



## PARTICIPANT SAFETY AND SECURITY POLICY

Policy Code: 1133

PARTICIPANT SAFETY AND SECURITY POLICY

### Policy Statement

CASS Disability Services is committed to personal safety and the right of people to live in dignity and security without fear of threat or harm and to be free from exploitation and abuse.

The organisation will:

- ensure the physical environment is safe;
- conduct thorough screening of both staff and volunteers working with vulnerable Participants;
- assist and support Participants to assess and manage risks;
- support Participants to safely and effectively manage medication;
- provide all staff with information and training on duty of care;
- ensure that Participants are protected from abuse or neglect, and that any incidents of harm are promptly addressed and investigated;
- provide staff induction and training and regularly review staff levels to ensure appropriate levels of care.

### Procedures

#### **1. Physical environment**

It is the responsibility of CASS Disability Services to minimise physical risks to Participants. The organisation will meet reasonable community standards and comply with all legal requirements affecting the physical and environmental safety of Participants. This includes fire safety and public health requirements. The organisation will implement a regular review process every 3 years and update their compliance with community standards and legal requirements.

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

#### **2. Staff screening**

Prior to commencing work with Participants, all staff and volunteers, will undergo a comprehensive



screening process which will include National Police Check, NDIS Worker Check and past work history reference check. The findings of the screening are to be documented in the personnel files of staff and volunteers.

### **3. Risk assessment**

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

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

- provision of plain English information on risk management,
- undertaking risk assessment jointly with staff,
- follow-up on written information and specific assistance to Participants who may experience cultural or language barriers, or who may need specialised advocacy or support.

For services conducted in the Participant's home, the assessment will also include WHS assessment, environmental assessment etc.

### **4. Suicide and self-harm**

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

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

If a Participant is assessed as being at risk of suicide and/or self-harm, intervention strategies to decrease the risk are to be developed and implemented.

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

### **5. Risk management**

Where risks of harm are identified, a range of harm minimisation strategies which may include avoidance of triggers, family support, reassurance with familiar objects and education will be discussed with the Participant and/or family. Agreed actions will then be documented in the Participant file.

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

Whenever staff are required to use restraint to prevent harm to the Participant or others, this will be documented on the Participant file, an incident report on CASS incident report will also be completed. An investigation of the incident and the response will be undertaken and a report prepared outlining whether any further action is required.

All risk assessments and harm minimisation plans will be documented and included in the



Participant's file.

### **6. Medication management**

Staff involved in the storage, transportation, administration or prompting of medication will be trained in CASS Disability Services medication policy and procedures and assessed as competent prior to undertaking any medication function.

### **7. Transport of Participants**

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

### **8. Abuse and neglect risks and reporting and management procedures**

CASS Disability Services has a duty of care to implement prevention strategies that include suitable recruitment screening processes and protocols for identifying the risk indicators for abuse and neglect. It is the responsibility of the organisation to minimise the risk of abuse (sexual assault, physical, emotional, financial) and neglect to Participants.

Any suspected or reported allegations of abuse or neglect will be dealt with promptly and investigated and responded to in accordance with the CASS Abuse, Assault and Neglect Policy.

### **9. Record keeping**

- In the case of any accident or incident causing harm to a Participant, a detailed written report CASS Incident Report will be completed within 24 hours. The report should include:
  - description of the nature and extent of the incident
  - the name and contact details of all those involved, including any witnesses to the incident
  - action taken
  - the date and signature of the person making the report
  - any on-going or follow up action
- Records must be stored securely and only accessed by responsible personnel with a legitimate reason.

### **10. External reporting**

Serious incidents will be reported to NDIS Commission in line with the organisation's incident reporting obligations.

### **Staff induction and training**

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



## CASS Group- Disability Services

Staffing levels will be reviewed every 3 years though these may also be reviewed at the following times: following large Participant intakes, on staff request, following an increase in challenging Participant behaviour, incidents etc.

Staff training/in-service on duty of care and Participant safety will occur every 12 months.

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

<b>Documents related to this policy</b>	
Related Policies	CASS DS Abuse, Assault and Neglect Policy CASS DS Medication Policy NDIS Incident Management
Forms, record keeping or other organisational documents	CASS Incident Report

<b>Reviewing and approving this policy</b>		
<b>Frequency</b>	<b>Person responsible</b>	<b>Approval</b>
<b>3 years</b>	<b>Unit Head</b>	<b>HAS &amp; DS Committee</b>

<b>Policy review and version tracking</b>			
<b>Review</b>	<b>Date Approved</b>	<b>Approved by</b>	<b>Next Review due</b>
Version 1	<b>17 May 2019</b>	<b>HAS &amp; DS Committee</b>	<b>17 May 2022</b>
Version 2	<b>16 May 2022</b>	<b>HAS &amp; DS Committee</b>	<b>15 May 2025</b>