysed and documented any trends for the purposes of implementing service improvements.
- 4.5 Service improvements made are relevant to documented feedback and complaints.

- 4.6 If client has elected to have the complaint dealt with internally, the Complaints Co-ordinator has met with the complainant within five working days of being advised that the client wishes to proceed with the complaint internally.
- 4.7 The Complaints Co-ordinator has clarified and documented the nature of the complaint or concern and the resolution sought by the complainant.
- 4.8 The Complaints Co-ordinator has interviewed the involved parties and assembled a proposed course of remedial action within ten working days of meeting with the complainant.
- 4.9 In the event of the proposed course of remedial action being unacceptable to the complainant, the Complaints Co-ordinator has advised the complainant of his or her rights and avenues to take the matter further.
- 4.10 All complaints, resolved and unresolved, have been recorded in a confidential complaints log book and a non-identifying summary of any complaints has been tabled at the next Board meeting to inform future service improvement efforts.
- 4.11 No clients or their families/carers have suffered adverse consequences within the service as a result of raising concerns or complaints with the service.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

| | | |
|---------------|---------------------------|------------------------------|
| Title | Access to Services | EDAC Policy No.5 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to outline the circumstances and conditions under which clients can be accepted for EDAC services. The policy complies with the National Standard for Disability Services No. 5 which states “**Service Access:** *The service manages access, commencement and leaving a service in a transparent, fair, equal and responsive way.*” This policy applies to all of EDAC’s programs and activities.

2. Policy Statement: ACCESS TO SERVICES

EDAC provides information and advocacy services to people with disabilities and their families/carers from CaLD backgrounds. People are eligible for EDAC services on a non-discriminatory basis; via a transparent process. All people seeking advocacy services will be assisted, depending on EDAC’s resources and ability to support the client. If EDAC is unable to offer them a service in relation to their needs, it will provide the person and/or their family/carers with information about other service options which may suit them. EDAC provides clear information to potential clients and their families/clients about the services it offers and how the service operates.

Relative Need:

Clients are accepted into EDAC programs based on their needs for support. Given the high demand for services, clients who have higher or more complex support needs, and/or few or no other outlets to meet their needs for supports, will be offered a service before those who have lesser needs and/or are already accessing other services similar in nature.

3. PROCEDURES

The following procedures are to be implemented to enable EDAC to meet its policy objective of ensuring that, within the constraints of available funding and resources, those people with disabilities who most need services available through EDAC are accepted for services and that services are only withdrawn at the client’s initiative or when the organisation’s duty of care responsibilities to its clients or staff are demonstrably compromised. EDAC will:

3.1 Develop and distribute an information brochure on EDAC’s services and distribute it through local area co-ordinators and major health, welfare, local government and other community outlets in the area, in accordance with its strategic plan.

- 3.2 Distribute information about its services in a range of accessible formats, such as in braille, or other languages, as applicable.
- 3.3 Welcome and accept referrals from clients, family members/carers, advocates, local area co-ordinators or other government or non-government agencies.
- 3.4 Offer services to persons found eligible based on EDAC's available resources and the person's relative need; and explain to them and their family/carer how they can start accessing services/supports.
- 3.5 Provide information to people entering the service and their family/carers information about what the service offers, how services are delivered; any costs; requirements for agreements and service planning, and service review over time.
- 3.6 If a person is not eligible for services from EDAC, or EDAC is not in a position to provide a service, refer that person to alternative services which may meet their needs and preferences.
- 3.7 Seek feedback from people with disabilities, and their families/carers about the service access procedures and implement improvements to service access and transparency where applicable.
- 3.8 Investigate barriers to access to its services, and where appropriate, address them.
- 3.9 Maintain records of people who have been referred to EDAC and denied a service summarising reasons for their being found ineligible or, if found eligible, reasons for being placed on the waitlist.
- 3.10 Collaborate with other relevant organisations and community groups/agencies to build and maintain a referral network.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All EDAC employees are familiar with EDAC's Policy on Access to Services and a staff copy of the policy is kept in EDAC office.
- 4.2 EDAC clients and families have access to its Policy on Access to Services and have been provided with a copy of the policy if requested.
- 4.3 An information brochure describing EDAC's services has been distributed strategically in the local community.
- 4.4 Persons referred for services have been interviewed within two weeks, or an agreed time frame, of the referral being received by EDAC.
- 4.5 Services have been offered on the basis of eligibility, relative need and available services.

4.6 Records have been kept on a central file of people who were found to be ineligible or found to be eligible, but denied services based on insufficient resources or relativity of need; for use in analysing service access issues and service improvement.

4.7 If applicable, records are kept on a central file of people who are on the organisation waitlist and contacts they have had with EDAC while on the waitlist.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy shall be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

| | | |
|---------------|----------------------------|------------------------------|
| Title | Exiting the Service | EDAC Policy No. 5.1 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out the circumstances and conditions under which people leave EDAC service. The policy complies with the National Standard for Disability Services No. 5 which states “**Service Access:** EDAC manages access, commencement and leaving a service in a transparent, fair, equal and responsive way.”

2. Policy Statement: EXITING EDAC

Any client of EDAC can access its services for any period required to support them in their needs for advocacy. Advocacy cases will be closed and archived either once the issue has been concluded or if there has been no activity on the advocacy issue for more than a month. Clients may choose to leave EDAC services at any time

The circumstances under which a client leaves EDAC services may include:

- i) the client no longer wishes to be assisted by EDAC;
- ii) the client is not contactable for a period of more than six months;
- iii) the client exhibits ongoing harmful or threatening behaviours which mean they are at constant risk of injuring themselves, other people, or property; and planned discussions and attempts to support the person to behave in non-harmful ways have failed.

3. PROCEDURES

The following procedures are to be implemented to enable EDAC to meet its policy guideline to ensure that services are only withdrawn at the client’s initiative or when the organisation’s duty of care responsibilities to its clients or staff are demonstrably compromised. Also, when a person leaves EDAC, appropriate exit procedures are carried out.

- 3.1 All cases which have not been active for more than a month after the “action date” should be followed up and if appropriate closed.
- 3.2 All files of clients who have not contacted EDAC for six months and over, are to be archived and noted in the EDAC Client Management System.

- 3.3 If a client wants to cease accessing EDAC, the service will discuss the reason for this with the client and/or their advocate and record the reason for the person leaving.
- 3.4 If EDAC is contemplating withdrawing services, arrange a meeting with the client, family and any advocate(s) they nominate to discuss the reasons.
- 3.5 EDAC will withdraw services only if requested by the client or family or if the organisation's duty of care responsibilities to its clients or staff are severely compromised and reasonable efforts to rectify the problem have been made and shown to have failed.
- 3.6 If after the discussion the organisation decides to withdraw services, write to the client, family and advocates outlining the reasons behind the decision and advising them of their rights under the organisation's Policy on Feedback and Complaints.
- 3.7 Maintain records of people who have exited EDAC, summarising reasons for their withdrawal or why service was denied so that any trends in dissatisfaction with EDAC can be monitored and used for service improvement.

4. PERFORMANCE STANDARDS

- 4.1 All EDAC employees are familiar with EDAC's Policy on Exiting the Service and a staff copy of the policy is kept in EDAC office.
- 4.2 EDAC clients and families have access to its Policy on Exiting The Service and have been given a copy of the policy if requested.
- 4.3 Discussions have been held with any clients and their family members/advocates to discuss reasons for the client exiting EDAC, and efforts have been made to resolve any issues related to the withdrawal or denial of services.
- 4.4 Records are kept on people who have withdrawn from EDAC and the reasons for their exit; with any trends in reasons analysed and discussed in relation to service improvements.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy shall be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

| | | |
|---------------|---------------------------|------------------------------|
| Title | Service Management | EDAC Policy No. 6 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to establish standards of practice that promote good management of EDAC; its compliance with relevant legislation, with regulations relating to incorporated bodies, and which support the effective planning, organisation and implementation of EDAC services and programs. The policy complies with the National Standard for Disability Services No. 6 which states "**Service Management:** EDAC has effective and accountable service management and leadership to maximise outcomes for individuals;"

2. POLICY STATEMENT – SERVICE MANAGEMENT

EDAC is committed to ensuring that it is managed in ways which promote the organisation's effectiveness, efficiency of service delivery and the safety and well-being of all its clients, staff and volunteers. Sound management practices include:

- Development and ongoing maintenance of the strategic direction of the organisation;
- Thorough checking and selection procedures of staff and volunteers,
- Clear and effective communication between managers, staff, clients and their families/carers on all relevant service issues.
- Effective management, support and development of staff; including induction training for all new staff and volunteers; particularly in the areas of safety and protecting the human rights of clients and families/carers; and ensuring that all staff, volunteers and Board Members are aware of the National Standards for Disability Services.
- Assessment of risks to the agency and its clients, and mitigation of risks wherever possible.
- Thorough safety and injury prevention procedures
- Audited and transparent financial processes;
- Effective promotion of services
- Regular gathering of client feedback and reporting of quality of services;

- Implementation of continuous improvement strategies
- Development and fostering of staff and service culture which promotes working in partnership with clients, their family/carers and staff of other organisations, and embraces the principles of EDAC policies.

3. PROCEDURES

EDAC will:

- 3.1 Develop, in collaboration with clients and their families/carers a service vision, mission and values which will underpin service operations.
- 3.2 Manage its services and supports so they provide the least restriction on clients and their families/carers and support their freedom of expression and engagement in preferred activities whilst safeguarding their health and well-being.
- 3.3 Develop a strategic plan for the service to guide the directions of services provided, and procurement and utilisation of financial and other resources.
- 3.4 Engage in planning of future strategies for service provision, human resource management, asset management, risk management, procurement of funds, and deployment of funds.
- 3.5 Comply with relevant legal, regulatory and contractual obligations
- 3.6 Develop and maintain relevant policies and procedures to guide EDAC management and staff in the provision of EDAC services; including policies and procedures relating to personalised services, feedback and complaints and continuous improvement.
- 3.7 Develop and maintain relevant policies and procedures to guide EDAC management and staff in relation to all safety and safeguarding matters for service clients and their families/carers, such as, accident and injury prevention, risk management, providing a safe environment, and emergency and evacuation procedures to help ensure the safety of all persons while they are engaging in EDAC activities.
- 3.8 Provide services that are customised to each individual client's needs and preferences; and take into account the views of families/carers; i.e services which are "person-centred"
- 3.9 Develop and implement sound procedures for the recruitment and selection of staff, including advertising of positions, development of job descriptions and selection criteria for positions, interviewing job applicants, criminal records and working with children checks, and reference checking.
- 3.10 Provide new staff with comprehensive induction and orientation to their jobs, including provision of copies of the policies and procedures of EDAC.
- 3.11 Ensure that staff are appropriately remunerated, and have an annual performance review.

- 3.12 Provide appropriate support to staff through coaching, supervision, meetings and regular opportunities for ongoing discussion of service provision and work related issues.
- 3.13 Provide relevant training and development opportunities to staff and volunteers to ensure their service provision methods are current and safe.
- 3.14 Develop and implement appropriate procedures for disciplinary action and staff coaching in the case of staff misconduct.
- 3.15 Develop and implement appropriate strategies for the recording and management of accidents, injuries and hazards.
- 3.16 Conduct an annual independent audit of EDAC's finances.
- 3.17 Develop and implement sound practices, including record keeping and accounting, for the receipt, banking, expenditure and investment of funds.
- 3.18 Promote its services through distribution of brochures, word of mouth, liaison with other agencies and Local Area Coordinators.
- 3.19 Develop strategies for ensuring the quality and effectiveness of services provided, and for monitoring service quality.
- 3.20 Implement processes for monitoring its services; gathering feedback, learning about contemporary and evidence-based practice which support continuous improvement and strengthen EDAC's capabilities in directly supporting positive outcomes for clients and their families/carers.
- 3.21 Develop and implement strategies for gathering client and family/carer feedback about its services, and then use this feedback to implement improvements in services and procedures.

4. PERFORMANCE STANDARDS

- 4.1 EDAC has a relevant, workable Strategic Plan including service vision, objectives, values, strategies and time frame.
- 4.2 Policies and procedures are in place to guide the operations of EDAC services.
- 4.3 Staff are aware of the Policies and Procedures of EDAC.
- 4.4 Clients and their families/carers report positive outcomes as a result of being supported by the service.
- 4.5 Staff have had a performance review, at least annually.
- 4.6 New staff have a duty statement, and have been selected on merit against agreed selection criteria.

- 4.7 New staff have completed adequate induction into their job tasks and safety procedures for their work at EDAC.
- 4.8 Staff reviews reveal that staff feel appropriately supervised and supported.
- 4.9 Occurrences of accidents and injuries are rare.
- 4.10 Appropriate financial, banking and accounting procedures are in place.
- 4.11 EDAC distributes current brochures and information about its services to the wider community.
- 4.12 Regular reviews of EDAC activities are carried out.

5. Review of the Policy

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

Policy and Procedures

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|---------------|---|------------------------------|
| Title | Recruitment and Selection of Staff | EDAC Policy No. 6.1 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out recruitment and selection procedures for EDAC. The policy recognises the organisation's legal and moral obligations under the Equal Opportunity Act (1984), Disability Discrimination Act (1992), Sex Discrimination Act (1984), Racial Discrimination Act (1975), Human Rights and Equal Opportunity Commission Act (1986), Workplace Relations Act (1996), Minimum Conditions of Employment Act (1993), and Standard 6 of the National Standards for Disability Services (2013).

This policy helps to ensure that EDAC services are provided by employees and volunteers who are properly trained and supervised to provide horse riding activities for all clients, including people with disabilities.

2. POLICY STATEMENT – RECRUITMENT AND SELECTION OF STAFF

EDAC is committed to ensuring that the best employees are recruited into the organisation by operating a fair, open, merit based recruitment and selection system that assesses prospective employees against appropriately developed duty statements and selection criteria and is complemented by formal reference check and police clearance procedures.

All selected staff are also required to have a National Police Clearance and "Working With Children Check" if working with children under the age of 16 years, prior to commencing work at EDAC.

3. PROCEDURES

The following procedures are to be implemented to ensure that the organisation meets its policy objective of recruiting the best employees. EDAC will:

- 3.1 Maintain written duty statements and selection criteria for all positions in the organisation.
- 3.2 Advertise all vacant positions widely, in newspapers and on websites that have the widest circulation in the organisation's area of operation; unless the Board of Management authorises other methods of publicising the vacancy.

- 3.3 Provide all prospective applicants with a copy of the relevant duty statement and selection criteria along with a brief overview of the organisation's operations.
- 3.4 Require all applicants to address all of the selection criteria in their written application.
- 3.5 Assemble a selection panel of no less than three persons drawn from the Board, staff of the organisation and/or clients of the organisation or their family members/carers.
- 3.6 Short-list all applicants for interview who have demonstrated in their written application that they meet all of the selection criteria that are essential to the position.
- 3.7 Establish a standard set of interview questions that enables the selection panel to establish the degree to which the short-listed applicants best meet the selection criteria.
- 3.8 Conduct interviews in an appropriate setting and, as far as practicable, on the same day or consecutive days.
- 3.9 Make summary notes on applicants' responses to questions.
- 3.10 Consider all short-listed applicants' responses to prepared questions and recommend the candidate who best meets the selection criteria for the position or, if no candidate meets the required standards, re-advertise the position.
- 3.11 Contact at least two of the recommended candidate's referees explaining the nature of the organisation's activities, the position that is being sought and seeking the referees' assessments of the recommended candidate with respect to fulfilling the duties of the position and to verify the recommended applicant's claims against the selection criteria.
- 3.12 Prepare a brief referees' report on the recommended candidate's suitability for the position.
- 3.13 Subject to satisfactory referees' reports, prepare a conditional offer of appointment to the recommended candidate including a commencement date, conditions of employment, commencement salary, and asking them to provide a current police clearance.
- 3.14 Subject to satisfactory police clearances (in accordance with EDAC Policy on Criminal Records Checks), invite the successful applicant to formally accept the offer of appointment under the conditions described in the letter.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 Duty statements and selection criteria for all positions are kept in an appropriate human resources file.
- 4.2 Vacant positions were externally advertised in the appropriate media unless otherwise authorised by the Management Committee/ Board.
- 4.3 Prospective applicants were provided with a copy of the duty statement and selection criteria for the position along with a brief overview of the organisation's operations.
- 4.4 Applicants were short-listed by a selection panel on the basis of their written applications.
- 4.5 All short-listed applicants have been formally interviewed by the selection panel and a written record of interview responses is kept by the organisation in the appropriate position vacancy file.
- 4.6 The most suitable candidate has been selected by the panel on the basis of merit and in accordance with the principles of Equal Employment Opportunity. If no candidate was found to be suitable, the position was re-advertised.
- 4.7 Two suitable referees of the recommended applicant have been contacted by the chairperson of the selection panel and a summary referees' report has been completed.
- 4.8 Police checks and Working with Children Checks have been undertaken in accordance with the organisation's Policy on Police Clearances / Criminal Records Checks.
- 4.9 A formal offer of appointment has been sent to the recommended candidate and a signed acceptance of appointment has been received from the recommended candidate.
- 4.10 All documentation related to the position has been collated and is stored in the staff selection file.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|--|------------------------------|
| Title | Induction of Staff and Volunteers | EDAC Policy No. 6.2 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to ensure that EDAC services are provided by employees and volunteers who are familiar with EDAC facilities, resources, and policies and procedures. This is to ensure the safety of clients, family members/carers, staff and volunteers, and the minimisation of risks. The policy will assist the organisation to meet its obligations under Standard 6 of the National Standards for Disability Services (2013) to practice sound management and maximise outcomes for clients and their families/carers.

2. Policy Statement: STAFF and VOLUNTEER INDUCTION

EDAC acknowledges the importance of thorough induction and orientation of staff and volunteers, along with training in their roles. Orientation and induction to EDAC facilities, resources, programs and policies and procedures will help enhance provision of a quality service and positive outcomes for all clients and their family members/ carers. The provision of information and support to new staff/ volunteers is also acknowledged as essential for the safety and confidence of clients and their family/carers as well as assisting in the retention of staff and volunteers.

3. PROCEDURES

EDAC will

- 3.1 Develop an induction training package listing all skills and information that new employees need to have prior to commencing their work at EDAC.
- 3.2 Develop a program of training to induct all new staff.
- 3.3 Provide a personal orientation and introduction to EDAC workplace and its staff to all newly employed staff.
- 3.4 Commence induction of new staff within the first week of their employment and track their progress in the induction program until its completion.
- 3.5 Induction will involve assisting new staff to become familiar with and /or be trained in:

- i. EDAC Mission and Values
 - ii. The policies and procedures of EDAC
 - iii. The whereabouts of first aid and emergency equipment
 - iv. Appropriate clothing and footwear for work
 - v. Safety, emergency and evacuation procedures
 - vi. A Copy of The National Standards for Disability Services
 - vii. Rules to observe whilst at EDAC;
 - viii. Any procedures that the staff member needs to perform in their work
 - ix. The list of Board members, staff, and their roles;
 - x. A checklist of all induction items
- 3.6 The new staff /volunteer is to sign off on each item on the Induction checklist once they are familiar with them, and the person conducting their induction will sign off once the induction is completed. Once this is done, a copy of the signed induction checklist will be kept in the staff member's / volunteer's personal file.
- 3.7 All new staff and volunteers must be aware that client/staff/volunteer details are confidential.
- 3.8 All staff and volunteers need to have a Police Clearance prior to commencement of work at EDAC. A working With children Check (WWCC) is required for any staff/volunteers assisting children under sixteen years of age.
- 3.9 New staff/volunteers should be made aware of any training opportunities and encouraged to attend training sessions offered by EDAC and other relevant organisations.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 New staff and volunteers have successfully completed the induction program with particular focus on safety procedures, prior to commencement of any unsupervised work.
- 4.2 New staff have been provided opportunities to do "buddy shifts" where applicable; to ensure their confidence and competence to undertake their work with EDAC.
- 4.3 All new staff and volunteers are aware of EDAC's safety procedures and equipment and actions they need to take in case of emergency or serious incident.
- 4.4 All new volunteers and staff are aware of their roles, responsibilities and Duty of Care.

- 4.5 All staff and volunteers are aware of Confidentiality of client/staff/volunteer details.
- 4.6 All staff/volunteers have had induction training on the National Standards for Disability Services including “Protection of Human Rights and Freedom from Abuse and Neglect”; a person-centred and outcomes focus, safeguarding and the Carers Charter as well as a refresher training session on these annually.
- 4.7 All new volunteers (including Management Committee / Board Members) and staff have a current Police Clearance.

5. REVIEW OF THE POLICY

Policies will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|--|------------------------------|
| Title | Board of Management Code of Conduct | EDAC Policy No. 6.3 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out a code of conduct to govern the decision and actions of EDAC's (Management Committee) Board of Management members with respect to their statutory and fiduciary duties as prescribed in the Associations Incorporation Act (1987), Equal Opportunity Act (1984), Disability Discrimination Act (1992), Sex Discrimination Act (1984), Racial Discrimination Act (1975), Human Rights and Equal Opportunity Commission Act (1986), Workplace Relations Act (1997), Minimum Conditions of Employment Act (1993), Occupational Health, Safety and Welfare Act (1984), Privacy Act (1988), Income Tax Assessment Act (1936) and its subsequent amendments, Sales Tax Exemption and Classifications Act (1992), The Disability Services Act (1993) and Standard 6 of the National Standards for Disability Services (2013). This policy applies to all EDAC Board Members from when they are elected to office.

2. POLICY STATEMENT – BOARD OF MANAGEMENT CODE OF CONDUCT

EDAC is committed to ensuring that Board Members act, at all times, in the best interests of the organisation and in accordance with their statutory and fiduciary duties.

3. PROCEDURES

The following procedures are to be implemented to ensure that EDAC Board Members act, at all times, in the best interests of the organisation and meet their statutory and fiduciary obligations.

EDAC Board Members will, at all times:

- 3.1 Ensure that EDAC conducts its affairs so as to promote the organisation's aims and objectives.
- 3.2 Understand their roles and responsibilities as a Board member.
- 3.3 Fulfil their responsibilities as Board Members by attending as many Board meetings as possible and tendering their apologies in advance if unable to attend any meeting.

- 3.4 Prepare themselves properly for Board meetings by pre-reading the minutes of the previous meeting, the agenda for the forthcoming meeting and any supporting documentation.
- 3.5 Satisfactorily complete any tasks allotted to them by EDAC Board within the agreed time-frame.
- 3.6 Act in good faith and in the best interests of EDAC.
- 3.7 Act as an ambassador for EDAC in their public and private dealings with other persons or organisations.
- 3.8 Observe the confidentiality guidelines established by the Board.
- 3.9 Act honestly in the exercise of their powers and the discharge of their duties.
- 3.10 Exercise reasonable care and diligence in the execution of their duties by keeping themselves informed about EDAC's activities and financial position.
- 3.11 Not make improper use of information gained through their position as a Board Member to gain, directly or indirectly, an advantage for themselves or any other person, or cause detriment to the organisation.
- 3.12 Not make improper use of their position as a Board Member to gain, directly or indirectly, an advantage for themselves or any other person, or cause detriment to the organisation.
- 3.13 Where they have personal interests that might give rise to conflicts of interests with their duties as Board Members, disclose the nature of those interests at the Board meeting and refrain from discussing, or voting on, the issue.
- 3.14 Ensure the keeping of such accounting records as correctly explain EDAC's transactions and financial position.
- 3.15 Not make or authorise a statement to the Ministry of Fair Trading, the Australian Taxation Office, EDAC's independent auditor or its funding body which, to their knowledge, is false or materially misleading.
- 3.16 Prevent EDAC from incurring a debt if there are reasonable grounds for suspecting that it is insolvent at the time the debt is incurred or would become insolvent by incurring the debt or a number of debts.

4. PERFORMANCE STANDARDS

- 4.1 The performance standards for compliance with this policy require that all procedures listed in Section 3 (above) are followed consistently by all EDAC Board Members.
- 4.2 All members of EDAC Board understand their role and governance duties and have read EDAC's policies and procedures.
- 4.3 All EDAC Board members act in accordance with relevant laws and regulations and work to ensure that the operations of EDAC comply with legal and regulatory requirements.
- 4.4 Duties of the Board, including having regular meetings to make decisions about the directions of EDAC services, and expenditure and investment of funds, as well as overseeing the production of annual audits of EDAC's finances are carried out.

5. REVIEW OF THE POLICY

Policies will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

Policy and Procedures

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|---------------|---|------------------------------|
| Title | Employee and Volunteer Code of Conduct | EDAC Policy No. 6.4 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out a code of conduct to govern the decision and actions of employees and volunteers in the course of their duties, having regard to Standard 6 of the National Standards for Disability Services (2013).

This policy applies to all EDAC's employees and volunteers.

2. POLICY STATEMENT – EMPLOYEE AND VOLUNTEER CODE OF CONDUCT

EDAC is committed to ensuring that its employees and volunteers behave in an acceptable manner in all their work-related dealings with clients, families/carers, other support workers, colleagues, other agencies and the general community. Such behaviour includes acting with

- Honesty,
- Integrity,
- Courtesy,
- Respect for people and property,
- Diligence,
- Duty of care,
- Cooperation
- Attention to safety, health and well-being of self and others, and
- Observance and compliance with the organisation's rules and regulations.

3. PROCEDURES

The following procedures are to be implemented to ensure that the organisation's employees and volunteers behave in an acceptable manner.

EDAC employees and volunteers will:

- 3.1 Acquaint themselves with the mission, principles, values and policies of EDAC and behave accordingly.
- 3.2 Fulfil their responsibilities as employees or volunteers in accordance with their respective duty statement and with due care and diligence.

- 3.3 Co-operate with management, colleagues and other agencies to promote and deliver quality services to clients and where relevant, their families/carers.
- 3.4 Understand and comply with the administrative and work practices EDAC and maintain records as required by the organisation.
- 3.5 Respect clients as valued persons with dignity, who are entitled to the same treatment and regard as other members of society.
- 3.6 Observe the freedom of expression, freedom from abuse or neglect and privacy and confidentiality rights of clients, and their families/carers.
- 3.7 Fully involve clients (and families/carers where appropriate) in decisions about their lives or how they live their lives.
- 3.8 Encourage clients, families/carers and advocates to raise issues or concerns and seek to resolve them in a non-threatening, non-defensive manner.
- 3.9 Apply high standards of personal conduct in their dealings with clients, families, advocates and other agencies.
- 3.10 Dress in a manner that is appropriate to the duties being undertaken and that will not cast clients or the organisation in a negative light or be offensive or uncomfortable to clients, their families or advocates, or colleagues.
- 3.11 Refrain from smoking or from taking or being under the influence of alcohol or illegal drugs whilst conducting their work.
- 3.12 Refrain from knowingly assisting clients to engage in illegal activities.
- 3.13 Not have sexual relationships with clients under any circumstances.
- 3.14 Not verbally, physically or emotionally abuse, threaten or harass clients, families, advocates, colleagues or members of the community.
- 3.15 Support clients to further develop and maintain relationships with their families/carers and other important personal links they have in the community.
- 3.16 Not make any public statements to the media without the prior approval of the executive officer.
- 3.17 Not make improper use of their position, or information gained through their position, as an employee or volunteer to gain, directly or indirectly, an advantage for themselves or any other person, or cause detriment to EDAC or its clients.

- 3.18 Where they have personal interests that might give rise to conflicts of interests with their duties as employees or volunteers, disclose the nature of those interests to management.

4. PERFORMANCE STANDARDS

- 4.1 The performance standards for compliance with this policy require that all procedures listed in Section 3 (above) are followed consistently by all EDAC staff and volunteers.
- 4.2 All EDAC staff and volunteers understand their roles and have been adequately inducted into EDAC.
- 4.3 Any grievances raised by clients, family members, advocates or staff are resolved in accordance with the relevant grievance procedure.
- 4.4 All clients, family members, carers staff and volunteers are treated with respect and with due attention to their rights.
- 4.5 Client service plans and records are up to date.
- 4.6 Confidentiality of information regarding clients and family/carers is appropriately observed.
- 4.7 Clients and family members/carers (where appropriate) are involved in decision-making about EDACs they receive.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

Policy and Procedures

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|---------------|---------------------------------|------------------------------|
| Title | Professional Development | EDAC Policy No. 6.5 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to ensure that EDAC services are provided by employees and volunteers who have relevant and up-to-date skills in providing supports to people with disabilities, and their families/carers where relevant. The policy will assist the organisation to meet its obligations under Standard 6 of the National Standards for Disability Services (2013) to practice sound management standards which maximise outcomes for clients and their families/carers.

2. POLICY STATEMENT –PROFESSIONAL DEVELOPMENT

EDAC is committed to ensuring that all employees are trained and resourced to be able to support clients to achieve good life outcomes. The policy aims to achieve this objective by linking training and development to supervision processes and performance-based appraisal, and by promoting sound working practices.

Staff, volunteers and board members of EDAC are, wherever possible, supported to identify areas for development and are able to avail themselves of opportunities for development in relevant areas. Such activities may include:

- i. Appropriate induction of all new staff, Board members and volunteers
- ii. Identification of specific employee training needs;
- iii. Provision of on-the job training by the relevant training supervisor, as needed
- iv. Identification of financial resources available and utilisation of these for employee training and development.
- v. Investigation and approval of specific training programs.
- vi. Identification and implementation of work-related improvements achieved from training.

3. PROCEDURES

The following procedures are to be implemented to ensure that EDAC meets its policy objective of ensuring that all employees are trained and resourced to support people with disabilities and their families/carers from CaLD backgrounds to achieve good life outcomes and to achieve the organisation's mission and objectives.

EDAC will:

- 3.1 Encourage all EDAC staff and volunteers to become familiar with EDAC policies and procedures.
- 3.2 Establish induction procedures for all organisation employees and volunteers and ensure that all employees and volunteers complete the induction training which includes training in organisational values, person centred practices, safety procedures and the National Standards for Disability Services.
- 3.3 Provide annual (refresher) training to all staff, volunteers and Board members on the National Standards for Disability Services, including Human Rights, Freedom from Abuse and Neglect ,Individual Planning and Outcomes, and Duty of Care.
- 3.4 Organise and implement regular basic training for all EDAC employees and volunteers in accordance with the Policy on Safety.
- 3.5 Make provision for staff training and development in the annual budget of the organisation.
- 3.6 Identify further training and development opportunities for individual employees through supervision and performance review.
- 3.7 Identify management training opportunities for senior staff of the organisation.
- 3.8 Encourage and utilise industry provided training programs wherever feasible.
- 3.9 Ensure that training opportunities are properly researched, costed against budget parameters and promptly approved.
- 3.10 Maintain an Employee Training and Development Record for all organisation employees which includes training goals, actual training undertaken and subsequent work gains.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All new employees have been given access to a copy of EDAC's Policy on Professional Development and a staff copy of the policy is kept in EDAC office.
- 4.2 New employees and volunteers have successfully completed the induction program with particular focus on human rights, personalised services and

safety procedures, prior to commencement of any unsupervised work, and are aware of the National Standards for Disability Services.

- 4.3 All staff are well trained and competent to undertake their work duties.
- 4.4 Areas in which staff require further training have been documented in their staff file and on their training and development plan.
- 4.5 All organisation employees have an up to date training and development plan and record.
- 4.6 Staff training and development activities have been reported to EDAC Board on a regular basis.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

Policy and Procedures

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|---------------|---|------------------------------|
| Title | Staff Supervision and Performance Management | EDAC Policy No. 6.6 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out specific procedures and performance standards to ensure that employees and volunteers of EDAC are properly supervised and their performance is regularly appraised. This policy is framed around Standard 6 of the National Standards for Disability Services (2013) and provides for the:

- Implementation of a performance based supervision system appropriate to the employee's duties and responsibilities.
- Documentation of the supervision process.
- Linkage of training and development goals to the supervision process.
- Linkage of performance appraisals to the supervision process and training and development goals.

For the purposes of this policy, unsatisfactory performance is defined as:

“An identified inability or unwillingness to utilise appropriate skills to carry out tasks associated with a particular position competently and in a manner which meets the reasonable expectations and values of EDAC, or consistently contravenes EDAC's policies and procedures.”

The policy has been framed around principles of natural justice and has been adapted from the Western Australian Public Service Commission's unsatisfactory performance management procedures.

This policy applies to all of the organisation's programs and activities.

2. POLICY STATEMENT - STAFF SUPERVISION AND PERFORMANCE MANAGEMENT

EDAC is committed to ensuring that all employees are properly supervised and their performance is regularly appraised. The policy aims to achieve this objective by implementing a formal supervision system linked to agreed training and development goals and an objective performance appraisal process.

When unsatisfactory staff performance occurs:

EDAC believes that the effective resolution of unsatisfactory performance is based on the following principles.

Resolution of unsatisfactory performance:

- Should be seen by the organisation and its employees as a tool for effective human resources management, rather than a punitive action.
- Must be based on timely and accurate identification of the nature and the cause of the problem.
- Will not proceed to a satisfactory conclusion until the employee recognises that there is a problem and is committed to making necessary improvements.
- Must be built on the principles of natural justice and current industrial practice which includes informing the employee of the exact nature of the unsatisfactory performance, providing the employee with opportunities to provide explanations or alternative views, making decisions that are unbiased and seen to be unbiased, and implementing fair and mutually agreed remedial actions.

3. PROCEDURES

The following procedures are to be implemented to ensure that the organisation meets its policy objective of ensuring that all employees are properly supervised and appraised.

The organisation will:

- 3.1 Establish formal supervision procedures for all organisation employees and volunteers.
- 3.2 Ensure that every employee and volunteer is allocated a supervisor and receives on-going supervision.
- 3.3 Provide all employees in supervisory roles with appropriate training, if deemed necessary.
- 3.4 Ensure that all employees and volunteers receive regular supervision in a manner and at a frequency that is appropriate to their tasks and responsibilities, whether informally or formally.
- 3.5 Require the supervisor to maintain notes of the content and outcomes of each employee's formal supervision session.
- 3.6 Complete an annual performance appraisal of all organisation employees.

- 3.7 Include in the annual performance appraisal a rating of the employee's performance against the duty statement, outcome of training and development activities, employee strengths and areas for improvement, and recommendations for further training and development, to be recorded in an Employee Training and Development Record.

The following procedures are to be implemented to ensure that the organisation meets its policy objective of managing unsatisfactory performance in a just and equitable manner.

EDAC will:

- 3.1 Recognise that the cause of the problem could be organisational (i.e. unclear duty statement or performance expectations, lack of needed skills or knowledge on the part of the employee, poor job design, counter-productive work environment or negative team environment).
- 3.2 Ensure that all staff are aware of the existence of the Policy on Managing Unsatisfactory Employee Performance and have access to a written copy of the policy.
- 3.3 Bring any perceived deficiencies to the employee's attention promptly and arrange a formal meeting to discuss the matter.
- 3.4 At the formal meeting, identify the actual nature of the unsatisfactory performance and specify any, preferably recorded, examples.
- 3.5 Elicit the employee's own views on the existence, nature and cause of any problem, with a view to coming to a mutual agreement that a problem does actually exist and needs to be remedied.
- 3.6 Jointly formulate a written action plan to resolve the unsatisfactory performance issue including in it the names of all parties involved in the construction of the action plan, its date of effect, specific areas of unsatisfactory performance, required standards of performance, time-lines for resolution, agreed actions and the names of those responsible for carrying out the actions.
- 3.7 During the period of remediation monitor the employee's work performance regularly and provide written feedback on progress towards achieving desired outcomes.
- 3.8 Undertake a formal re-assessment of the employee's performance at the end of the remediation period established in the action plan.
- 3.9 Provide the employee with a written copy of the re-assessment and invite the employee to provide a written response to both the process and the outcome.

- 3.10 If the unsatisfactory performance has not been resolved to the satisfaction of the organisation, consider the implementation of disciplinary procedures in accordance with the organisation's contract of employment with the employee.
- 3.11 Advise the employee of his or her rights to lodge a grievance in accordance with the Policy on Staff Grievances.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All new employees have been shown the organisation's Policy on Employee Supervision and Appraisal and where the staff copy of the policy is kept in the office.
- 4.2 All employees and volunteers have an identified supervisor.
- 4.3 Employees have received regular formal supervision.
- 4.4 Supervisors understand their role as a supervisor.
- 4.5 Written records of formal supervision sessions have been maintained in an appropriate file by the supervisor.
- 4.6 Employees have a written annual appraisal of their performance completed by their supervisor.
- 4.7 Any grievances have been addressed in accordance with the supervision and appraisal principles and procedures outlined in this policy and the Policy on Staff Grievances.
- 4.8 Employees have been made aware of any unsatisfactory performance, (individually) as soon as it has been identified as a problem.
- 4.9 A formal meeting has been held between the employee and the employee's supervisor within two weeks of the employee having been advised of the unsatisfactory performance and the content and outcomes of the meeting have been documented and provided to both parties.
- 4.10 The organisation has formulated a joint action plan with the employee to remediate the unsatisfactory performance and provided a written copy to the employee.

- 4.11 The action plan has a maximum limit of six months for remediation.
- 4.12 Monitoring meetings have been held at least monthly for the duration of the action plan and the content and outcomes of the meeting have been recorded and provided to both parties.
- 4.13 A formal re-assessment of the employee's performance has been undertaken at the end of the remediation period or sooner if both the employee and the supervisor agree.
- 4.14 The employee has been given the opportunity to provide a verbal or written response to both the process and the outcome.
- 4.15 In the event of the unsatisfactory performance not having been resolved to the satisfaction of the organisation, the organisation has implemented any disciplinary action deemed appropriate in accordance with the organisation's contract of employment with the employee.
- 4.16 The employee has been formally advised of his or her rights to lodge a grievance in accordance with the organisation's Policy on Staff and Volunteer Grievance Resolution.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|---|------------------------------|
| Title | Staff and Volunteer Grievance Resolution | EDAC Policy No.6.7 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to establish mechanisms for EDAC employees or volunteers and other unpaid persons involved in organisation business (e.g., work experience participants and students on practicum) to lodge a complaint or grievance. The policy has been framed around natural justice principles and individuals' rights as they are specified in the Equal Opportunity Act (1984), Disability Discrimination Act (1992), Sex Discrimination Act (1984), Racial Discrimination Act (1975), Human Rights and Equal Opportunity Commission Act (1986), Workplace Relations Act (1996), Minimum Conditions of Employment Act (1993), Occupational Health, Safety and Welfare Act (1984), Privacy Act (1988) and Standard 6 of the National Standards for Disability Services (2013). This policy applies to all EDAC programs and activities.

2. POLICY STATEMENT – STAFF AND VOLUNTEERS GRIEVANCE RESOLUTION

- EDAC is committed to ensuring that all staff of the organisation are free to lodge grievances regarding their employment, relations with other staff/volunteers, or their work tasks and conditions.
- Staff and volunteers are entitled to have those grievances dealt with promptly, fairly and non-threateningly by the organisation and to have those grievances resolved in a satisfactory manner if possible.
- EDAC employees' rights to privacy and confidentiality are recognised, respected and protected.
- EDAC employees have the right to see any information the association has recorded or keeps in respect of him or her.

Note: Hereinafter, complaints and disputes will be referred to as a "grievance".

3. PROCEDURES

The following procedures are to be implemented to ensure that the organisation meets its policy objective of ensuring that all staff are free to lodge and have resolved any complaints or grievances about the organisation, its consumers, its staff or its operations.

EDAC will:

- 3.1 Have appropriate policies and procedures on the lodgement and resolution of employee grievances.
- 3.2 Ensure that all organisation employees and volunteers are aware of their right to lodge a grievance and to have that grievance heard.
- 3.3 Ensure that the hearing of any grievance occurs within five working days of the grievance being lodged and that the hearing conforms with the principles of natural justice.
- 3.4 Encourage staff and volunteers to, in the first instance, resolve any issues with the person with whom they have a grievance, before taking the matter to a supervisor, Board member or external body.
- 3.5 Ensure that any formal grievance and the organisation's response to the grievance are fully documented.
- 3.6 Reassure staff that lodging a grievance will not prejudice them with respect to ongoing employment or career opportunities.
- 3.7 Ensure that the CEO is informed of any grievances that are lodged, the actions taken by the organisation in resolving those grievances and the final outcome.
- 3.8 Implement appropriate appeal mechanisms at both service management and management committee level.
- 3.9 Records of grievances subsequently resolved shall be destroyed not earlier than six (6) months after resolution.
- 3.10 Methods for lodging a grievance are the choice of the complainant, and are as follows:
 - Discuss the problem with the person concerned, then a supervising staff member, then the Chief Executive Officer; or address the grievance in writing to the service CEO as "In-Confidence" correspondence;
- 3.11 The person to whom the complaint is reported will work to help resolve the issue, and document actions taken and the resolution in the employee's file.
- 3.12 If the matter is still not resolved the matter should be managed by the Chief Executive Officer.
- 3.13 If resolution by the Chief Executive Officer cannot be achieved, or is not appropriate, then the person has the right to take the matter to EDAC Board, and if still not resolved, then the Equal Opportunity Commission for resolution.
- 3.14 Any complaint concerning unlawful behaviour or sexual harassment which has not been resolved to the satisfaction of the complainant after due consideration by the

Chief Executive Officer and/or the Board, shall be referred to the Police and/or appropriate legal authority by EDAC Chief Executive Officer.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All new employees and volunteers have been provided with a copy of the organisation's Policy on Staff Grievances and a staff copy of the policy is kept in each service outlet.
- 4.2 Employees and volunteers have been encouraged to first discuss the matter with the involved party prior to lodging a formal grievance.
- 4.3 If the matter is not resolved, staff and volunteers have had the opportunity to meet formally with their immediate supervisor within five working days and complete a Grievance Report.
- 4.4 If the matter has not been resolved at supervisor level, staff members/volunteers have had the opportunity, within five further working days or agreed time frame, to meet with the Chief Executive Officer who has reviewed the Grievance Report and action taken to date prior to attempting to resolve the grievance.
- 4.5 If the matter has not been resolved at CEO level, the Grievance Report has been tabled at the next meeting of the Board and the CEO has provided a full briefing on the source and nature of the grievance and actions taken by the organisation to resolve the complaint.
- 4.7 All formal grievances have been recorded on Grievance Reports, which have been collated and reported to the Board in a timely manner.

5. REVIEW OF THE POLICY

Policies will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|------------------------------|------------------------------|
| Title | Conflict of Interests | EDAC Policy No. 6.8. |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out a guide for the declaration and management of conflicts of interests which are held by EDAC staff and Board members.

This policy applies to all EDAC staff and Board Members from the moment they are appointed.

2. POLICY STATEMENT – CONFLICT OF INTERESTS

EDAC places great importance on the declaration and proper management of any existing or potential conflict of interests for its members. All such conflicts of interests shall be declared and the staff or Board member will absent themselves from any decision-making, voting or acting on the activities in which they have conflicted interests.

Examples of conflicts of interest are:

- When a staff member is asked to advocate for, or on behalf of a person with whom they have conflicting personal or financial interests or biases; or who is a family member.
- When a board member, or his/her immediate family or business interests, stands to gain financially from any business dealings, programs or services of the organisation.
- When a board member him or herself offers a professional service to the organisation.
- When a board member stands to gain personally or professionally from any insider knowledge if that knowledge is used to his or her personal or professional advantage.

3. PROCEDURES

- 3.1 Any business or personal matter which is, or could be a conflict of interests involving the individual and his/her role and relationship with EDAC, must be declared and registered in the EDAC Conflict of Interests Register.
- 3.2 All such entries in the Register shall be presented to the board and minuted at the first board meeting following entry in the register.
- 3.3 Where a conflict of interests is identified and/or registered, the staff member will not act on behalf of that person; or board member concerned shall not

vote on that issue. The individual with the conflict shall either refrain from participation or leave the meeting room.

- 3.4 When the EDAC CEO or Chairperson is aware of a real or potential conflict of interests involving one or more staff/board members, the CEO / Chairperson must take whatever steps are necessary to ensure that the conflict is managed in an appropriate manner according to this policy.

4. PERFORMANCE STANDARDS

- 4.1 Any conflict of interests held by any staff or Board member has been declared and registered in the EDAC Conflict of Interests Register.
- 4.2 Registered conflicts are presented at the following EDAC Board meeting.
- 4.3 EDAC staff or Board members who have a conflict of interests have no authority over, and do not vote, act or advocate for matters pertaining to those interests.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

Policy and Procedures

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|---------------|--------------------------------------|------------------------------|
| Title | Policy Development and Review | EDAC Policy No. 6.9. |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to establish standards of practice for the development and review of the policies and procedures of EDAC. The policy has been framed around good practice for all agencies providing services to the public, having regard to Standard 6 of the National Standards for Disability Services (2013) and requirements for incorporated not-for-profit organisations.

2. POLICY STATEMENT – POLICY DEVELOPMENT AND REVIEW

EDAC will develop policies and procedures, in consultation with its stakeholders, including clients, their family members and advocates, to guide the efficiency and integrity of its operations.

3. PROCEDURES

- 3.1 EDAC will, in consultation with its clients, family members, advocates, and staff, develop policies and procedures which will guide EDAC operations, ensure its compliance with relevant funding bodies and legal requirements, and which are in accord with the organisation's mission, values and objectives.
- 3.2 All drafts of policies and procedures will be presented to EDAC Board for review, amendment and ratification.
- 3.3 Policies will be reviewed and amended at least every two years, or as developments in EDAC operations necessitate it.

4. PERFORMANCE STANDARDS

- 4.1 EDAC has a set of relevant, user-friendly policies and procedures which guide and direct its operations.
- 4.2 Policies have been developed in consultation with clients and/or their family members/carers, as well as Board members and any other relevant stakeholders.
- 4.3 EDAC policies comply with relevant laws and regulations.

4.4 EDAC policies and procedures reflect the organisation's mission, values and objectives and contemporary practices in disability services.

4.5 EDAC policies have been reviewed every two years.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|--------------------------|------------------------------|
| Title | Equal Opportunity | EDAC Policy No.6.10. |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to specify procedures and performance standards to ensure that staff selection and promotion practices within the organisation are based solely on merit and are not negatively influenced by factors such as disability, ethnicity, gender, age, religious belief or political affiliations and that the culture of the organisation is one of equal opportunity, fairness and respect. The policy has been framed around equal opportunity principles as they are specified in the Equal Opportunity Act (1984), Disability Discrimination Act (1992), Sex Discrimination Act (1984), Racial Discrimination Act (1975), Human Rights and Equal Opportunity Commission Act (1986) and Standard 8 of the Disability Services Standards (1993).

2. POLICY STATEMENT – EQUAL OPPORTUNITY

EDAC is committed to ensuring that prospective and current staff are not discriminated against on the grounds of disability, ethnicity, gender, age, religious belief or political affiliations and that equal opportunity principles are enshrined in all staff recruitment, selection and promotion practices and within the culture of the organisation.

3. PROCEDURES

The following procedures are to be implemented to ensure that the organisation meets its policy objective of operating a discrimination free workplace that promotes equal opportunity principles.

EDAC will:

- 3.1 Ensure that all staff are aware of the existence of this Policy on Equal Opportunity and have access to it.
- 3.2 Ensure that where practicable, offices owned or leased by the organisation are physically accessible.
- 3.3 Recruit new employees on ability and merit and on a fair and open basis rather than on assumptions on different characteristics such as race, sex, marital status, disability, age, religion, political beliefs or any other grounds covered by equal opportunity legislation.

- 3.4 Look for opportunities to fill vacancies within the organisation with people who have disabilities.
- 3.5 Undertake any reasonable workplace modifications or provide any necessary equipment.
- 3.6 Aim to provide a working environment which maximises the potential and contribution of all employees and ensures equal opportunity for all.
- 3.7 Promote a working environment free from sexual, racial or any other form of harassment and free from discrimination.
- 3.8 Promptly investigate, remedy and document any organisation employee grievance regarding equal opportunity. If proven, remedial action will be taken against the offending employee.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All new employees have been shown the organisation's Policy on Equal Employment Opportunity and where the staff copy of the policy is kept in the office.
- 4.2 Where practicable, premises owned or leased by the organisation are physically accessible, including shower and toilet areas.
- 4.3 Employee recruitment and selection is undertaken in accordance with the organisation's Policy on Employee Recruitment and Selection.
- 4.4 The workplace is modified and equipment provided where required.
- 4.5 Employees with specific needs are provided with a suitably qualified person, internal or external to the organisation, to assist the employee to perform his or her job to the organisation's expectations.
- 4.6 Any grievances that are lodged are addressed in accordance with the equal employment opportunity principles outlined in this policy and the Policy on Employee Grievances.
- 4.7 All employees are made aware of the contents of this Policy on Equal Opportunity.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

Policy and Procedures

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|---------------|---|------------------------------|
| Title | Use of Private Vehicles for Work | EDAC Policy No.6.11. |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out specific procedures in relation to the use of private motor vehicles for work related purposes. The organisation may require an employee or volunteer to use his or her own vehicle within the ordinary course of employment.

This policy applies to all of the organisation's programs and activities

2. POLICY STATEMENT – USE OF PRIVATE VEHICLES FOR WORK

EDAC is committed to ensuring that, wherever a private vehicle is used for work related purposes, the occupants (employee, volunteer and/or organisation's consumers) are adequately protected from injury and properly insured.

3. PROCEDURES

The following procedures are to be implemented to ensure that EDAC meets its policy objective of protecting and insuring occupants in private vehicles during work related travel.

- 3.1 The driver of the private vehicle must hold a current Western Australian motor vehicle drivers' licence of the correct class for the vehicle being driven and the number of passengers being transported.
- 3.2 Private motor vehicles that are to be used for work related travel must be comprehensively insured.
- 3.3 Private motor vehicles that are to be used for work related travel must be maintained in roadworthy condition.
- 3.4 Employees and volunteers, who are required to use their own vehicles for work related purposes, will be paid a motor vehicle allowance.
- 3.5 The motor vehicle allowance will be based on the allowances prescribed for employees.

- 3.6 EDAC will take out and maintain contingent motor vehicle insurance to cover the employees' and volunteers' private vehicles and its occupants in the event of an accident during work related travel.
- 3.7 The driver of the private vehicle is responsible for paying all traffic and parking fines incurred in the course of work related travel.
- 3.8 Drivers must not drive a private vehicle on work related business if their blood alcohol level is above the relevant legal limits, they are under the influence of illegal drugs or they are taking medication that cautions against driving.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|---|------------------------------|
| Title | Supervision of Students and Volunteers | EDAC Policy No. 6.12 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to ensure volunteers and students are appropriately supervised when working at EDAC, and that students who attend EDAC on practicum or work experience receive optimal opportunities for developing work related skills and knowledge whilst on placement at EDAC.

2. POLICY STATEMENT – SUPERVISION OF STUDENTS AND VOLUNTEERS

EDAC is proud of its community role in developing the skills of volunteers and students. EDAC is committed to ensuring that all volunteers and students on work experience at EDAC are supervised at all times, and that they receive appropriate induction into safety and work related procedures.

3. PROCEDURES

The following procedures are to be implemented to ensure that EDAC meets its policy objective of ensuring that all volunteers and students are trained and supervised in accordance with the organisation's mission and objectives.

EDAC will:

- 3.1 Ensure that EDAC Board are aware of any planned or current work placements being offered or provided to volunteers or students.
- 3.2 Encourage all volunteers and work experience students to become familiar with EDAC policies and procedures.
- 3.3 Establish and implement induction procedures for all volunteers and work experience students.
- 3.4 Organise necessary basic training for all work experience students in accordance with the Policies on Safety and Code of Conduct.

- 3.5 Make provision for consistent supervision of volunteers and work experience students while they are on placement at EDAC.
- 3.6 Utilise accredited industry training programs wherever feasible.
- 3.7 Maintain a Work Experience Record for all students as required by their school/college.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All volunteers and students on placement at EDAC have been given access to a copy of EDAC's Policy and Procedure Manual.
- 4.2 Volunteers and students have successfully completed the induction program with particular focus on safety procedures, prior to commencement of work experience activities.
- 4.3 Volunteers and students are supervised at all times, and supervisors record the work experience of each student on placement.
- 4.4 Planned work experience placements for students are reported at EDAC Board meetings.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|--------------------------------|------------------------------|
| Title | Use of Electronic Media | EDAC Policy No. 6.13 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to outline the rules and boundaries of use of electronic media by staff and volunteers at EDAC.

2. Policy Statement: USE OF ELECTRONIC MEDIA

EDAC provides computers and other electronic media for use by staff and volunteers to undertake the work of the organisation, to advance its core business and to enhance its profile in the community. Computers and phones are available for staff and volunteers to seek information and resources to help with their work, communicate with relevant parties, and to respond to opportunities. Electronic media are not to be used for inappropriate activities such as those of a sexual or criminal nature.

3. PROCEDURES

The following procedures are to be implemented to enable EDAC to meet its policy objective of ensuring that computers are used for the benefit of EDAC clients and its work. EDAC staff and volunteers will:

- 3.1 Make computers available to staff and volunteers for their use in EDAC work.
- 3.2 Use computers to communicate with stakeholders, such as clients, service agencies, suppliers and sponsors.
- 3.3 Respond to email and phone communications as soon as is practicable.
- 3.4 Use auto-reply systems where applicable.
- 3.5 Use courteous and respectful language when using electronic media.

3.6 Employ disciplinary procedures if a staff or volunteer is found to be using EDAC computers, phones or social media inappropriately; i.e. use verbal and written warnings and then cessation of employment if inappropriate use of the computers persists. Such disciplinary action will be at the discretion of the Chief Executive Officer; and in line with the staff grievance policy and procedures.

4. PERFORMANCE STANDARDS

The performance standards are met when the procedures specified in Section 3 are implemented effectively.

4.1 Staff and volunteers of EDAC use electronic media for the work in advancing the well-being and good life outcomes of clients and their families/carers.

4.2 Any staff found to be using electronic media for inappropriate purposes or uses which are harmful in any way to other people will be disciplined accordingly.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy shall be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|---|------------------------------|
| Title | Police Clearances and Working with Children Checks | EDAC Policy No. 6.14 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to safeguard EDAC and its clients against appointing Board members, recruiting staff or volunteers and contractors who have been convicted of criminal offences that may present increased risks to the organisation and its clients. The risk includes possible fraud, the misappropriation of funds or recruiting of unsuitable people to provide services to adults and children with disabilities. The policy recognises EDAC's legal and moral duty of care obligations under the National Standards for Disability Services and the *Working with Children (Criminal Record Checking) Act 2004*.

This policy applies to all of EDAC's programs and activities.

2. POLICY STATEMENT – POLICE CLEARANCES

EDAC requires that all staff, Board members, volunteers and contractors receive satisfactory police clearance prior to commencement of duties. This will include a National Police Clearance Certificate. All advocates will require a National Police Clearance Certificate and a 'Working with Children Card'. If the staff, Board member, volunteer or contractor has resided overseas, a criminal records check from the relevant jurisdiction(s) will also be required. Criminal records checks will be updated every four years for the duration of the person's involvement with the organisation and the working with children checks will be renewed before the expiry date. Finance and Office Manager will notify staff at least 4 weeks prior to expiry.

3. PROCEDURES

The following procedures are to be implemented to ensure that staff, Board members, volunteers and contractors have appropriate criminal records checks prior to undertaking any duties for EDAC.

EDAC will:

- 3.1 Require potential Board members to obtain a satisfactory criminal records check prior to appointment to the Board.

- 3.2 Inform all prospective staff and volunteers that they will be required to provide a criminal records check (National Police Clearance) prior to commencing duties at EDAC.
- 3.3 Require short-listed applicants (staff or volunteers) to provide documentary proof of identity, when attending the selection interview.
- 3.4 Require the recommended applicants (staff or volunteers) to obtain a satisfactory Police Clearance Certificate and Working with Children Card (where applicable) prior to commencing duties at EDAC.
- 3.5 If any recorded criminal convictions are identified, refer the matter to EDAC Board of Management for a determination as to whether the specified conviction would be likely to place the clients of the organisation at any risk or breach EDAC's duty of care obligations.
- 3.6 Base its determination on whether the conviction has been for an offence which directly relates to the duties, whether the position being sought would offer unsupervised opportunities for a similar offence to take place, whether the offence has occurred recently, whether there are single or multiple convictions and whether the conviction(s) reflect generally on the suitability of the person to become an employee or volunteer with the organisation.
- 3.7 Require all contractors doing work for the organisation and likely to have contact with its clients to satisfy the organisation that criminal records checks have been obtained.
- 3.8 Update all criminal records checks every four years for all staff, Board members, volunteers and contractors.

NOTE - Staff who come from other agencies who have provided a police clearance to that agency.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All prospective staff, Board members, volunteers and contractors have been informed of the requirement to provide a satisfactory criminal records check.
- 4.2 Applicants (staff and volunteers) have provided proof of identity at the interview and the nature of those documents are recorded in the interview notes.
- 4.3 All recommended staff, Board members, volunteers and contractors have satisfactory criminal records checks and Working with children checks for those who will work with people under the age of 16 years, and copies have been stored on their personal files.

- 4.4 In the event of any criminal convictions having been recorded against the person, the Board has made a formal determination about the person's suitability as a staff member, Board member or volunteer and a copy of the determination has been appropriately filed.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|---------------------------------------|------------------------------|
| Title | Occupational Safety and Health | EDAC Policy No. 6.15 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out specific procedures and performance standards to maximise the health and safety of EDAC's staff, volunteers and other persons involved in organisation business. The policy has been framed around the Occupational Safety and Health Act (1984), the Workers' Compensation and Rehabilitation Act (1994), and Standard 6 of the National Standards for Disability services (2013).

This policy provides for the:

- Maintenance of a safe working environment for EDAC staff and volunteers, and for people who visit EDAC premises.
- Identification of potential risks and hazards to which employees may be exposed in the course of their duties.
- Implementation of appropriate procedures and measures to minimise work related accidents, injuries or illness.
- Development and delivery of training programs to educate employees regarding good occupational health and safety practices, if necessary.
- Investigation and documentation of work-related accidents or lost hours with a view to future risk minimisation.

This policy applies to all of the organisation's programs and activities.

2. POLICY STATEMENT – OCCUPATIONAL SAFETY AND HEALTH

EDAC is committed to ensuring that all employees are properly informed and adequately protected so as to minimise the risk of illness, accident or injury at work by promoting good occupational safety and health practices, which are consistent with legislative requirements.

3. PROCEDURES

The following procedures are to be implemented to ensure that EDAC meets its policy objective of ensuring that all employees are properly informed and adequately protected so as to minimise the risk of illness, accident or injury at work.

EDAC will:

- 3.1 Take all reasonable steps to assess the safety and security of EDAC buildings and services and plan for the provision of safety equipment and structures/supports where necessary.
- 3.2 Install and maintain appropriate fire detection and safety equipment at the service.
- 3.3 Provide all organisation employees with appropriate information about, and training in relevant occupational health and safety standards and practices.
- 3.4 Insure all organisation employees, volunteers, other persons involved in organisation business and Board members, both at work and travelling to and from work.
- 3.5 Ensure proper documentation of all work related accidents, injuries and illnesses.
- 3.6 All incidents and hazards will be reported at staff meetings then written into the "Incidents/Hazards Register" .
- 3.7 Investigate all work related accidents, injuries and illnesses and take appropriate action to minimise future occurrences.
- 3.8 In the event of injury or illness, implement a rehabilitation plan to assist the employee to return to work as soon as practicable.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

- 4.1 All employees have been shown the organisation's Policy on Occupational Safety and Health and where the staff copy of the policy is kept in the office.

- 4.2 All organisation employees have attended and successfully completed organisation approved training courses in occupational health and safety (where appropriate to their duties).
- 4.3 All organisation volunteers have attended and successfully completed organisation approved training courses (where appropriate to their duties).
- 4.4 The organisation has workers' compensation insurance for all employees.
- 4.5 The organisation has personal accident insurance for all volunteers, other persons involved in organisation business and Board members.
- 4.6 All work related accidents, injuries and illnesses, and any resultant rehabilitation plans, have been recorded on an Incident/Accident Report Form, which has been collated and reported to the Board.
- 4.7 Any grievances that have been lodged have been addressed in accordance with the occupational health and safety principles outlined in this policy and the Policy on Staff Grievances.
- 4.8 All employees and volunteers have been made aware of the contents of the Policy on Occupational Safety and Health.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|-----------------------------|------------------------------|
| Title | Emergency Procedures | EDAC Policy No. 6.16 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out specific procedures and performance standards to maximise the safety of all people involved in EDAC services in the event of an emergency. The policy has been framed around the Occupational Health, Safety and Welfare Act (1984) and Standard 6 of National Standards for Disability Services (2013). This policy applies to all of EDAC's programs and activities.

This policy provides for the:

- Development and implementation of emergency and evacuation procedures.
- Development and delivery of specific training for employees regarding emergency procedures.
- Investigation and documentation of emergencies at EDAC.

2. POLICY STATEMENT – EMERGENCY PROCEDURES

EDAC is committed to ensuring that all people in EDAC can be evacuated quickly and that EDAC personnel act appropriately if an emergency occurs, to protect all clients, employees and volunteers of EDAC.

3. PROCEDURES

Definition: Emergencies may include fire, chemical spill, exposure to hazardous substances, bomb threat, or other threat or incident which poses risk of injury, illness or death to people or animals on EDAC premises.

EDAC will:

- 3.1 Provide all EDAC staff and volunteers with regular and appropriate training in relevant evacuation and emergency procedures.
- 3.2 Ensure that all staff and volunteers are familiar with EDAC Emergency Management Plan and the assembly areas in case of emergency.
- 3.3 Ensure that relevant staff at EDAC hold current First Aid Certificates.

3.4 Carry out regular (at least every six months) evacuation trials and document their outcomes.

3.5 Regularly review and if necessary revise its Emergency Management Plan, in response to changes in numbers of staff, volunteers, students and clients using EDAC premises, equipment and hazardous materials on the premises, and any other changes in EDAC facilities and services which impact on risks and procedures in relation to potential emergencies at EDAC.

3.6 Provide and maintain appropriate levels of emergency equipment at EDAC such as fire extinguishers, fire blankets and availability of water.

3.7 Following an emergency, write a report on the incident and the outcomes, and any recommendations for improvements in emergency and evacuation procedures.

3.8 Present reports of emergency incidents and evacuation trials with recommendations for improvements in procedures to EDAC Board of Management.

4. PERFORMANCE STANDARDS

The following performance standards must be met to ensure that the procedures specified in Section 3 are implemented effectively:

4.1 EDAC has an appropriate emergency management plan.

4.2 All EDAC staff are aware of, and can execute EDAC emergency and evacuation procedures.

4.3 Regular evacuation trials have been carried out and reports on each trial kept in EDAC Emergency Procedures file.

4.4 EDAC has appropriate levels of emergency equipment and such equipment is checked annually.

4.5 Relevant EDAC staff hold a current First Aid Certificate.

4.6 There are records of any emergencies which have occurred.

4.7 Recommended improvements in emergency and evacuation procedures have been documented in the Emergency Management Plan and relevant training or equipment for new procedures have been implemented within three months of a previous emergency or evacuation trial, where required.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|--------------------------|------------------------------|
| Title | No Smoking Policy | EDAC Policy No. 6.17 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out specific procedures and standards to maximise the health of EDAC's staff, volunteers and clients by providing a smoke-free environment and minimising health risks to people who enter EDAC premises. This policy also complies with the state Health Department regulation, which states *"From 1st January 2008, smoking will not be permitted on all Department of Health (DOH) premises and grounds throughout Western Australia. This policy will apply to all staff, patients, visitors, contractors and other persons who enter DOH owned or leased buildings, grounds or vehicles for any purpose whatsoever"*.

2. POLICY STATEMENT – NO SMOKING POLICY

EDAC has a "No Smoking" policy and does not allow people to smoke whilst they are on the premises. Smoking is also a fire hazard at EDAC.

3. PROCEDURES

The following procedures are to be implemented to enable EDAC to meet its policy objective of ensuring that no one smokes whilst on EDAC premises:

- i) EDAC will inform all personnel entering the premises that EDAC is a "smoke-free" environment.
- ii) EDAC will put up "No Smoking" signs in several places on EDAC premises.
- iii) If someone begins smoking, a staff member will alert the person to the "no smoking" policy and ask the person to refrain from smoking and/or inform them of where they can smoke, off the premises..

4. PERFORMANCE STANDARDS

4.1 All staff, clients and visitors to EDAC are made aware of EDAC "No smoking" policy'.

4.2 No one smokes whilst on EDAC premises.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

Policy and Procedures

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|---------------|-----------------------------------|------------------------------|
| Title | Accounting and Expenditure | EDAC Policy No. 6.18 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out specific procedures and performance standards in relation to expenditure of revenue and grant funds held by EDAC.

2. POLICY STATEMENT – ACCOUNTING AND EXPENDITURE

EDAC Board of Management is committed to ensuring that the organisation has proper expenditure controls in place and that expenditure by employees without prior authorisation is limited and specified. EDAC will also implement appropriate regular recording and accounting of income and expenditure as well as an annual financial audit.

3. PROCEDURES

The following procedures are to be implemented to ensure that EDAC meets its policy objective of managing and expending its funds:

- 3.1 EDAC Board produces an annual budget for its income and expenditure which provides for adequate resourcing of its services and maximum financial support of its core business activities.
- 3.2 EDAC Board is responsible for ensuring that EDAC remains financially viable, that is, that it is able to pay its expenses as and when they fall due.
- 3.3 All expenditure will be for the purposes of carrying out the core business of EDAC and related to the benefit of EDAC clients and their families/carers.
- 3.4 All formal legal contracts must approved by the Board of Management by way of formal resolution.
- 3.5 The Common Seal is to be affixed to formal legal contracts by the Board at its discretion or where required by the other party to the contract. If the Common Seal is affixed, it must be countersigned by two members of EDAC Board.
- 3.6 The Chief Executive Officer will be authorised by the Board to approve expenditure of a certain amount, without having to obtain Board approval each time, to allow efficient running of EDAC; provided the purchase is within approved budget parameters.

- 3.7 All expenditure over the designated amount (e.g. \$2000) is to be approved by the Board.
- 3.8 All EDAC payments will be appropriately authorised as designated by the Board of Management.
- 3.9 All EDAC expenses will be categorised for the purposes of accounting, e.g. salaries/wages, communications, office equipment, service equipment, transport/vehicles, stationery, electricity and gas.
- 3.10 Bank statements, income and expenditure reports and budgets are tabled and ratified at EDAC Board meetings.
- 3.11 An annual report of EDAC's income and expenditure and any extraordinary financial items will be presented at each EDAC Annual General Meeting.
- 3.12 EDAC income and expenditure and accounts will be audited by an external auditor annually and his/her report provided to EDAC Annual General Meeting.

4. PERFORMANCE STANDARDS

4.1 All EDAC financial transactions have been made and accounted for in accordance with the procedures prescribed above in Section 3.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|--------------------------------|------------------------------|
| Title | Use of EDAC Credit Card | EDAC Policy No. 6.19 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE -

The purpose of this policy is to set out specific procedures and performance standards in relation to use of Credit Card facilities for purchases associated with EDAC.

2. POLICY STATEMENT – USE OF EDAC CREDIT CARD

EDAC Board of Management is committed to ensuring that the organisation has proper expenditure controls in place and that expenditure by employees or other personnel without prior authorisation is limited and specified.

The credit card may only be used by people authorised to do so.

All expenditure using the credit card must be only for legitimate and specified uses for the running of EDAC services in accordance with its annual budget and within specified limits. All expenditure should be for the purposes of carrying out the core business of EDAC and related to the benefit of EDAC clients and their families/carers.

3. PROCEDURES

The following procedures are to be implemented to ensure that EDAC meets its policy objective of managing and accounting for the use of EDAC credit card:

3.1 The credit card may only be used as authorised by EDAC management.

3.2 Any person using the credit card may purchase only those items which will be used exclusively for the purposes of the running of EDAC services in accordance with the current budget, unless otherwise authorised.

3.3 People using the credit card must present all receipts to EDAC management appointed for checking and/or authorising expenditure.

4. PERFORMANCE STANDARDS

4.1 All EDAC financial transactions have been made and accounted for in accordance with the procedures prescribed above in Section 3.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer

appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|--------------------------------|------------------------------|
| Title | Insurance and Indemnity | EDAC Policy No. 6.20 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out specific procedures and performance standards in relation to insurance and indemnity of EDAC assets and personnel.

This policy applies to all of EDAC's programs and activities.

2. POLICY STATEMENT – INSURANCE AND INDEMNITY

EDAC is committed to ensuring that the organisation's assets, management committee members, employees, volunteers, and other unpaid persons involved in organisation business (e.g., work experience participants and students on practicum) are appropriately insured and indemnified.

3. PROCEDURES

The following procedures are to be implemented to ensure that the organisation meets its policy objective of properly insuring and indemnifying all of its operatives.

EDAC will take up and maintain the following:

- 3.1 Directors and officers liability insurance for EDAC Board members.
- 3.2 Professional indemnity for all staff and volunteers overseeing EDAC activities.
- 3.3 Appropriate public and product liability insurance.
- 3.4 Workers compensation insurance for employees.
- 3.5 Personal accident insurance for Board members, volunteers and other unpaid persons, as applicable.
- 3.6 Comprehensive motor vehicle insurance for all organisation vehicles.

- 3.7 Contingent motor vehicle insurance to cover the employees' and volunteers' private vehicles and its occupants in the event of an accident during work related travel.
- 3.8 Building and contents insurance.
- 3.9 Electrical equipment protection insurance.

4. PERFORMANCE STANDARDS

4.1 EDAC holds current relevant insurances in accordance with the above procedures.

5. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|--------------------|------------------------------|
| Title | Study Leave | EDAC Policy No. 6.21 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out specific procedures in relation to permission for employees to take paid study leave.

2. POLICY STATEMENT – STUDY LEAVE

The organisation is committed to supporting employees in their quest for on-going and further education and professional development.

3. PROCEDURES

The following procedures are to be implemented to ensure that the organisation meets its policy objective of supporting employees in their quest for on-going and further education and professional development.

- 3.9 An employee may be granted time off with pay for study purposes at the discretion of the Chief Executive Officer.
- 3.10 Part time staff are entitled to time off with pay for study purposes on the same basis as full time staff, pro rata.
- 3.11 Time off with pay for study purposes may be granted to a maximum of 4 hours per week including travel time, where subjects studied are available during normal working hours.
- 3.12 In every case, the approval for time off with pay for study purposes is subject to:
 - i. organisation convenience;
 - ii. the course being undertaken on a part-time basis;
 - iii. the employee undertaking an acceptable formal study load in their own time;
 - iv. the employee making satisfactory progress with their studies; and
 - v. the course being of value to the organisation.

4. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no

longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly.

EDAC (Inc.)

Policy and Procedures

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|---------------|-------------------------|------------------------------|
| Title | Time Off In Lieu | EDAC Policy No. 6.22 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out specific parameters and procedures in relation to the accrual and taking of time off in lieu. This policy applies to all EDAC's staff.

2. POLICY STATEMENT - TIME OFF IN LIEU

The organisation is committed to ensuring that the organisation works viably. It acknowledges staff occasionally will be required to undertake work beyond their paid hours. Time off in lieu is an entitlement. However, the accrual and use of time off in lieu must be done in a manner which is both in the best interest of the staff and the organisation.

3. PROCEDURES

3.1 The maximum time off in lieu (TOIL) which can be accrued is the hours worked in two weeks by an employee. e.g:

Employee 1 works 20 hours every two weeks. Maximum TOIL is 20 hours.
Employee 2 works 40 hours every two weeks. Maximum TOIL is 40 hours.

3.2 As a result of urgent and unavoidable work, an employee may accrue TOIL beyond the two week maximum, with the approval of the CEO.

3.3 TOIL must be utilised within 12 months from the original date of entitlement, or alternative arrangements agreed to between the CEO and the employee.

3.4 An employee may not take more than two weeks TOIL in a row, unless otherwise approved by the CEO.

3.5 TOIL shall be at the ordinary time rate, that is one hour for each hour worked, and at a time agreed between the authorised officer and the employee.

3.6 This policy does not apply retrospectively. Employees are entitled to TOIL accrued prior to the date of this policy (June 2006). Use of this TOIL is to be negotiated between CEO and the employee.

4. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly

EDAC (Inc.)

Policy and Procedures

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|---------------|---------------------|------------------------------|
| Title | Annual Leave | EDAC Policy No. 6.23 |
| Date Adopted: | 22 April 2015 | Last Reviewed: April 2016 |

1. PURPOSE AND SCOPE

The purpose of this policy is to set out specific parameters and procedures in relation to the accrual and taking Annual Leave. This policy applies to all EDAC's staff.

2. POLICY STATEMENT – ANNUAL LEAVE

The organisation is committed that staff accrue annual leave in accordance with their contract (reference to the modern award). All staff are eligible to pro-rated 4 weeks of annual paid leave per calendar year.

3. PROCEDURES

- 3.1 Annual leave hours can only be consumed when the hours are earned by staff.
- 3.2 An annual leave application form must be submitted in advance and approval sought by the line managers.
- 3.3 All untaken annual leave can be rolled over to the following year.

4. REVIEW OF THE POLICY

This policy will be reviewed on a two yearly basis. However, if at any time the legislative, policy or funding environment is so altered that the policy is no longer appropriate in its current form, the policy will be reviewed immediately and amended accordingly