

Service Delivery Policy

1. Introduction

The Vision of 360 health + community (360) is to empower our clients through the excellence of our personalised, specialised services. 360 will be preferred as an employer and valued and recommended by our stakeholders and communities.

2. Purpose

This policy outlines 360's service delivery philosophy: to deliver positive health and wellbeing outcomes through an integrated client-centred approach; using robust clinical governance processes, effective planning & resourcing both within 360 and in partnership with stakeholder organisations, and co-designed with the client's carers, family & support networks.

3. Guiding Principles

360 the organisation will work with stakeholders, clients, Aboriginal services, Carers, young people and the health & wellbeing community in the development, planning, delivery and quality/evaluation of services.

360 employees shall recognise and respond to the unique skills, lifestyle preferences, personal aspirations and support needs of all individuals using its service and programs. 360 will ensure that the people we support retain maximum control over their own lives, by having their needs and feedback taken into account in the planning, delivery and evaluation of services.

To ensure accountable & sustainable service delivery is at the centre of all care & support; 360 service delivery is linked to a risk management system which includes:

- Incident Management;
- Feedback (compliments & complaints);
- Work Health and Safety;
- Human Resource Management;
- Financial Management;
- Information Security & Management; and
- Governance

360 will deliver an integrated client-centred approach to service delivery; inclusive of the client's carers, family & support networks, 360 will:

- actively support and promotes recovery oriented values and principles in its policies and practices;
- treat clients and carers, family members and support persons with respect and dignity;
- recognise the lived experience of clients and carers, family members and support persons and support their personal resourcefulness, individuality, strengths and abilities;
- encourage and support the self-determination and autonomy of clients and carers, family members and support persons;
- promote the social inclusion of clients and advocates for their rights of citizenship and freedom from discrimination;
- provide education that supports client and carer/family participation in goal setting, treatment, care and recovery planning, including the development/ family members of advance directives;

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- support and promote opportunities to enhance clients' positive social connections with family, children, friends and their valued community;
- maintain a comprehensive knowledge of community services and resources and collaborate with clients and carers to assist them to identify and access relevant services;
- provide access for clients and their carer(s) to a range of carer-inclusive approaches to service delivery and support;
- have a written description of its entry process, inclusion and exclusion criteria and means of facilitating access to alternative care or support for people not accepted by the service;
- make known its entry process, inclusion and exclusion criteria to clients, carers/family members, other service providers, and relevant stakeholders including police, ambulance services and emergency departments;
- have a documented system for prioritising referrals according to risk, urgency, distress, dysfunction and disability with timely advice and / or response to all those referred, at the time of assessment;
- have entry process to 360 Programs in a defined pathway with service specific entry points that meet the needs of the client, their carer(s) /family members and its community that are complementary to any existing generic health or welfare intake system;
- ensure entry to 360 Programs minimises delay and the need for duplication in assessment, treatment, care & support and recovery planning and care or support delivery;
- is the safest and most respectful manner possible and complies with relevant Commonwealth and state / territory policies and guidelines;
- ensure that a client and their carer(s) / family members are able to identify a nominated person responsible for coordinating their care & support and informing them about any changes in the care or support management.

Service Delivery principles and processes will be assessed during accreditation reviews.

4. Definitions

360	360 Health + Community
CEO	Chief Executive Officer

5. Responsibilities

5.1 360 Board

The Board has overall responsibility for the governance of the organisation; the safety of clients and employees and robust business processes.

5.2 Clinical Governance Committee (CGC)

The 360 Board established the Clinical Governance Committee (CGC) to assist the Board in providing oversight on issues relating to clinical safety and quality, and to ensure that relevant and effective clinical governance is applied at all levels of operations across the organisation.

The Clinical Governance Committee (CGC) has oversight of this policy: they will monitor compliance by reviewing Documentation Audits provided by the Clinical Governance Officer, as outlined in the Audit Schedule.

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5.3 Chief Executive (CEO)

The CEO, as the face of the organisation, will engage with stakeholders and the health & wellbeing community in the development, planning, delivery and quality/evaluation of 360 services.

In addition, the CEO will lead in the investment of adequate employees and resources for the safe delivery of care & support throughout 360 Programs.

5.4 Executive Managers

The Executive Manager will oversee the development and delivery of 360 Care & support Programs.

Along with Program Managers, they will engage in partnership to deliver coordinated culturally capable health care & support with:

- Traditional Healers.
- Client, family, carer and community.
- Interagency and inter-sector partnerships in service delivery.

5.5 Program Manager

Program Managers will develop and maintain health and well-being service and provider lists from which their teams can work with clients and carers to establish the desired care & support plans. In addition, they will engage in partnerships to ensure every client within their program receives coordinated culturally capable health care & support: structuring its services in a way that, as far as is practical, are appropriate to the age, the gender the person identifies with, cultural background and support needs.

Program Managers will work with the People & Culture Manager to schedule appropriate training and development opportunities; and develop performance indicators for employee development and accountability.

In addition, along with executive management, Program Managers will provide clients and their carers / family / supports with a point-of-contact for feedback, information sharing / community liaison.

5.6 People & Culture Manager (PCM)

The PCM will, in consultation with executive and program managers, develop a training prospectus that will provide appropriate training for employees and opportunities for consumers and stakeholders to address employee groups.

5.7 Operations & Business Support Manager (OBSM)

The OBSM will be responsible for registering the policy, arranging for its journey through committees until it's approved. They will then add the policy to the Documents Register and disseminate it to all 360 employees

5.8 Clinical Governance Officer (CGO)

The CGO will assist the Program Managers with conducting audits to verify the completeness and appropriateness of clinical documentation.

6. Policy

6.1 Decision Making and Choice

In order to promote decision making and choice, service delivery and planning adheres to the following principles:

- All interactions are non-judgmental, emphatic and non-discriminatory;
- Informed consent is actively sought from clients prior to any intervention provided or any changes in care & support delivery;

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- carers / family members & support persons are identified as soon as possible in all episodes of care & support, and this is recorded and prominently displayed within the client's health record
- A collaborative approach is implemented to identify positive outcomes that each person that we support wishes achieve;
- A strengths based approach is utilised to encourage people to actively participate in the progression towards decisions and outcomes;
- The health professional or employee responsible for coordinating clinical care & support is identified and made known to clients
- Family, friends and carers are encouraged to participate in decision making, as desired by the client;
- In consultation with the person that we support and relevant significant people that they nominate, any additional information and/or referrals considered necessary or advisable are identified;
- A clients' right to choose will be respected, even when this involves risk. Duty of Care requirements are considered and documented, alongside the person's dignity of risk, ensuring the people we support can take reasonable risks in their daily lives without placing workers and others at risk of harm.
- All case notes are documented in a positive way and are encouraging, professional, factual and complete.

6.2 Individual Needs

In order to ensure that the individual needs of each person are met, 360 will:

- Inform individuals and their families of the availability of services or programs which may be provided to them;
- In collaboration with each person, their family and advocates, develop an individual service or care & support plan for everyone that we support that focuses on outcomes and provide a copy to them, their family and to care & support teams;
- Informed consent is actively sought from clients prior to any intervention provided or any changes in care & support delivery – and this is documented;
- implements and maintains ongoing engagement with carers as partners in the delivery of care & support as soon as possible in all episodes of care & support;
- Provide the name(s) and contact details of the professional responsible for coordinating the care & support;
- Maintain the information necessary to determine individual preferences or personal care & support needs and to properly inform individual care & support and treatment planning;
- Deliver services and programs in accordance with the agreed individual service plan;
- Seek regular informal feedback and clarification from the people we support and their families regarding the services being provided and any changes that may need to be considered;
- Review the individual service plan regularly or whenever circumstances change, such as a significant change in incident occurs (e.g. life threatening self-harm, attempted suicide or significant violence or aggression towards or from others), or a request is made to undertake a review;
- Where the service agreement is created in writing, each client receives a copy of their agreement signed by the client and the provider. Where this is not practicable, or the client chooses not to have an agreement, a record is made of the circumstances under which the client did not receive a copy of their agreement.
- Where the provider delivers supported independent living supports to clients in specialist disability accommodation dwellings, documented arrangements are in place with each client and each specialist disability accommodation provider.

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- At a minimum, the arrangements should outline the party or parties responsible and their roles (where applicable) for the following matters:
 - a) How a Client's concerns about the dwelling will be communicated and addressed;
 - b) How potential conflicts involving client(s) will be managed;
 - c) How changes to client circumstances and/or support needs will be agreed and communicated;
 - d) In shared living, how vacancies will be filled, including each client's right to have their needs, preferences and situation taken into account; and
 - e) How behaviours of concern which may put tenancies at risk will be managed, if this is a relevant issue for the client.

6.3 Participation and Inclusion

360 encourages and supports individuals to actively participate in their community life in the way they choose. 360 aims to increase opportunities for participation and inclusion for all people. In order to promote participation and inclusion, 360 adheres to the following principles:

- Each individual is unique and has their own interests and skills;
- All people have the right to meaningful inclusion in a community, including areas of work, leisure, learning and relationships;
- All people have the right to be decision makers on how and with whom they will connect with in their chosen community and 360 will be respectful of their choices and plans;
- 360 has joint responsibility to support individuals and their community to find ways to increase opportunities for inclusion and meaningful participation;
- The wider community benefits when people of diverse backgrounds are able to contribute and are actively included;
- Carers/family members have a right to participate in their chosen communities in a way that meets their own interest and needs, beyond their caring role.

360 provides all individuals with the opportunity to develop and maintain skills and the opportunity to participate in activities that enable them to achieve valued roles in the community by:

- Structuring its services in a way that, as far as is practical, are appropriate to their age, the gender the person identifies with, cultural background and support needs;
- Developing an individual care & support plan, that builds on existing competencies, focuses on outcomes and increases the potential for fulfilling valued roles in the community;
- Involving the people we support and their families in the training and development component of the individual service plan, and invite them to give their preferences with respect to the services that they would like to receive;
- Wherever practicable, delivering training and skill building in appropriate community settings;
- Aiming skill development primarily at equipping individuals to participate in activities that enable them to achieve valued roles within the community;
- Ensuring that workers are properly equipped and trained to provide the activities specified in the individual's plan;
- Building on informal and natural community supports to facilitate inclusion in ordinary every day community life;
- Developing links with other groups and organisations such as schools, universities and TAFE to promote greater opportunities for connections and meaningful participation in the community.

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6.4 Cultural Security

360 values, respects and promotes cultural diversity: Aboriginal and Torres Strait Islander Peoples, people from culturally and linguistically diverse (CALD) backgrounds, or any other people with consideration given to age, the gender that a person identifies with, disability, faith, or sexual orientation. 360 delivers services that are culturally secure, relevant and responsive to the cultural diversity of the people that we support by:

- Respecting and responding to cultural needs during the design, delivery and review of services at an organisational and individual level;
- The supports available to clients, carers & family, and any access / entry criteria (including any associated costs) are clearly defined and documented. This information is communicated to each client using the language, mode of communication and terms that is most appropriate for the client;
- Making information available to clients, carers and their families in formats appropriate to cultural needs as required;
- Reasonable adjustments to the support delivery environment are made and monitored to ensure it is fit for purpose and each client's health, privacy, dignity, quality of life and independence is supported;
- Each client is supported to understand under what circumstances supports can be withdrawn. Access to supports required by the client will not be withdrawn or denied solely on the basis of a dignity of risk choice that has been made by the client;
- Providing cultural awareness training to workers where relevant, without losing the focus on the person that we support and their family / carer, and their unique expressions and values of their culture;
- Developing connections with culturally appropriate organisations and groups to promote the meaningful participation of the people we support and their families/ carers within their chosen community;
- Respecting and promoting people's cultural and community connections, and participation;
- Building relationships with Aboriginal Elders, representatives of CALD communities, and community leaders to offer opportunities for participation with 360's services.

In addition 360 will:

- Include an acknowledgement of country at the beginning of all community talks and presentations;
- Develop processes and report on clinical supervision;
- Partake in case reviews as part of the Quality Improvement processes;
- Engage in recruitment of employees with experience and expertise in developmentally appropriate care & support
- Provide guidelines for engagement, assessment, planning, delivery and evaluation of services to young people

6.5 Managing Challenging Behaviours through Positive Behaviour Support (PBS).

If someone is expressing challenging behaviour, our workers will always provide support in a way that is developmental and constructive rather than controlling and restrictive. 360 is committed to minimising restrictive practices and actively uses Positive Behaviour Support (PBS), which is an evidence-based approach that aims to increase a person's quality of life, and prevent and decrease the frequency and severity of challenging behaviour. PBS is not an intervention but a culture of supporting responsibility.

PBS involves developing a shared understanding of the underlying needs of an individual, why they are expressing challenging behaviour, and what can be done to meet their needs more appropriately and safely for themselves and others.

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PBS is significantly improved by all the people involved knowing the individual well and having strong relationships with them and their family. PBS has optimal outcomes when fully integrated with skill building, personal care & support, community participation and respite services and this approach fully aligns with 360's service delivery philosophy.

7. Related Organisational Documents

- Clinical Governance Framework
- Clinical Supervision Policy
- 360 Informed Consent Policy and Procedure
- Care & Support Planning Policy and Procedure
- Involvement of Carer Policy
- Involvement of Family & Friends Policy
- Managing High Risk Clients Policy & Procedure
- Use of Restrictive Practices Policy & Procedure
- Positive Behaviour Support Policy
- LGBTIQA+ Policy
- Diversity Policy
- Residential Aged Care
- Translator (Use of Interpreter Services) Policy
- Peer Support Policy
- Information Management Policy
- Local Youth Reference Group (LYRG) terms of reference

8. Implementation and Monitoring

8.1 Implementation

Once this Revised Policy is endorsed by the Clinical Governance Committee, and Approved by the 360 Board, the OBSM will add it to the Policy Register and include it in the Policy Library. Employees will be notified by email: Program Managers will receive a copy to discuss with their Employees and include in all future inductions.

8.2 Monitoring

These monitoring activities will be reported to the Executive / Clinical Governance Committee via the Program Activity Reports.

Documented evidence demonstrating how the headspace centres have contributed to the evidence base which informs youth mental health service provision at the centre. This must include at least two (2) of the following within the past twelve (12) months:

- testing or reviewing an approach or process to service delivery;
- presenting centre knowledge, findings, or research at network or sector events and conferences;
- using a student placement to identify or develop improvements;
- engagement in research or evaluation projects;
- initiating a research project with the appropriate approvals.

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For other 360 Programs: Documented evidence of the facilitation of Carer / Family and Friends participation in program development, delivery and evaluation indicated by at least two (2) of the following:

- dedicated employee member
- champion / portfolio holder
- family peer worker
- focus groups
- surveys
- feedback forms
- complaint processes

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