

# Community Care Options

Policy Manual
Section 2

**Human Resources** 

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# 2.1 Staff Accountability

#### Definition

This policy identifies staff roles and responsibilities within Community Care Options.

#### Aged Care Standards

✓ Standard 8 – Organisational Management

#### **National Disability Standards**

✓ Standard 6 – Service Management

#### **NDIS**

- ✓ Core Module 1-4
- ✓ High Intensity Daily Personal activities
- ✓ Support Coordination
- ✓ Implementing Behaviour Support Plans
- ✓ NDIS Rules 2018

#### **Role of the Chief Executive Officer (CEO)**

The CEO is directly responsible to the Board of Management. The responsibility for the day-to-day operations of the organisation has been delegated by the Board of Management to the CEO. Specifically this means –

Responsibility for the management of the organisation including –

- planning and evaluation;
- compliance with statutory requirements;
- · compliance with funding agreements;
- · policies and procedures; and
- reporting.

Responsibility for Staff Management including -

- staff level planning;
- recruitment;
- orientation;
- support; and
- staff administration.

Responsibility for financial management;

Responsibility for client service provision;

Responsibility for community development; and

Responsibility for promotion and community liaison.

#### Role of other staff

All other staff are required to fulfil the requirements of their job as specified in their Position Description. All staff are employed by the Board of Management, however, they are responsible to their relevant line Manager.

See Position Descriptions.

# 2.2 Employee Information

#### Definition

Employee information required and retained by the organisation.

#### **Position Statement**

A personnel file will be kept on each employee.

#### **Aged Care Standards**

✓ Standard 8 – Organisational Management

#### **National Disability Standards**

✓ Standard 6 – Service Management

#### NDIS Practice Standards and Rules (2018) and Rules (2018)

- ✓ Core Module 1-4
- ✓ NDIS Rules (2018)

#### **Operational Procedures**

Each staff member's personnel file will include information pertaining to -

- letter of application;
- CCO application form (employee record);
- interview record:
- letter of appointment with their signed acceptance;
- acceptance of private use of car agreement if applicable;
- position description;
- · staff appraisals;
- supervision notes;
- leave approval forms;
- copies of training certificates and academic records;
- copies of official records of counselling and disciplinary proceedings; and
- any other relevant documents.

#### **Record Security**

- Files relating to staff will be kept by the Operations Manager, in a lockable filing cabinet.
- Employees' personal information, which is kept in electronic form, will be password protected. The password will be known only to those authorised to have access to the information.

#### Access by Employees to their own records

Employees are entitled to see their file during office hours. The employee needs to arrange a suitable time with the Operations Manager.

#### Staff Checks

All staff are required to have a Federal Police Check and a Working with Children Check, NDIS Worker Screening Check completed and returned prior to commencing employment. These checks are required to be updated every three years in line with funding body requirements. The Support and Development Manager will be responsible for ensuring these are completed and the register of

police checks is maintained and up to date. Where the Support and Development0 Manager is on leave for a period of one week or more, this function will fall to the Operations Manager.

The organisation reserves the right to not proceed with recruitment and employment processes where a flagged criminal record is returned for an individual staff member.

All staff are required to inform the organisation should they incur a criminal conviction at any time during their employment with Community Care Options.

# 2.3 Position Descriptions

#### Definition

A Position Description identifies the key requirements for each position within Community Care Options. It outlines the scope and key performance indicators for each role within the organisation.

#### **Position Statement**

All staff will be provided with a Position Description at commencement of their employment and will have the opportunity to review and discuss the requirements of their position with their line Manager.

#### Aged Care Standards

✓ Standard 8 – Organisational Management

#### **National Disability Standards**

✓ Standard 6 – Service Management

#### **NDIS**

- ✓ Core Module 1-4
- ✓ High Intensity Daily Personal activities
- ✓ Support Coordination
- ✓ Implementing Behaviour Support Plans
- ✓ NDIS Rules 2018

#### Operational Procedures

All staff position descriptions are kept in an electronic file and a signed hard copy is kept in the employee's Personnel file.

All staff will have a position description that specifies their roles and responsibilities.

Position descriptions will be reviewed and updated as organisational needs change. Changes to position requirements will be discussed with staff and they will be issued with updated Position Descriptions where these are altered.

Each staff member will be given a copy of their position description prior to their commencing employment and whenever their position description changes.

Each staff member will sign new or amended position descriptions to indicate they understand and agree with the description of their position and the position requirements.

All staff will undertake an induction process to their new position and be instructed by their Manager in terms of the requirements of their position.

Staff will undertake regular support and supervision with their Manager at least quarterly to discus progress and requirements, as well as participating in an annual Performance Review process.

# 2.4 Conditions of Employment

#### Definition

Refers to the terms and conditions under which staff are engaged for work by the organisation.

#### Legislation

- ✓ NSW Industrial Relations Act 1996
- ✓ Social and Community Services Employees State Award
- ✓ Clerical and Administrative Employees State Award
- ✓ Miscellaneous Workers Home Care Industry State Award
- ✓ Social, Community Home Care and Disability Services Award

- ✓ Social, Community Home Care and Disability
   ✓ Community Care Common Standards
   ✓ Aged Care Act
   ✓ Disability Services Act
   ✓ NDIS Practice Standards and Rules (2018) and Quality Management Framework

#### **Aged Care Standards**

✓ Standard 8 – Organisational Management

#### **National Disability Standards**

✓ Standard 6 – Service Management

#### **NDIS**

- Core Module 1-4
- ✓ High Intensity Daily Personal activities
- Support Coordination
- Implementing Behaviour Support Plans
- NDIS Rules 2018

#### **Position Statement**

CCO aims to be an employer of choice. We are committed to ensuring that staff have conditions of employment that are in line with or exceed those determined by relevant awards and legislation.

#### **Operational Procedures**

Community Care Options employees are employed by the Board of Management in accordance with relevant awards, where applicable. Employees' continued employment will depend upon satisfactory performance of all duties and responsibilities associated with their position.

#### **Letter of Appointment**

All staff will have a Letter of Appointment which outlines the conditions of employment. It is the responsibility of the CEO to ensure that all Letters of Appointments comply with relevant statutory requirements. The Letter of appointment is to be signed by the staff person and the CEO (or Chairman if the employee is the CEO) prior to their commencing work.

#### **Application for Employment**

Prior to beginning employment applicants have to complete and sign the Application for Employment form.

#### **Employment Particulars**

Prior to beginning employment a new employee has to complete and sign an

Employment Particulars form.

#### **Criminal Record Checks**

All employees will be required to have a satisfactory federal Criminal Record Check returned prior to commencing employment.

Where a prospective or current employee has a recorded conviction, the nature of the conviction will be considered, in relation to the inherent requirements of the job, in accordance with guidelines provided by the Human Rights and Equal Opportunity Commission.

It is the responsibility of all staff to advise the organisation if they incur charges for a Criminal offence during the course of their employment with Community Care Options.

It is the responsibility of all employees to undertake a federal criminal record check every three years. The Support & Development Officer will generate a report from the organisation's competencies database of those staff whose checks require an update on a monthly basis, with the report being generated for the period of the following month. Applicable staff will be issued physical copies of the required paperwork by the organisation's Support & Development Officer, one month prior to the expiry date of their existing check. Staff who reside within the proximity of the organisation's offices will have documents issued via their pigeon hole. Staff who live in rural and remote areas will have these sent directly to their postal address.

The Support & Development Officer will provide the Management team with a report of pending Police Checks on a weekly basis and this will form a standing agenda item of Management Team's meetings. The Management Team will use the report to identify any staff at risk of not having their Police Checks returned in time and the responsible Manager will follow up with the employee at fault and support them to submit same. If the employee still has not submitted their documents by the day of expiry, the responsible Manager will advise them in writing that they are in breach of their contract and will be stood down from their position until such time as they are able to provide a cleared Criminal Record Check. Additionally, this breach will result in formal performance management of the employee. If the employee has annual leave accrued, they may utilise this during the period they are stood down. Otherwise, leave without pay will be implemented. If the employee has still not submitted same within five working days of being stood down, further disciplinary action will be taken.

These checks remain the property of CCO and are not transferable to other services.

#### **Working with Children Checks**

All employees will be required have a satisfactory (no risk rated) Working with Children check returned by the relevant authority, prior to commencing employment.

It is the responsibility of all employees to undertake a Working With Children

Check every three years. The Support & Development Officer will generate a report from the organisation's competencies database of those staff who's checks require an update on a monthly basis, with the report being generated for the period of the following month. Applicable staff will be prompted to complete same by the organisation's Support & Development Officer, one month prior to the expiry date of their existing check. Prompts will forwarded to staff via SMS.

The Support & Development Officer will provide the Management team with a report of pending WWCC on a weekly basis and this will form a standing agenda item of Management Team's meetings. The Management Team will use the report to identify any staff at risk of not having their Working With Children Check returned in time and the responsible Manager will follow up with the employee at fault and support them to submit same. If the employee still has not acquired their Working With Children Check by the day of expiry, the responsible Manager will advise them in writing that they are in breach of their contract and will be stood down from their position until such time as they are able to provide evidence of a cleared Working With Children Check. Additionally, this breach will result in formal performance management of the employee. If the employee has annual leave accrued, they may utilise this during the period they are stood down. Otherwise, leave without pay will be implemented. If the employee has still not submitted same within five working days of being stood down, further disciplinary action will be taken.

#### **NDIS Worker Screening Check**

It is the responsibility of all employees to undertake an NDIS Worker Screening Check prior to employment.

#### MANDATORY COMPETENCIES PROCEDURE

(This procedure has been developed in conjunction with Sections 2.2 and 2.4 of Community Care Options' Policy and Procedures Manual).

It is mandatory that all Community Care Options employees have a current Federal Police Check and Working with Children's Check, NDIS Worker Screening Check in order for the organisation to be deemed compliant with Federal and State funding guidelines. Additionally, the organisation has deemed it necessary for all staff to provide evidence of a current NSW issued Driver's Licence, Vehicle Registration papers, Comprehensive Insurance papers and a current First Aid certificate. This specific group of mandatory items will hereby be referred to broadly as mandatory competencies.

Ultimate responsibility for ensuring mandatory competencies compliance will sit with the organisation's Management team with the Support & Development Manager, responsible for the generation of reports, prompts to staff and the processing of submitted competencies.

The Support & Development Officer will generate from TRACCS a report of the Mandatory Competencies scheduled to expire in the following month. The Support & Development Officer will issue those people identified as requiring a new Federal Police Check the appropriate documents via their pigeon hole, email or

post it to their residential address (pending the employee's pre-determined mode of collection). For all other mandatory competencies, an SMS will be sent to the employee advising which of their competencies fall due and when renewal is required.

The Support & Development Officer will be responsible for collating any returned mandatory competency documents, uploading Federal Police Checks to the PRM site and updating both the TRACCS database and the Police Check/Working With Children Check register. This will be completed immediately upon the employee's submission of these documents to the Support & Development Officer.

The Support & Development Officer will generate and forward the TRACCS report detailing the competencies pending to the Management team each Monday afternoon.

If the Support & Development Officer is absent for a period of one week or more, the duties identified will fall to the Manager People & Culture.

Mandatory competencies will form a standing agenda item in the Manager's team meetings. The TRACCS generated report will be reviewed at the Manager's meeting each Wednesday in order to identify employees at risk of not submitting their mandatory competencies within the expiry time frame. The responsible Manager for employees deemed at risk will be accountable for reminding employees in writing of their obligation and supporting them to submit the required competency within the stipulated period. If an employee has not submitted the relevant mandatory competency by the day of expiry, the responsible Manager will issue them with a formal warning advising that they are in breach of their contract of employment and will be stood down until such time as they can produce evidence of the required mandatory competency. Employees who have been stood down and have accrued annual leave may utilise this during this period.

Employees who are employed casually or who have exhausted their leave accruals will be stood down without pay. If an employee has still not submitted the required competency within five business days of being stood down, further disciplinary action up to and including termination will be taken. If the responsible Manager is not available for a period of one week or more, the Management team will delegate the responsible Manager's employee responsibilities to another Manager.

#### **Current NSW Driver's Licence**

All staff are required to have and maintain a current NSW Driver's Licence.

#### Salaries and Wages

Staff are paid fortnightly in arrears. Salaries are paid directly into bank accounts nominated by the employee. The organisation's employees receive statutory Superannuation benefits.

#### **Time Sheets**

The time period required to process time sheets is one day at present. Therefore, time sheets must be received by the Finance Officer by 10am on the Monday following the end of the pay period (Sunday). A failure to do this will mean that staff will be paid for rostered hours only and any adjustments to pay will be paid in the following pay period.

In the case of public holidays, staff will be advised of the due date for submission of time sheets, to ensure staff are paid on time.

All staff are required to submit a time sheet and maintain records of hours worked. Leave forms are to be attached to time sheet where leave has occurred within the period.

#### **Salary Sacrifice**

The organisation allows its permanent employees to salary sacrifice a certain amount of salary each pay period. Salary sacrifice must be within existing government regulations and not involve the organisation in additional costs. See Salary Sacrifice Information provided at induction.

#### **Hours of Work**

Full-time staff are engaged for 38 hours per week (7.6hrs per day  $\times$  5 days). Office based staff are permitted to work 40hrs per week (8hrs per day) in order to accumulate and take a rostered day off each month. This is an above award condition. The rostered day off will be at organisational convenience (ie staffing levels and workloads permit) and will be rostered unless otherwise negotiated by staff with their Manager.

Office hours are 8.30am – 4.30pm Monday to Friday. The organisation will consider requests for flexible hours of work from staff who have specific family commitments where these still allow for organisational needs to be met. Hours worked in excess of the above <u>may</u> be paid at overtime rates and taken as time in lieu <u>only</u> where there is <u>prior</u> approval by the staff members Manager, and for the purposes of completing necessary organisational functions.

Any accrued time outside of normal working hours will not be paid out on termination.

All Service Coordinators, Support Coordinators, Care Managers, and Program Managers are required to take a turn on the on call roster. See After Hours Procedure.

#### **Annual Leave**

Permanent staff accumulate annual leave from date of commencement and may take annual leave after 12 months of employment, unless otherwise negotiated. Annual leave is taken at a rate of 7.6hrs per day.

In order to meet operational requirements and appropriate Work Health and Safety standards all Annual Leave must be taken within six months of it becoming due. This means staff cannot accumulate more then six weeks of leave at one time. Every request for annual leave must be made on the CCO Leave Application form at least four weeks before the intended commencement of the leave. Annual Leave has to be approved by the line manager prior to being taken. Approval of

the actual dates is subject to operational requirements although every effort will be made to meet staff requests.

#### **Leave Loading**

Staff are entitled to leave loading of 17.5% for 4 weeks annual leave paid to them in addition to their normal pay after 12 months of continuous service. No loading is payable to employees who take their annual leave wholly or partly in advance but becomes payable on the employees anniversary and will paid after this date.

#### Personal/Carers Leave

Personal (sick) Leave entitlement is in accordance with the relevant award (10 days pro rata) and the National Employment Standards. An employee may take paid personal/carer's leave if the leave is taken – because the employee is unfit for work because of a personal illness, or personal injury, or to provide care or support to a member of the employees immediate family, or household who requires care or support because of a personal illness, personal injury or an unexpected emergency. Untaken personal/sick leave will not be paid out at any time.

Staff are required to notify their immediate line Manager of any likely absence because of illness as soon as possible. The organisation's Leave Application form must be completed as soon as practicable following return to work. A Doctor's Certificate is required for absences due to sickness in excess of two days or where the day of leave is immediately before or following a public holiday or annual leave. Where taking carers leave over 2 days, the staff member will need to provide evidence of the need to care via either a medical certificate or statutory declaration.

#### **Long Service Leave**

Staff employed prior to May 2009 may elect to take one month of their long service leave entitlement at the end of the fifth year of service. If this early long service leave entitlement is taken up it will mean only one month will then be available to take up at the end of the tenth year of service. The four weeks of pro rata long service leave can be taken any time after the fifth year of service is completed.

For all staff employed after May 2009 they will be entitled to long service leave as per their award and the NSW Long Service Leave Act.

All staff are entitled to long service leave providing they have not had a break in service of more than 12 weeks.

If a staff member has six weeks or more of annual leave accrued, they will be required to take annual leave before accessing long service leave, in accordance with the annual leave policy.

#### **Leave Without Pay**

In certain circumstances the organisation may approve leave without pay, where an employee has exhausted all other leave entitlements, and there is a genuine need to take leave. When considering applications for leave without pay the organisation will take into account –

- The reason for the leave application ie. Caring responsibilities, nforeseen circumstances.
- The cost to the organisation in backfilling the leave
- Any accrual of entitlements during leave without pay
- Any health and safety reasons related to the application ie. Prevention of burnout.

Leave without pay requests must be made to the CEO.

#### **Other Leave**

Staff are required to notify Community Care Options of any likely absence for other reasons as soon as possible. The organisation's Leave Application form must be completed as soon as practicable.

#### **Training and Meeting Attendance**

All staff must attend designated training and meetings as directed by their supervisors.

Adequate notice of training or meetings will be provided. A failure to attend meetings and training as directed will be regarded as a failure to meet the requirements of the position.

#### **Support Worker Qualifications**

All Support Workers shall have a Certificate III in Aged Care or equivalent at the time of appointment or within three years of appointment.

Support Workers must hold a current First Aid Certificate while they are employed.

#### **Rostering of Support Workers**

All Support Workers will be rostered according to EEO, anti discrimination and WH&S policies.

When considering staff for the allocation of rostered work, the following will be taken into account –

- the type and time of the service as required by the client
- the particular needs of the client in relation to support staff (eg gender)
- the WH&S implications of the work ie training, age and experience required to complete the tasks
- the availability of different staff members
- the location of the staff member in relation to the client
- work required to meet minimum contract hours for each staff member.

When considering individual Support Worker requests to not be rostered for particular times, the following will be considered –

availability of work at other times to meet minimum contract hours

- availability of suitable staff to meet clients' needs
- whether the request concerns work-related activities (eg attendance at work related training).

#### Self rostering

Support Workers may make one-off changes to their roster under the following circumstances, where –

- a client requests a change to their service time and the Support Worker's roster can accommodate this change
- a worker has a one-off genuine commitment outside of work (for example a specialist appointment)
- the change to the roster will benefit the client or the organisation (for example, eliminating a split shift)
- the change is a one-off only, not an ongoing change to the roster
- the change will not eliminate a rostered break or create an overtime situation (eg the change must not create a continuous work period of more than 5 hours).

In circumstances where the worker and the client have negotiated a one-off change, the worker is required to –

- contact the office from the client's home (or mobile phone) to confirm that the roster will accommodate the change. Rostering staff will change the roster on the computer so that the SW will not be double-booked
- confirm the change with rostering staff and the client
- document the alteration and the reason for the change on their roster for submission at the end of the roster period.

Any requests for ongoing changes to service by the client must be directed to the Support Coordinator for approval.

#### Flexible service times

At times, Support Workers may run late, or be available earlier than the rostered time for client services. In order to accommodate these variances a flexible rostering system will be put in place. The following guidelines will apply to rostering

- clients will be advised that workers will arrive at a certain time with 30 minutes allowance either side. For example, a worker rostered at 9.30am may arrive between 9.00 and 10.00am.
- workers will be directed to stay to their roster where possible
- delays of 30 minutes or less are to be documented on the roster
- delays of more than 30 minutes are to be reported to the office immediately so that the remainder of the day can be rescheduled.

All staff are responsible for ensuring that they take breaks and do not exceed 5 hours continuous work without breaks.

#### **Alternative Duties – Support Workers**

Where a client cancels an appointment and there is no alternative client work available then Support Workers shall be allocated to alternative duties that fall within the scope and purpose of the job and the classification determined under the Award.

#### **Additional Time**

Permanent part-time staff are required to be available for a maximum of six (6) hours additional time each fortnight, to be paid at ordinary rates. By mutual agreement permanent part time staff may work an additional 20hrs per fortnight at ordinary rates.

Date Adopted	Outcome	Author	Next Review	Comments
May 2003	Amended	N Jutt		
July 2003	Amended	N Jutt		
June 2005	Amended	N Jutt		
October 2005	Amended	N Jutt		
July 2006	Reviewed & Amended	N Jutt		All Staff require a federal police check
June 2007	Amended	N Jutt		•
June 2008	Reviewed & Amended	D. Ryan	2011	
August 2011	Reviewed & Amended	D. Ryan	2014	
August 2014	Updated	D. Ryan	2017	
December 2016	Updated	D. Ryan	2019	
December 2018	Reviewed/Updated	D. Shipman	2021	
December 2020	Review & Updated	D. Ryan	2022	
December 2022	Reviewed & Updated	D. Ryan	2024	

#### 2.5 Code of Conduct and Ethics

**Definition –** although no one set of rules can answer all ethical questions, the Code of Conduct provides the organisation with an ethical framework for the decisions, actions and behaviour of its staff. It explains the values that guide the organisation, the principles covering appropriate conduct in a variety of contexts, and it outlines the minimum standard of behaviour expected of employees.

#### **Position Statement**

Community Care Options has an obligation as a non-profit community services organisation to respect the law and system of government, as do all persons associated with it. CCO will provide a responsive service to the community, that delivers responsible duty of care to improve quality of life. All of the organisation's members will operate with integrity and diligence, economy and efficiency, demonstrating professionalism, respect and value for people as individuals. Every person associated with the organisation must accept these obligations and abide by this policy.

#### Legislation

All persons engaged by Community Care Options are bound by legislation relevant to the provision of services to the aged, children, and people with disabilities. This includes, but is not limited to, the following -

- ✓ The Aged Care Act 1997
- ✓ Aged Care Principles 1997
- ✓ Children and Young Persons (Care and Protection) Act, 1998
- ✓ The Disability Services Act 1993
- ✓ Disability Service Standards
- ✓ Health Records and Information Privacy Act 2002
- ✓ Privacy Act 1988
- ✓ Anti-Discrimination Act 1977;
- ✓ Privacy and Personal Information Protection Act 1998
- ✓ Protected Disclosures Act 1994;
- ✓ Public Finance and Audit Act 1983.
- ✓ Child Protection (Prohibited Employment) Act 1998;
- ✓ Community Care Common Standards.

#### **Aged Care Quality Standards**

✓ Standard 8 – Organisational Management

#### **National Disability Standards**

✓ Standard 6 – Service Management

#### **NDIS**

- ✓ Core Module 1-4
- ✓ High Intensity Daily Personal activities
- ✓ Support Coordination
- ✓ Implementing Behaviour Support Plans
- ✓ NDIS Rules 2018

Community Care Options is committed to upholding the principles, provisions and requirements of all relevant legislation concerning the provision of care and services for people in its care.

# **Organisational Values**

The values of Community Care Options reflect the desire to achieve the following -

- respect and valuing of people as individuals
- to improve the quality of life of clients and carers
- to be guided by an ethical framework
- to operate in a professional way
- to encourage creativity & initiative

#### We value all people, including clients, carers and staff equally

This means we -

- Treat people with respect and dignity
- Respect people's individual way of life, belief systems, culture and views
- Welcome diversity and behave in a culturally sensitive way
- Treat people fairly
- Uphold people's rights and support them to fulfil their responsibilities
- Celebrate achievements
- Consult people on issues concerning them

#### We value a high quality of life for clients and carers

This means we -

- Provide a high quality of services which improve clients' and carers' quality of life
- Promote clients' independence
- Centre the service on clients' individual choices
- Support and empower people in their decision making
- Observe our duty of care
- Strive for continuity and consistency in service provision

#### We value acting ethically

This means we -

- Act honestly and with integrity
- Are open in our communications and share ideas
- Accept responsibility and admit mistakes
- Show trust and behave in a trustworthy manner
- Share confidential information only where needed and with the permission of the person whose information it is
- Protect and keep safe people's private information

#### We value professionalism

This means we -

- Set achievable goals and work towards them
- Continually improve our performance in all areas of operations, striving for excellence

- Show leadership
- Reflect on our work practices and systematically improve them
- Promote a learning culture and are willing to learn
- Support and promote professional development
- Observe collective and individual boundaries
- Account for our actions

#### We value creativity & initiative

This means we -

- Encourage innovative and dynamic ideas
- Promote visionary thinking
- Behave in a positive and friendly manner
- Provide inspiration and encouragement
- Motivate and mentor people

#### **General Principles**

In carrying out duties and responsibilities staff will -

- uphold the vision, mission and values of the organisation;
- act in a lawful manner and in accordance with this Code:
- act in an ethical manner;
- not act corruptly or support anyone else acting corruptly;
- act in a manner that will not bring the organisation into disrepute;
- take all necessary steps to ensure the health and safety of themselves and others (including clients) whilst at work;
- ensure that work is performed efficiently, effectively, impartially and with integrity;
- provide honest, accurate and responsible advice and information;
- ensure that decisions are made fairly and based on the best possible information available;
- ensure that at all times they remain accountable for, and strive to improve, professional competencies and quality of work;
- work in a cooperative and positive manner with colleagues;
- ensure that Community Care Options resources are not used improperly;
- always act respectfully towards, and in the best interests of, those people who are users of our services.

#### **Operational Procedures**

#### Responsibilities

While the Code of Conduct does not provide answers to all legal and ethical questions that may arise, it does provide the framework for determining appropriate conduct in a variety of situations. If and when situations are encountered where there are concerns about issues of legality, ethics or conduct, all persons are obliged to discuss these issues with their Manager.

As individuals, we are ultimately responsible for our own professional and personal behaviour. Each section of the Code therefore concludes with a statement written

in the first person that details the commitment of each member of the Community Care Options team to legal, ethical behaviour that conforms with the values of our organisation.

Board of Management members, managers and all employees will demonstrate fairness and equity in their behaviour.

Professionalism in conduct, compliance with rules and correct personal presentation are the constant responsibility of all employees and persons associated with the organisation.

All employees will act professionally and demonstrate trustworthiness, practice open communication and empower independence and competence in colleagues and clients.

All employees will continually improve their own performance and accept responsibility for achievement.

#### **Approach**

All employees will be informed of the Code of Conduct and organisational values at the commencement of their employment, and annually reminded of the policy during the appraisal process.

All staff members are required to sign a copy of the Code of Conduct to formally acknowledge that they have received the document, they understand its content and they agree to comply with its requirements. This will be done on commencement of employment and every two years.

All employees will accept responsibility for their own conduct and for that of the team of employees with whom they work most closely.

A breach of the Code of Conduct will be managed as per the Conduct Management Policy and a serious breach may lead to an employment termination and/or criminal investigation.

Legislation requires that the persons engaged in managing and delivering care services must be assessed and approved as 'suitable'.

All persons engaged by Community Care Options are directed to provide daily care and services to our clients in accordance with the legislative standards and as directed in the Community Care Options Policy and Procedures Manual.

In keeping with legal requirements and values of Community Care Options, all persons engaged by Community Care Options are required to value diversity and to refrain from all actions and behaviour that constitute harassment or discrimination.

A conflict of interest exists when it is likely that a person could be influenced, or could appear to be influenced, by a personal interest in carrying out their responsibilities when engaged by Community Care Options. A conflict of interest

that leads to biased decision making may constitute corrupt conduct.

Community Care Options requires that all persons within the organisation avoid having any financial or other interests that may cause a conflict between personal interest and work responsibilities, whether real or apparent.

Community Care Options requires that persons engaged by the organisation always act in the best interests of people and their families, who are and have been users of our services. As such it is expected that all persons conduct their relationships with people, their families and external organisations in a professional and ethical manner.

Community Care Options respects the rights of persons engaged by the organisation to make public comment and enter public debate on political and social issues as private individuals.

As persons engaged by Community Care Options however, persons must not make statements on behalf of the organisation without prior approval by the CEO and must, at all times, respect the rights to privacy held by users of our services.

In addition, Community Care Options respects the rights of persons engaged by the organisation to participate, as private individuals, in party political activities, community organisations, charities and professional associations, unless this participation results or has the potential to result in a conflict of interest.

#### **Expectation of Behaviour in the Community**

With respect to the community CCO serves, all employees must –

- act in a way which is lawful, reasonable and just;
- treat members of the public fairly, with respect, courtesy and sensitivity;
- not take advantage of their position to improperly influence others;
- make sure that there is no conflict between their personal interests and the way they carry out their duties;
- not accept a bribe, gift or other improper advantage or profit.

#### **Expectation of behaviour towards CCO**

With respect to CCO, all employees must –

- abide by the same conduct expectations towards the organisation and colleagues as toward the community;
- be informed about and act according to all policies and procedures, including Work Health and Safety, Equal Opportunities, and Bullying and Harassment policies;
- strive to achieve assigned responsibilities and duties to the highest level possible, including participation in self assessment and training opportunities;
- represent the organisation in a positive manner and protect CCO's intellectual property;
- interact with colleagues honestly, practice open communication, demonstrate respect and professionalism;

- present for work physically and mentally well, without the influence of illegal drugs or alcohol;
- not conduct their own private business at work
- use CCO's resources effectively and economically for authorised purposes;
- immediately report suspected fraud, corrupt, criminal or unethical conduct;
- not make statements on behalf of, or discuss information in relation to, Community Care Options with anyone outside the organisation.

#### **Expectation of behaviour towards Clients**

With respect to CCO clients, all employees must –

- perform their assigned duties and responsibilities for improving client quality of life, to their upmost ability;
- not exploit the relationship of trust with clients but instead minimise any power imbalance or vulnerability and encourage clients' independence;
- respect clients' rights and be sensitive to cultural differences, never imposing personal political or religious views on clients;
- not do anything that may cause actual or potential physical or psychological harm to clients or carers;
- be informed about and demonstrate safe work practices in accordance with CCO policies and procedures, including Work Health and Safety, food handling and universal precautions for Infection Control;
- observe confidentiality and ensure the client's privacy and dignity is preserved;
- never alienate clients from their families but rather encourage strong family and community networks;
- communicate effectively, using age appropriate language and volume;
- never take clients to the employee's home or bring children or animals to work with them;
- never mentally or physically abuse, or engage in sexual relationships with clients;
- observe a high level of personal and food hygiene and not smoke, consume alcohol or prohibited drugs in or around the client's home;
- never give advice on clients' wills, try to influence a client's legal will, witness a client's will or allow themselves to be appointed executor of a client's estate.
- never offer financial advice to clients, especially with respect to the investment or disposal of personal funds;
- never accept a client's power of attorney, sign credit cards or bank account cards:
- never operate a client's bank account, unless this is part of the staff's list of duties and in accordance with the "handling clients' money procedure";
- never offer to buy anything a client owns, (or make any statement which could be taken in such a way), or sell anything to clients (e.g. cleaning products, cosmetics, vitamins) or promote particular products to them;
- never ask for gifts or expect a client to do anything in return for help, other than any contributions to CCO as negotiated in the support plan; and
- inform management immediately if a client gives them a gift or bequest of a value of \$15 or more.

#### **Dress Code**

All staff are expected to dress in a clean, neat and tidy fashion that best supports their assigned duties and the professional image of CCO in the community.

Managers, administrative and client service team members based in an office will comply with the following –

- Clothing will be normal business attire;
- Footwear will be appropriate to the area of work;

Client services team members based in the field (direct care staff) will comply with the following –

- Clothing will be appropriate for the work being performed. For housekeeping and personal care, knee length shorts or long pants should be worn. To avoid injury, pants should be loose enough to allow for squatting and kneeling. Tops should allow for movement, but not have low cut necklines or sleeves. Sheer fabrics should be avoided. Clothing must not be torn or include offensive slogans.
- Footwear will be flat heeled and cover the whole foot ie no open toes.
   Shoes should offer support to the top of the foot and have a non slip rubber sole to avoid injury while doing housekeeping tasks, (such as chemical spills, electric shock, sprains and strains).

Jewellery worn into client's homes will be limited to the following for safety and hygiene reasons –

- watch (wrist watch or 'brooch' style);
- Wedding band; and
- 1 pair of stud style earrings.

Support Staff have contact with people who are frail, people with challenging behaviours and people with dementia. To limit the possibility of injury to themselves and clients, they will avoid wearing the following items –

- Dangling or looped earrings
- Chains or necklaces
- Rings with set stones (eg solitaire style engagement rings)
- Large faced or loose watches
- Nose, eyebrow or lip jewellery.

Work health and safety dangers of such items include skin tears to clients during personal care or transfers, or jewellery being pulled out or off by clients. If jewellery cannot be removed, eg. rings, direct care staff should tape these prior to going into a client's home.

#### **Breach of the Code of Conduct**

Employees who become aware of a breach of the Code of Conduct should report that breach to a Manager.

A breach in the Code of Conduct will be managed according to the CCO Conduct Management Policy. A substantiated and serious breach of the Code of Conduct may lead to employment termination and/or criminal prosecution.

#### Cross Reference and Further Reading from the CCO Policy and Procedures Manual

- ✓ Conduct Management Policy
- ✓ Bullying & Harassment
- ✓ Work Health and Safety Policies
   ✓ Equal Opportunity Policy

Schedule for Revision of Policy: CODE OF CONDUCT AND ETHICS						
Date Adopted	Outcome	Author	Next Review	Comments		
December 2001	Adopted	A. Vaughan	2004			
June 2006	Amended	N. Jut	2008	KM - emailed to staff and placed on Noticeboards at all Offices		
November 2010	Updated	D. Ryan		Redistributed to staff to sign		
August 2014	Updated	D. Ryan	2016			
December 2016	Updated	D. Ryan	2018	2017 redistributed to staff to sign		
August 2018	Reviewed	D. Shipman	2021			
December 2022	Reviewed & Updated	D. Ryan	2024			



# **Code of Conduct and Ethics**



#### Introduction

This Code of Conduct has been developed to assist staff engaged by Community Care Options undertake their work responsibilities legally, ethically and in a manner that conforms with the vision, mission and values of our organisation.

The Code applies to all persons engaged by Community Care Options in any capacity, including permanent, casual, contracted persons and volunteers.

This Code is written in conjunction with the Community Care Options Policy and Procedures Manual. The Policy and Procedures Manual explains the underpinning policies and rationale for our practices and procedures and the ways in which our responsibilities are to be carried out.

While the Code of Conduct does not provide answers to all legal and ethical questions that may arise, it does provide the framework for determining appropriate conduct in a variety of situations. If and when situations are encountered where there are concerns about issues of legality, ethics or conduct, all persons are obliged to discuss these issues with their Manager.

As individuals, we are ultimately responsible for our own professional and personal behaviour. Each section of the Code therefore concludes with a statement written in the first person that details the commitment of each member of the Community Care Options team to legal, ethical behaviour that conforms with the values of our organisation.

All staff members are required to sign a copy of the Code to formally acknowledge that they have received the document, they understand its content and they agree to comply with its requirements.

#### 1.0 Overview of Professional Commitment

In carrying out my duties and responsibilities I will:

- uphold the vision, mission and values of our organisation;
- familiarise myself and comply with all laws relevant to my area of responsibility;
- act in a manner that will not bring the organisation into disrepute;
- ensure that my work is performed efficiently, effectively, impartially and with integrity;
- provide honest, accurate and responsible advice and information;
- ensure that my decisions are made fairly and based on the best possible information available;
- ensure that at all times I remain accountable for, and strive to improve, my professional competencies and quality of work;
- work in a cooperative and positive manner with my colleagues;
- ensure that Community Care Options resources are not used improperly; and
- always act respectfully towards, and in the best interests of, those people who are users of our services.

#### 2.0 Compliance with Legal Requirements

All persons engaged by Community Care Options are bound by legislation relevant to the provision of services to the aged, children, and people with disabilities. This includes, but is not limited to, the following:

- ✓ The Aged Care Act 1997
- ✓ Aged Care Principles 1997
- ✓ Children and Young Persons (Care and Protection) Act, 1998
- ✓ The Disability Services Act 1993
- ✓ National Disability Standards
- ✓ NSW Health Records and Information Privacy Act 2002
- ✓ Australian Privacy Act 2001
- ✓ NSW Privacy and Personal Information Protection Act 1998
- ✓ Aged Care Quality Standards
- ✓ NDIS Code of Conduct
- ✓ NDIS Practice Standards and Rules (2018) and Quality Management Framework

Community Care Options is committed to upholding the principles, provisions and requirements of all relevant legislation concerning the provision of care and services for people in its care.

#### D.7 Commitment

I agree to familiarise myself and comply with legislation and relevant standards of service provision relevant to my areas of responsibility.

#### D.7 Suitability of Persons

Legislation requires that the persons engaged in managing and delivering care services must be assessed and approved as 'suitable'.

#### 3.1 Commitment

I acknowledge the need to assess my suitability as a person to be involved in the provision of care and services to the Community Care Options target group.

In particular, I acknowledge the need to establish that I:

- am 'safe' to have direct contact with people in need of care;
- understand and am committed to the principles for administering the legislation relevant to the care I provide;
- am able to provide care in a way that meets the standards of care defined by the legislation;
- understand the policies, practices and procedures implemented by Community Care Options to ensure that the care provided meets the standard of care requirements; and
- will complete any training reasonably required to be able to properly provide this care.

For the purposes of establishing my suitability, I agree to:

- provide written consent for criminal record checks and working with children checks to be conducted every three years;
- provide substantial proof of my identity such as original copies of my birth certificate, passport or driver's licence, and, where relevant, proof of a change of my surname such as marriage or divorce certificate, that can be sighted and copied by Community Care Options;
- immediately disclose any changes to my criminal or other histories such as a new charge or conviction, to my Manager;
- immediately disclose changes to address and contact details to my Manager;
- provide original copies of my driver's licence, car registration, comprehensive car insurance, and current first aid certificate when these expire and are renewed, that can be sighted and copied by Community Care Options;
- provide evidence of training or qualifications if requested by Community Care Options.

#### D.7 Meeting the Standards of Care

All persons engaged by Community Care Options are directed to provide daily care and services to our clients in accordance with the legislative standards and as directed in the Community Care Options Policy and Procedures Manual.

#### 4.1 Commitment

I am committed to playing my part in ensuring that our services meet the relevant standards. In fulfilling this commitment, I agree to:

- provide daily care and services to people strictly in accordance with the legislated standards;
- support my colleagues in meeting these standards;
- avail myself of supervision, training and support in relation to how daily care and services can be provided in ways that conform with the relevant standards;
- play my part in providing the best possible care and performing my duties in ways that are responsible, transparent and accountable.

In keeping with the relevant standards and within the areas of my responsibility as detailed within the Community Care Options Policy and Procedures Manual, I agree to:

- respect people's dignity and rights at all times;
- meet people's needs for physical care including adequate food, clothing and shelter;
- provide emotional care that allows people to experience being cared about and valued in ways that contribute to their positive self regard;
- cater for people's needs relating to their culture and ethnic background;
- meet people's material needs relating to their schooling, vocational, physical and mental stimulation, recreation and general living;
- provide people with education, training or employment opportunities relevant to their age and ability;
- provide people with positive guidance when necessary to change inappropriate behaviour, excluding whatsoever techniques for managing behaviour that include corporal punishment or punishment that humiliates, frightens or threatens them in a way that is likely to cause emotional or physical harm;
- provide or arrange for people to receive dental, medial and therapeutic services necessary to meet their needs;
- provide opportunities for people to participate in positive social and recreational activities appropriate to their developmental level and age;
- encourage and assist people to maintain family and other personal relationships for purposes of, and to the extent determined by, each person's support plan; and
- if the person has a disability, provide care and help appropriate to their level of need and in the least restrictive manner possible.

#### 5.0 Reporting Matters of Concern

#### **5.1 Commitment**

I agree to:

 report matters of concern in accordance with the legal requirements (including EEO and WH&S) and fully support the rights and responsibility of other persons engaged by Community Care Options to do so;

- not act nor behave in a way that deliberately discourages other persons from reporting matters of concern or that alienates or vilifies colleagues who may have reported matters of concern; and
- play my part in promoting an environment in which my colleagues and I feel encouraged and supported in reporting matters of concern.

I acknowledge the commitment of Community Care Options to support those who report matters of concern and will, if required, avail myself of this support.

#### I agree to:

- faithfully and honestly report any matters of concern that I am aware of or reasonably suspect;
- not falsely report matters of concern for vexatious purposes; and
- fully, openly and honestly cooperate with any authorised investigation of a reported matter of concern.

I will adhere to the guidelines detailed within Community Care Options Policy and Procedures Manual for reporting any matter of concern related to people in receipt of our services. In conformance with these guidelines, I will honestly and openly provide all information required to the best of my knowledge.

#### 6.0 Confidentiality

#### **6.1 Commitment**

In keeping with legislative requirements, I accept that I must not access, use or disclose any official information (such as information contained on a case file) without proper authorisation or lawful reason.

I accept that official information must only be used for work related purposes and not for personal benefit.

I will ensure confidential information is not, and cannot, be accessed by unauthorised people. I will only discuss sensitive information, both within and outside of the organisation, with people who are authorised to have access to the information. If I am unsure about who has proper authority, I will discuss the matter with my Manager. I will not discuss confidential details in public places or forums.

I will maintain the secure storage of data such as files and I will report all unauthorised access to my Manager.

#### 7.0 Discrimination and Harassment

In keeping with legal requirements and values of Community Care Options, all persons engaged by Community Care Options are required to value diversity and to refrain from all actions and behaviour that constitute harassment or discrimination.

#### 7.1 Commitment

In keeping with legal requirements and the values of Community Care Options, I agree to value diversity.

I will not harass nor discriminate against my colleagues, users of our services or members of the public on the grounds of:

- sex;
- marital status;
- pregnancy;
- age;
- race;
- ethnic or national origin;
- political or religious conviction;
- physical or intellectual disability; or
- sexual preference.

I am aware that such harassment and discrimination may be unlawful and I expose myself to prosecution in the event of these behaviours or actions occurring.

#### 8.0 Conflicts of Interest – including financial and other Private Interests

A conflict of interest exists when it is likely that a person could be influenced, or could appear to be influenced, by a personal interest in carrying out their responsibilities when engaged by Community Care Options. A conflict of interest that leads to biased decision making may constitute corrupt conduct.

Community Care Options requires that all persons within the organisation avoid having any financial or other interests that may cause a conflict between personal interest and work responsibilities, whether real or apparent.

#### **D.7 Commitment**

I recognise that I am required and committed, to avoid conflicts of interest that interfere, or appear to interfere, with my capacity to impartially perform my work responsibilities and duties with integrity.

In particular, I will not use my position to gain any advantage for myself, members of my family, associates, friends or the like.

I understand that some interests that may give rise to a conflict of interest include:

- personal beliefs or attitudes that influence the impartiality and objectivity of advice that I may give;
- personal relationships with users of our services or their close associates that go beyond the level of a professional working relationship;
- other employment that compromises my integrity and/or the integrity of the organisation; and

 financial interests in a matter involving the organisation, such as a contract for the supply of goods or services, or having friends or relatives with such an interest.

Because I may be the only person aware of the potential for a conflict of interest, it is my responsibility to avoid any financial or other interest that could compromise the impartial performance of my responsibilities.

Where an unavoidable conflict of interest arises, or has the potential to arise, I am aware that I must advise my Manager in writing as soon as possible.

I will not solicit or accept gifts for my family or myself where the gift implies that I should favour a user of the service or other person, or where it may appear that I could favour a user of the service or other person in any way. However, I may accept token gifts such as chocolates, flowers or mementos that are offered as an expression of appreciation, provided the gift is less than approximately \$10.00 in value.

Whenever I am unsure about whether I should accept a gift or benefit, I will consult with my Manager at Community Care Options. Community Care Options may allow me to accept a token gift or benefit provided they are satisfied that I, the client or the organisation will not be, or appear to be, compromised in the process.

Where I, am offered a substantial gift or benefit, I will immediately inform Community Care Options.

#### D.7 Professional Relationships

Community Care Options requires that persons engaged by the organisation always act in the best interests of people and their families, who are and have been users of our services.

As such it is expected that all persons conduct their relationships with people, their families and external organisations in a professional and ethical manner.

#### 9.1 Commitment

I recognise my responsibility to maintain a professional relationship with all people and their families, who are and have been users of our services.

I therefore will not engage in any abusive or exploitive behaviour with these people.

I recognise that I have a responsibility to maintain professional relationships with organisations outside Community Care Options that I may have cause to deal with in the delivery of care. I therefore will conduct myself in a professional manner at all times when liaising with such organisations and will not engage in abusive behaviour.

I will not approach referring or funding bodies without specific authorisation from Community Care Options.

I commit to treating all people and members of their families in a respectful and caring manner that acknowledges their human rights, cultural background, gender and stage of personal development.

Where a person with whom I have a pre existing familial or personal relationship comes into contact with the organisation, I will immediately disclose this information to my Manager and I will not be involved in any casework decisions relating to the person.

#### D.7 Public Comment and Community Participation

Community Care Options respects the rights of persons engaged by the organisation to make public comment and enter public debate on political and social issues as private individuals.

As persons engaged by Community Care Options however, persons must not make statements on behalf of the organisation without prior approval by the CEO and must, at all times, respect the rights to privacy held by users of our services.

In addition, Community Care Options respects the rights of persons engaged by the organisation to participate, as private individuals, in party political activities, community organisations, charities and professional associations, unless this participation results or has the potential to result in a conflict of interest.

#### 10.1 Commitment

I understand that although I have a right as a private individual to make public comment and enter public debate on political and social issues, I must not make statements on behalf of the organisation without prior approval from the CEO and I must, at all times, respect the rights to privacy held by current and former users of our service.

To avoid the misunderstanding that any comment made in a private capacity is an official comment on behalf of the organisation, I will preface my remarks with a statement that the comments are made in a private capacity and do not represent the official view of Community Care Options.

I will confine my public comments to factual information and, as far as possible will not express an opinion on official policy or practice unless required to do so by the circumstances of a particular situation eg a court of law.

I accept that approval is required from the CEO before I make any comment or provide any information to the media on matters concerning Community Care Options.

Because I understand that users of our service, both past and present, and their families have a right to privacy, I will not discuss matters with the media that may adversely affect them.

I will ensure any participation in any party political activities does not conflict with my responsibilities to serve the organisation in a politically neutral manner. I accept that this is important because of the need to maintain confidence in the impartiality of the actions I take and the decisions I make.

I recognise that I am free to participate as a volunteer in community organisations, charities and professional associations, subject to the requirements of this Code of Conduct.

#### 11.0 Compliance with Policies and Procedures

Policy directions, practice guidelines and operational procedures are documented and regularly updated within the Policy and Procedure Manual and/or are issued to specific work groups.

#### 11.1 Commitment

I will inform myself about and comply with all policy directions, practice guidelines and operational procedures relevant to my areas of responsibility, as documented within the Policy and Procedures Manual or as issued.

I will give effect to all lawful policy, practice and procedural directions, whether or not I personally agree with or approve of them. Where I strongly hold a genuine moral objection, I may request to be relieved of responsibility for the implementation of the policy, practice or procedural direction.

If I have a strong objection to any policy, practice or procedure, I have the right to express my objection either verbally or in writing to the CEO.

I will always act in accordance with my legal duty of care to users of our service.

#### 12.0 Administration and Training Requirements

Community Care Options requires staff to provide regular reports to the organisation concerning the progress of clients.

Community Care Options requires staff to undergo specific training in order to provide the best service on behalf of the organisation, and to facilitate the personal development of those in our care.

#### D.7 Commitment

I agree to:

- facilitate individual client support plans in consultation with the relevant Support Coordinator;
- maintain accurate documentation in relation to each client;
- provide documentation to Community Care Options at any time that the organisation requests this information;
- utilise the individual planning format and associated client information documentation as outlined by Community Care Options in the Policy and Procedure Manual or Program guidelines;
- develop, implement and maintain an individual plan for each person receiving a service in consultation with other stakeholders utilising the format provided;

 participate in performance review processes and competency assessment of my skills.

With regard to training I agree to:

- maintain a current knowledge of best practice within the discipline for which my services have been engaged (Support Coordinators);
- attend support and supervision meetings where practical (Support Workers);
- attend quarterly 3hr training workshops (Support Workers);
- attend monthly work group meetings;
- attend any other training as deemed appropriate by the organisation for the development of my skills and knowledge.

#### D.7 Guide to Ethical Decision Making

Community Care Options requires all persons engaged by the organisation to act ethically at all times.

Ethical behaviour means acting in line with the principles outlined in the Overview of Professional Commitment.

#### 13.1 Commitment

I recognise that I am required, and am committed, to act ethically at all times. In keeping with the principles outlined in the Overview of Professional Commitment, when making a decision that requires ethical consideration, I will consider the following:

- the lawfulness of the decision or conduct I am contemplating;
- the consistency of my decision or actions with the vision, mission and values of Community Care Options;
- the consistency of my decision or actions with the spirit, intent, provision and requirements of legislation concerning the delivery of services to Community Care Options, particularly the aged, children and people with a disability, as defined by the relevant legislation;
- the impact of my decisions or actions on both the immediate and longer term safety and well being of Community Care Options clients and their families; my colleagues, the organisation and other parties;
- any conflict of interest or personal gain at organisational expense that may arise from the decisions or my conduct; and
- the capacity of the decision or conduct to be justified and withstand public scrutiny.

#### Conclusion

#### **Breaches of the Code of Conduct**

I understand that breaches of the Code of Conduct may be dealt with through Conduct Management processes by the organisation and if serious and in breach of relevant legislation by cessation of the engagement of my services by the organisation. Where a criminal breach occurs, the matter will be referred to police for investigation and, subject to the outcomes of this investigation, prosecution.

#### Commitment

I recognise that if I have any doubt as to the appropriate course of action to be taken in any circumstances, I have a responsibility to discuss the matter with my Manager.

I understand that this Code of Conduct will be periodically reviewed. I will remain informed of any alterations that are made to take into account changed circumstances or new situations.

I agree to review and sign the Code of Conduct every two years or as requested to do so by the organisation.

# **Code of Conduct and Ethics**

# **Acknowledgement of Receipt & Statement of Agreement**

I hereby acknowledge that on	_ I received a copy of the Code
of Conduct and Ethics for persons engaged in the o	delivery of services by
Community Care Options.	
I have read this Code of Conduct, I understand its	contents and have had the
opportunity to clarify any issues with my Manager.	
I agree to abide by this Code and the principles set	out within.
I understand that breaches of this Code of Conduct cessation of further engagement of my services. We expose myself to criminal prosecution.	·
I understand that a signed copy of this statement of my file.	f commitment will be placed on
Employee Name (Print):	
Position:	
Signature:	
Date:	
Received by Manager:	
Name (Print):	
Position:	
Signature:	
Date:	
Employee Copy	

# **Code of Conduct and Ethics**

# **Acknowledgement of Receipt & Statement of Agreement**

# 2.6 Equal Employment Opportunity (EEO) & Anti-Discrimination

# **Definitions**

#### Discrimination

The Workplace Relations Act 1996 prohibits employment termination for a discriminatory reason defined as -

Race Colour Marital status Impairment Religion Sexual preference Family responsibilities National extraction Age Political opinion

Social origin Sex

Pregnancy

The NSW Anti-Discrimination Act 1977 prohibits discrimination in the workplace on the basis of an employee's actual or perceived -

Disability Pregnancy Age

Homosexuality Sex Race Transgender status Marital status Carers responsibilities

Or their association with someone with the above actual or perceived grounds.

# Carer's Responsibilities

It is unlawful to discriminate against an employee because of their responsibilities to care for -

- The employee's child or the employee's partner's child;
- A child or adult the employee is the legal quardian or authorised carer of or has parental responsibility for; and
- An 'immediate family member' which means the employee's partner, grandchild, sibling, parent, or grandparent.

# References to Employee, Child, Partner, Siblings, Parents, Grandparents and Grandchildren

'Employee' includes – a current employee, or a job applicant.

'Child' includes - own child, adopted child, foster child, step child, or child under legal quardianship or parental responsibility.

'Partner' includes the employee's – current partner, former partner, partner's current or former partner, husband or wife, de facto same sex partner, or de facto opposite sex partner.

'Sibling' includes the employee's – own brother or sister, half brother or sister, step brother or sister, adopted brother or sister, and brother or sister by foster arrangement.

'Parent',' Grandparent' and 'Grandchild' includes – own parent, grandparent and grandchild; half parent, grandparent and grandchild; step parent, grandparent and grandchild; adopted parent, grandparent and grandchild; partner's parents, grandparents and grandchild; parent, grandparent and grandchild by foster

arrangement; and parent, grandparent and grandchild under legal guardianship or parental responsibility.

#### **Victimisation**

Victimisation of a complainant for making a discrimination or harassment complaint is against the law.

#### Vilification

Vilification is against the law. Vilification is defined as a public act that involves – inciting hatred towards; serious contempt for; or severe ridicule of – a person or group of persons on the basis of their – race; transgender status; homosexuality; or HIV/Aids status.

# **Position Statement**

It is the policy of Community Care Options to comply with all state and federal antidiscrimination legislation and to ensure that all employees are treated equally regardless of their actual or perceived age, sex, race, marital status, pregnancy, disability, homosexuality, transgender status or carers' responsibilities.

The organisation agrees that equality in employment opportunity and a discrimination-free workplace are fundamental rights that must be applied to every aspect of work life. It is also good management practice, supported by legislation.

EEO and Anti-Discrimination principles apply to conditions of employment, relationships in the workplace, the evaluation of performance and the opportunity for training and career development.

By promoting EEO and Anti-Discrimination in the work life of staff, the quality of services and workplace productivity will be enhanced.

# Legislation

- ✓ Disability Discrimination Act 1992 (Cth)
- ✓ Disability Discrimination Act 1992 (Ctn)
  ✓ Human Rights & Equal Opportunity Commission Act 1986 (Cth)
  ✓ Racial Discrimination Act 1975 (Cth)
  ✓ Sex Discrimination Act 1984 (Cth)
  ✓ Equal Employment Opportunity Act 1987 (Cth)

- ✓ Industrial Relations Act 1996 ✓ Anti-Discrimination Act 1977

# **Operational Procedures**

In summary, EEO and Anti-Discrimination involves –

Selection based on merit -

- Ensuring that employment conditions and opportunities to be a carer are fair and equitable;
- Assisting all employees to achieve their full potential with respect to their positions;
- Ensuring that discrimination in the form of harassment does not occur in the workplace; and
- Ensuring that employees have equal access to training and career

development.

## Community Care Options are committed to -

- The elimination and absence of discrimination and harassment in employment and on employment application in accordance with state and federal legislation;
- The promotion of opportunity and affirmative action for people who
  - are of Aboriginal and Torres Strait Islander descent;
  - are from different cultures and language groups including people from non nglish speaking backgrounds;
  - are women; and
  - have a disability.
  - The communication of the EEO & Anti-Discrimination Policy to all persons within the organisation through policy distribution and training programs to address and eliminate discrimination, harassment and victimisation;
  - Ensuring vilification does not occur in the organisation;
  - Reviewing personnel practices within the organisation including
    - recruitment techniques:
    - selection criteria;
    - training and staff development programs;
    - promotion;
    - transfer policies and employment conditions;
    - identifying and eliminating any discriminatory practices;
    - where possible, setting goals or targets to measure the success of the policy in achieving its objects;
    - regularly reviewing all organisation policies and practices to ensure consistency with this policy; and
    - to providing an effective mechanism for investigation and redress at every level of the organisation in relation to any complaints.

## In practice, this means that -

- All aspects of workplace practices will be further reviewed to identify
  possible sources of direct and indirect discrimination. While direct
  discrimination is relatively simple to identify, indirect discrimination can
  usually only be identified by analysing patterns of outcomes from which
  causes of discriminatory patterns can be inferred.
- Direct discrimination is when it is quite clear that employees are treated differently because of a discriminatory reason.
- Indirect discrimination is when employees are treated the same as everyone else, but doing this disadvantages them more than other employees because of a discriminatory reason.
- Management and all employees have a responsibility to comply with Anti-Discrimination and harassment prevention principles in the workplace.

#### **Practices**

Community Care Options is committed to EEO and Anti-Discrimination practices in the workplace including –

# Recruitment

The recruitment process ensures candidates have equality of opportunity.

#### Advertising

Advertisements for vacancies are circulated as widely as possible, both internally and externally, to increase the pool of potential applicants from all sectors of the community.

# Job Description

Are current and accurate.

#### Selection

Is based purely on skills and merit.

## **Forms**

Comply with the requirements of relevant legislation.

# Induction

All new staff receive a formal induction to the organisation. Employees are provided with the EEO and Anti-Discrimination Policy, Harassment Prevention Policy and Workforce Grievance Policy initially during induction and on each occasion that such policies are reviewed and revised.

#### Language

Language used in both written and verbal communication is not discriminatory.

# Staff Training and Development Management

A uniform and non-discriminatory system of funding and administrative procedures for staff training and development operates. All staff have equal access to available training.

# EEO and Anti-Discrimination Awareness

All staff training and development courses comply with EEO and Anti-Discrimination principles. All staff receive regular training regarding Anti-Discrimination, Harassment and Grievance principles and practices.

# **EEO and Anti-Discrimination Responsibilities**

All supervisory staff are aware of their responsibilities under this EEO and Anti-Discrimination policy and under state and federal legislation.

All staff are made aware through this policy and through regular training of their rights and responsibilities regarding compliance with Anti-Discrimination principles.

#### **Conditions and Treatment**

The organisation ensures fair and equitable employment conditions and treatment in the workplace. In all workplace matters staff are treated equally on the basis of skills and merit. The organisation is committed to ensuring workplace relationships are discrimination-free.

#### **Workforce Facilities**

Where necessary, possible and practical the work environment is modified to accommodate the needs of particular categories of staff in order to achieve their

full potential.

#### **Grievance Resolution**

Community Care Options has a fair and effective policy and procedure for the resolution of grievances. Please refer to the Workforce Grievance Policy for full details.

#### **Harassment Prevention**

Community Care Options recognises its responsibility to ensure the work environment is free from discriminatory harassment and takes active measures to develop and implement such policies.

Employees' and management's rights and responsibilities regarding Harassment are detailed in the Harassment Prevention Policy.

# **Discrimination-Free Workplace**

It is the policy of Community Care Options that discrimination and/or harassment of employees or employment applicants in any form by management, other employees or by any person connected to the organisation will not be tolerated.

# **Discrimination Complaints**

When making a discrimination complaint, employees and management should utilise the workforce dispute and grievance policy and procedures.

- Victimisation of a complainant will not be tolerated;
- All complaints and grievances will be treated seriously and investigated promptly, confidentially and impartially;
- No assumptions are made about the validity of complaints and grievances before they are investigated; and
- Complainants are encouraged to use the Grievance or Complaint Form when reporting an incident of discrimination.

#### Reviews

All workplace practices and policies are regularly reviewed to ensure compliance with current EEO and Anti-Discrimination legislation requirements.

# 2.7 Workforce Dispute and Grievance Policy

#### Definition

A grievance is any work related problem, concern or complaint raised by a staff member for resolution by the organisation.

# Legislation

- ✓ Anti Discrimination Act 1991
- ✓ NSW Industrial Relations Act 1996

#### **Position Statement**

CCO is committed to fostering productive, equitable and harmonious workplaces. One way to do this is by ensuring that work related concerns and grievances are managed promptly, impartially and fairly. It is the policy of Community Care Options that all staff have access to a formal mechanism for resolution of workforce Grievances. The emphasis in Grievance handling is on resolution through mediation. This Workforce Grievance Policy provides a mechanism whereby employees can raise and resolve issues that are of concern to them.

# **Operational Procedures**

This Workforce Grievance Policy should be used when an employee has a concern or problem with –

- work;
- the work environment;
- Community Care Options and/ or Community Care Options systems;
- management and/ or staff; and
- persons external to Community Care Options such as clients, relatives or contractors.

An employee's Grievance may be about any act, omission, situation, treatment or decision that is perceived as unfair, discriminatory or unjustified.

Grievances can range in severity from matters that can be immediately resolved to complex matters that require extensive investigation.

Examples of an employee's Grievance may include, but are not limited to -

- Discrimination, harassment or victimisation;
- Job design;
- Staff selection practices or promotions;
- Employment conditions or work practices;
- Development or training;
- Higher duties or work allocations;
- Staff evaluation or performance management;
- · Preferential treatment; and
- Workplace conflicts or bullying.

Definitions – Complainant – The employee who has, and reports a Grievance.

Grievance Resolution Facilitator – the person who may initially receive the Grievance, in most cases an immediate supervisor.

Respondent – the employee who is the subject of the Complainant's Grievance.

Community Care Option's Grievance Procedures are -

#### Confidential

Only the Complainant, Respondent and persons directly involved in receiving, investigating and resolving the Grievance will have access to information about the Grievance. Such persons will keep this information strictly confidential. Any documentation regarding the Grievance will be kept confidential.

## Impartial

Both sides will have a chance to tell their side of the story. No assumptions will be made and no action will be taken until all relevant information has been collected and considered.

# Repercussion-free

No action will be taken against anyone for reporting a Grievance or helping another person to report a Grievance, except where a grievance is found to be malicious or without foundation.

#### Prompt

All Grievances will be dealt with as quickly as possible. We aim to resolve all Grievances within a reasonable time frame.

Guiding Principles – early intervention and local, informal resolution wherever possible.

CCO values reflected in this policy and procedure are – respect and fairness.

This policy covers all workplace participants, be they permanent, temporary, casual, trainees or on placements.

#### Responsibilities

#### All staff

For a harmonious work environment, all staff members share the responsibility to treat others in the work environment with respect. In particular staff are required to

- maintain a work environment free of conflict, harassment and discrimination
- treat co-workers with respect and in a responsible, professional manner
- raise issues/concerns with your supervisor at an early stage
- provide as much information as possible to ensure an efficient and effective process to follow through with the resolution of any grievance.

Staff who have a grievance - raise your grievance early because -

- it is easier to investigate and resolve if reported early
- it causes less discomfort or dissatisfaction to you and less disruption to work performance and workplace relationships
- it is less likely to escalate into a stubborn or more complicate set of problems

• it may require referral to another person or agency, and it may involve important issues concerning the rights of others, such as clients.

Talk to the other person – try to do this at the time the issue arises.

Tell your supervisor – if unable to resolve the issue or concern with the other person.

Write it down, where necessary – if raised verbally and not resolved. See Grievance Notification Form.

Supervisors and Managers - have additional responsibilities -

- to identify and resolve causes of concern to workplace participants before a grievance arises, and
- to promote and contribute to the development of a workplace free of unfair treatment, victimisation, harassment and discriminatory practices.

In most cases grievances will be investigated and resolved by the immediate supervisor. Where the grievance relates to a concern about a supervisor, or the supervisor feels unable to handle the grievance objectively, then the grievance should be referred to the next level manager. The CEO will facilitate grievances that relate to Managers. Grievances pertaining to the CEO will be referred to the Board of Management.

# **Steps to Grievance Resolution**

**Approach** – Try to resolve the issue/concern directly with the other party or parties concerned.

**Report** – Take the grievance to your supervisor (Grievance Resolution Facilitator) and identify what you want to happen. The grievant (or complainant) should state verbally or in writing (if requested, or if a complex matter) - the details of the grievance and what has occurred, the grounds of the grievance, who or what may be responsible, any steps the complainant may already have taken in an attempt to resolve the grievance, and the desired or anticipated outcome.

**Confirm** – The Grievance Resolution Facilitator clarifies the grievance with the complainant. Where the supervisor cannot be the Grievance Resolution Facilitator (because they cannot be impartial or are directly involved), they should inform the complainant and, with their approval, refer the matter to the next level of supervisor or to an agreed independent Grievance Resolution Facilitator. The supervisor may consult with the Operations Manager or the CEO confidentially on how to proceed with the grievance and whether the grievance involves employer liability, or alleged criminal or disciplinary action.

**Investigate** – The Grievance Resolution Facilitator informs the other party or parties, during and interview or in writing, of the nature of the grievance and gets from them their understanding of events. If there is more than one other party, the Grievance Resolution Facilitator will interview them separately.

**Mediate** – The Grievance Resolution Facilitator will endeavour to attain a resolution of the grievance, through effective listening and use of conflict resolution techniques or mediation with the parties. The Grievance Resolution Facilitator, in liaison with the complainant, arranges a meeting or meetings for discussion and resolution of the grievance as necessary.

If the grievance is still unresolved, third party intervention may be needed. A mediator might be engaged to help if the issues appear to be more intractable and where a skilled independent mediator could help. All parties must agree to this action.

# Most grievance should be resolved at this level.

The Grievance Resolution Facilitator should advise all parties of the outcome.

A Grievance Resolution Facilitator should not discuss the grievance with any other person, or take action to investigate or resolve the matter without the complainant's consent, unless the grievance involves –

- disciplinary action
- a criminal matter
- employer liability (WH&S or discrimination)
- organisational policy issues.

As a complainant you can expect -

- · to have your grievance resolved as quickly as possible
- to be listened to and taken seriously
- to feel comfortable to raise your concerns and needs
- to have your confidentiality respected
- to be consulted about how your grievance should be handled.

If you are involved in the grievance resolution process and/or are required to prepare a report concerning another member of staff, you are protected against any action of defamation, providing you –

- act in accordance with this policy and procedures
- are not motivated by a desire to damage others
- do not publish or make information about the grievance available to persons who have no legitimate interest in receiving it
- if your grievance is related to the notification of alleged corrupt conduct by any other workplace participant then you may have protection under the Protected Disclosures Act 1994.

Support to lodge a grievance – before lodging a grievance you may wish to seek information or gain support by meeting with your supervisor to discuss the issue. The Operations Manager or the CEO can advise on personnel policy and procedure aspects of your grievance if necessary.

Issues and concerns can be raised with work place representatives of either the WH&S committee (if a WH&S issue) or the Quality Committee (where the issue may affect other staff members or organisational policy, procedure or practice). Complainants and respondents may seek to have a support person from

within or outside of the work place or have a union delegate present during discussions.

Types of outcomes that can be expected when a grievance is substantiated –

- the other party not repeating the action that caused concern
- the grievant being offered developmental opportunities to compensate for lack of opportunities
- an apology (written or verbal) from the other party
- addressing communication problems between both parties
- the Grievance Resolution Facilitator counselling the other party or parties for inappropriate behaviour
- development of a written contract for improved behaviour on the part of the other party
- reduction of the other party's privileges
- the other party or parties to attend training targeting appropriate policies
- disciplinary action or criminal proceedings if appropriate.

It is the responsibility of the Grievance Resolution Facilitator to determine if the grievance can be handled under this mechanism.

Even when the Grievance Resolution facilitator accepts that there is a grievance, it may be declined after initial inquiries for any of the following reasons –

- there have not been sufficient and reasonable attempts to resolve the grievance informally
- action has commenced to remedy the situation
- the grievance is frivolous, vexatious or trivial
- the thing complained about happened too long ago to be significant or able to be dealt with now
- the person making the grievance does not have sufficient interest in or connection with the thing complained about
- the grievance concerns legitimate and reasonable supervision and management of staff.

Record Keeping – all documents pertaining to the grievance, investigation and outcomes will be securely stored and kept confidential by the Grievance Resolution Facilitator.

Where a grievance is declined for one of the reasons as identified above then the Grievance Resolution facilitator will record the reasons for declining a grievance and notify the grievant of that decision. When the grievant and the other party or parties agree that the grievance resolution process has resulted in a final outcome then the Grievance Resolution Facilitator will complete a Grievance Report (see attached).

The Grievance Report is sent to the CEO for storage and extraction of statistical information where needed.

The grievance documentation is not stored on individual's personnel files but is held by the Operations Manager in a secure and confidential file.

The Grievance Resolution facilitator should monitor the outcome of the grievance resolution, with agreement from the grievant at least monthly after resolution for two months. They should monitor the behaviour of staff to ensure that no victimisation or unpleasantness results from the grievance process.

Appropriate action should also be taken in the workplace to ensure similar behaviour does not re-occur eg implementation of a Code of Conduct or revision of relevant procedures if necessary, placing the EEO policies in a conspicuous place, organising appropriate training, reviewing local procedures or organisation of the workplace.

Time frames – depending upon the complexity of the matter and the number of parties involved to be interviewed, grievance resolution should take between 1-4 weeks. A grievance should be normally resolved within a maximum of four working weeks.

When the grievance involves an allegation of a more serious nature suggesting possible misconduct by a staff member the matter will be immediately referred to the CEO and processes and procedures relating to Conduct Management will be implemented.

Training – all supervisors are required to act as Grievance Resolution Facilitators if the need arises and should familiarise themselves with these procedures. It is recommended that supervisors attend appropriate training such as courses on conflict resolution techniques, effective communication, managing diversity in the workplace, selection techniques and EEO awareness, when available.

# Cross Reference and Further Reading

- ✓ Code of Conduct Policy
- ✓ Equal Employment Opportunity (EEO) and Anti Discrimination Policy
- ✓ Harassment Prevention Policy
- ✓ Conduct Management Policy

Schedule for Revision of Policy: WORKFORCE DISPUTE AND GRIEVANCE				
Date Adopted	Outcome	Author	Next Review	Comments
June 2009	Endorsed	D. Ryan	2004	
October 2011	Updated	D. Ryan	2008	
August 2014	Updated	D. Ryan		
December 2016	Updated	D. Ryan	2018	
August 2018	Reviewed	D. Shipman	2021	
December 2020	Reviewed & Updated	D. Ryan	2022	
December 2022	Reviewed & Updated	D. Ryan	2024	

Grievance Notification Form	
(completed by the Complainant)	
Person providing Feedback:	Position:
Nature of Grievance:	
Details of Grievance:	
Please include a description of the Grievance	being reported including:
what occurred	Who else saw or heard it occur
When it occurred	Any other details you consider relevant
What would you like the outcome or resolu	ution of your Grievance to be?
	our Grievance is fully described. Please use an
additional sheet of paper if necessary and atta	
Yes, the above describes my Grievance full	ly and accurately:
Complainant's signature	
Date	

#### **GRIEVANCE REPORT**

This report to be completed by the Grievance Resolution Facilitator who has dealt with the grievance, and sent to the CEO upon completion of the grievance.

This Grievance Report is to carry no identifying information on the grievant or respondent. This data will be statistically analysed to identify and rectify any problem trends, by monitoring any patterns that can be addressed by cultural awareness or other training.

Tick the categories which best describe the issues involved in the grievance. Discrimination/harassment on the basis of -□ race ☐ marital status □ gender □ age □ homosexuality □ disability Interpersonal conflict WH&S П Management practices Victimisation □ Vilification Industrial relations issues □ Recruitment/selection Access to training/development opportunities □ Other (please specify) -Date grievance lodged - \_\_\_\_\_ Number of persons who have dealt with the grievance - \_\_\_\_\_ Date final outcome reached -YES □ NO 🗆 Was disciplinary action involved? **The Grievant** □ Male ☐ Female ☐ Person from CALD background ☐ Aboriginal/Torres Strait Islander ☐ Person with a disability

☐ Resolved What are the terms of the	ne resolution?	
What follow up action is	to take place?	
□ Not Resolved Outline reasons		
Has the grievant been a □ Yes □ N	dvised of the right to proceed with a	other options?
☐ Withdrawn Outline reasons		
□ <b>Unsubstantiated</b> Outline reasons		
Have the grievant and re	espondent been advised?	□ Yes □ No
Give details	osponaciii been aavisea:	L 163 L 146
Has the grievant been a □ Yes □ N	dvised of the right to proceed with a	other options?
Grievance Resolution Facilita	ator	

# 2.8 Bullying and Harassment Policy

#### **Definitions**

Bullying behaviours are repeated, unreasonable and offensive, humiliating or undermining in nature, whether directed towards a person or group of persons.

Bullying behaviour is identified by -

- a repeated pattern of behaviour which may also consist of diverse incidents over time
- inappropriate, unreasonable and possibly aggressive behaviour
- risking physical and/or psychological harm to you.

One-off incidents of bullying may offend or upset people but they are not bullying. However, a single incident can escalate into bullying and should be reported through the Workplace Grievance and Dispute Resolution process.

The following behaviours can upset or offend people but should not be confused with bullying –

- differences of opinion
- poor or bad management practices on their own..

Reasonable managerial actions taken in a reasonable way are not bullying and can include –

- transferring or retrenching a worker
- allocating work in line with systems and policies
- disciplinary actions and performance management processes that are handled constructively, not in a humiliating or threatening fashion.

Bullying can include violence and harassment. Where bullying involves assault, or a threat of assault, it may become a police matter. Some bullying behaviour may also be unlawful under other legislation such as Anti-Discrimination laws.

Harassment behaviour may be a single incident that disadvantages a person and includes intimidating and/or targeting another person's sex, pregnancy, race, age, marital status, homosexuality, disability, transgender (transsexual) status or carers' responsibilities.

Harassment in the workplace is a behaviour targeted in the following way -

 material that is racist, sexist, sexually explicit, homophobic (anti-gay) that is displayed at work circulated on paper or by email, or put on a computer or fax machine or on the internet, or in your workspace or belongings.

The following behaviours are considered harassment when targeted towards the sex, pregnancy, race, age, marital status, homosexuality, disability, transgender status or carers' responsibilities of a person –

- verbal abuse, offensive jokes or gestures
- ignoring, isolating or segregating a person or group
- staring or leering in a sexual manner;
- sexual or physical contact or intrusive questions about sexual activity;
- sexual assault (also a crime under the Crimes Act);
- wolf whistling or repeated sexual invitations when the person invited has refused similar invitations before; and
- initiation ceremonies that are sexual, sexist, racist.

If harassment is part of a repeated pattern of behaviour that creates a risk to health and safety, and/or disadvantage, it is considered both harassment and bullying.

#### **Position Statement**

Community Care Options will provide a safe workplace free from bullying and harassment. CCO will maximise employee work health and safety through not tolerating bullying and/or harassment behaviour that could harm the physical. mental or emotional health of an employee. The workplace climate at CCO will value all employees as individuals and treat all employees with dignity and respect as a part of normal workplace behaviour.

# Legislation

- ✓ OHS Act and the OHS Regulation
- ✓ WorkCover NSW✓ NSW Industrial Relations Act 1996
- ✓ Commonwealth Workplace Relations Act 1996
- ✓ NSW Anti Discrimination Act 1977
- ✓ Commonwealth Human Rights and Equal Opportunity Commission Act
- ✓ Commonwealth Racial Discrimination Act 1975
- ✓ Commonwealth Sexual Discrimination Act 1984
- ✓ Commonwealth Disability Discrimination Act 1992
- ✓ Commonwealth Age Discrimination Act 2004

#### Responsibilities

CCO will insure all employees are aware of and understand the nature and undesirable effects of bullying and/or harassment throughout the workplace.

The Work Health & Safety Committee will ensure awareness, and prevention processes are in place concerning bullying and/or harassment behaviours and that reporting and resolution processes are fairly managed. The Grievance Resolution Facilitator will insure prompt, confidential and impartial action will be taken in response to reports of bullying and/or harassment and will follow the Workforce Dispute and Grievance Policy in dealing with issues raised. Employees will not be victimised for reporting complaints.

#### Approach

As a company and as individual employees, CCO will -

model respectful, professional and empowering behaviour through its leadership and management practices.

- promote an expectation of the above behaviours between all employees.
- maintain regular checking processes in the workplace environment to identify bullying or harassment behaviours.
- proactively implement prevention measures against bullying or harassment.
- support employees through a reporting of complaint and resolution process.

Community Care Options promotes EEO, Anti-Discrimination and Harassment Prevention in the workplace through –

- Distribution of relevant organisation policies including the EEO & Anti-Discrimination Policy, Harassment Prevention Policy and Workforce Dispute Grievance Policy;
- Regular training and education for all staff and Managers regarding EEO,
   Anti Discrimination, Harassment Prevention and Grievance procedures;
- Prompt, appropriate and effective action taken upon receipt of Discrimination or Harassment complaints; and
- Regular review of organisation policies and practices to ensure any existing forms of discrimination or harassment in the workplace are identified and removed.

# **Causes of Workplace Bullying and Harassment**

CCO will minimise the causes of bullying and harassment by managing the workplace, workplace conditions, the way that work is organised and the workplace environment according to the CCO Values Statement. This includes –

- Valuing employees equally and as individuals and team members.
- Ethical and professional actions from Managers and employees.
- Encouragement of employee creativity and initiative.
- Eliciting employee views in general and also through formal consultation.
- Continuously practicing good communication amongst all employees.

CCO will be especially aware of employee welfare when these situations occur -

- Restructure or downsizing of the organisation, positions and/or workloads.
- Increasing demands for efficiency and speed
- Review of work schedules
- Defining position and duties descriptions
- Defining CCO organisational and individual employee goals and targets
- Negotiating employment conditions

# **Prevention of Workplace Bullying and Harassment**

CCO will establish WH&S measures to prevent Bullying and Harassment in the organisation, including –

- Maintaining and following a current Bullying and Harassment Policy
- Raising employee awareness of how to recognise bullying, the possible effects of bullying and where to get further information.
- Regular communication to employees about bullying and harassment behaviour. This includes using staff meetings, notice boards, WH&S

- committee meetings, formal training sessions, staff newsletter, the intranet and informal discussion groups.
- Employment practices of recruitment and induction will include information raising awareness of unacceptable bullying and harassment behaviour.
- Maintaining a well publicised complaints reporting and resolution process that is free from victimisation.
- A WH&S annual review of bullying or harassment risk factors.
- Involvement of employees in assessing workplace behaviour and climate
- Provide specific training in 'Preventing and Dealing with Workplace Bullying' for managers.
- Implementing support programs, such as a WH&S Committee work environment monitoring and an Employee Assistance Program (EAP).

# **Operational Procedures**

# **Reporting and Resolution Processes**

CCO will utilise the Workforce Dispute and Grievance Policy for resolving complaints of bullying. In Summary, there will be a prescribed process of approach, formal report, confirmation, investigation, and mediation undertaken by a Grievance Resolution Facilitator.

The alleged bully should be -

- treated as innocent unless the allegations are proved to be true
- fully informed of the complaint, including the name of the person making the complaint
- given an opportunity to explain their version of events.

The resolution process will -

- treat all reports seriously and act promptly
- not victimise people who report bullying
- support all parties, including during interviews
- be neutral and impartial
- communicate during the length of the process
- be confidential
- be recorded all meetings and interviews documented.

Any party should be able to make an appeal against the findings of a formal investigation. An external body, an independent third party or an external mediator should hear the appeal.

#### **Disciplinary Action**

Should the Grievance Resolution Facilitator believe a complaint of bullying or harassment is founded or involves an allegation of a more serious nature suggesting possible misconduct by a staff member the matter will be immediately referred to the CEO and processes and procedures relating to Conduct Management will be implemented.

#### **Banned Behaviour**

In this workplace certain behaviours are not tolerated, are banned and can result in termination of employment. These include –

- Engaging in any sexual activities at work;
- Touching anyone else's sexual parts of the body;
- 'Initiation rites' that are sexual, or could offend, humiliate or intimidate someone:
- Downloading pornography from the Internet;
- Displaying any pornography or sexual or naked pictures anywhere in the organisation where other employees, relatives, clients, contractors or any visitor to the workplace can see them;
- Stalking an employee, relative, client, contractor or any visitor to the workplace.
- Showing of X-rated videos;
- Strip-o-grams, or any other form of striptease, or naked display of sexual parts of your own or someone else's body; and
- Indecent or sexual assault.

#### **Cross Reference or Further Information**

- ✓ CCO Values Statement
- ✓ Workforce Dispute and Grievance Policy

Schedule for Revision of Policy: BULLYING AND HARRASSMENT				
Date Adopted	Outcome	Author	Next Review	Comments
September 2009	Draft for Review	D Ryan		
April 2011	Reviewed	D.Ryan		
August 2014	Updated	D. Ryan	2016	
December 2016	Updated	D. Ryan	2018	
December 2018	Reviewed	D. Shipman	2021	
December 2020	Reviewed & Updated	D. Ryan	2022	
December 2022	Reviewed & Updated	D. Ryan	2024	

# **APPENDIX One: Examples of Workplace Bullying**

Bullying may include one or more types of behaviour. Some types of bullying behaviour may seem trivial taken on their own, but when they are part of a repeated pattern they can seriously undermine a worker's confidence, self-esteem and health.

Bullying does not necessarily involve intent. Sometimes, 'a bully' may be totally unaware that their behaviour is harmful to others.

Bullying behaviour can be obvious and aggressive, such as -

- behaviour or language that frightens, humiliates, belittles or degrades
- loud verbal criticism
- encouragement to other workers to participate in bullying behaviour
- malicious rumours, gossip, or innuendo.

Workplace bullying can also be subtle and can include behaviour such as -

- deliberate exclusion of a worker from normal workplace activities
- interference with personal property or work equipment
- intimidation by inappropriate personal comment, belittling opinions or unjustified criticism
- offensive jokes, whether by spoken word or email.

Behaviour that treats some people less favourably, or is disempowering, is also bullying. Such behaviour includes –

- assigning meaningless tasks to a worker that are unrelated to their job
- setting tasks that are unreasonably above or below a worker's ability
- deliberately changing work arrangements, such as rosters and leave, to inconvenience a particular worker or workers
- setting timelines that are very difficult to achieve
- deliberately denying access to information, consultation or other resources
- unreasonably blocking promotion, training, development or other work opportunities
- excessive and unreasonable work scrutiny
- removing areas of responsibility without cause.

Workplace bullying can occur at any time when carrying out work related duties or activities, including at workplace related social events. It can be carried out verbally, physically and by letter, email and text messages or in other forms of writing. Everyone has the potential to bully and anyone can be a target.

# **APPENDIX Two: Bullying Checklist**

The CCO Work Health & Safety Committee will manage the annual review of the workplace environment and report the findings of the review to the Management Team. Guidelines for this review are as follows -

1. Bullying and Harassment Policy

Have workers been consulted in the development of policies and procedures to prevent bullying and/or harassment?			
Does the workplace have a bullying and/or harassment prevention policy as a stand-alone policy?			
Do all workers know that the company does not tolerate bullying?			
Are complaints dealt with independently, in a timely way, and kept confidential?			
Can workers make a complaint without fear of reprisal or victimisation?			
Does the workplace provide awareness and skills training on dealing with bullying and harassment?			
Are the policy and procedures monitored and reviewed on a regular basis, and after every bullying complaint?			

# 2. RISK identification

Review of Bullying and/or Harassment organisational indicators -

Do managers and team leaders practice appropriate leadership skills?	
Do managers and team leaders use good interpersonal skills?	
Does the workplace have a 'participative' management style that emphasises	
open communication, support and mutual respect?	
Are there staff shortages or high turnover?	
Are employees leaving CCO reporting dissatisfaction with working relationships?	
Are there employees who are withdrawn and isolated?	
Is there deterioration in relationships between work colleagues, clients or	
management?	
How regular and meaningful is consultation and good communication practiced?	
Is CCO equipment often damaged or is there poor care of working environment?	
Do workplace injuries indicate stress or constant minor physical injury?	
Has there been recent significant organisational change or restructure, or is such	
change pending and has consultation occurred with workers about the proposed	
changes and provided them with an opportunity to influence proposals?	
Has technological change occurred (or pending) and has support or training been	
sufficient concerning the change?	
Has there been a change in management (or pending) and have employees been	
provided with information to help them understand the impact of the change?	
Are there any other changes that might lead to high job instability and uncertainty	
about ongoing employment?	
Is employee morale good and absenteeism low?	
Paviow of high rick amplayons/groups	

Review of high risk employees/groups –

Are there any workers with different religious or political views, or from different racial backgrounds, compared to the majority of the workforce?	
Are there workers in uncertain employment, such as casual and labour hire workers?	
Are there young workers, such as apprentices and trainees?	
Do all employees understand their role and have the appropriate skills to do their job?	
Is there diversity among employees that is not fully accepted by other employees?	

# APPENDIX Three: Advice to Employees for Managing Bullying and/or Harassment

# If you think you are a target of bullying

It may be helpful to discuss your feelings with an independent third party. Some people identify the behaviour quickly, others experience the behaviour for some time before realising that it is bullying. Seek advice from an WHS representative, your Manager or a union representative.

Some want the behaviour to cease immediately, others want the bully punished, and still others choose to ignore the situation. As soon as possible, and if you feel capable, firmly tell the person that their behaviour is not acceptable – and ask them to stop. Ask your Manager to be with you, if necessary.

- Confronting a bully on your own is not easy and may only be effective in the early stages. The longer the bullying goes on, the harder it may become to confront the bully yourself. Remember: some people do not intend to bully and may not be aware how their behaviour affects you.
- If you cannot confront the bully, try writing a memo or email to make it clear why you object to their behaviour. Keep copies of the memo or email, and any replies.
- If you are not able to approach the person directly, or if an informal approach has not resolved the situation, formally report the matter to your Manager, as outlined in the Workforce Disputes and Grievances Policy.

Steps you could take when subject to bullying include –

- logging all incidents of bullying dates, times, nature of incident, details of slurs, accusations, criticisms. Stick to the facts. Keep all records at home, not at work. It is not just the character of the incidents, but the number, frequency and especially the pattern of incidents that can reveal the bullying.
- writing down your feelings at the time of the incident, and your response
- recognising that you may need emotional support and, in some cases, medical support. This should be sought as early as possible.
- logging the incident in the workplace register of injuries should sick leave be required
- keeping copies of all annual appraisals, letters, memos and emails relating to your ability to do the job
- getting a witness to the bullying incidents avoid situations where you are alone with the bully
- finding out if you are the only person being bullied, or whether other people are also affected if others are affected, consider a collective complaint
- knowing your job description and ensure your responsibilities match it
- having an independent witness with you at all meetings regarding bullying incidents, official or otherwise.

If you feel that you are being harassed or discriminated against because of sex, race, pregnancy, marital status, transgender (transsexual), homosexuality (actual or presumed), disability, marital status, age or carer's responsibilities, contact the NSW Anti-Discrimination Board.

# 2.9 Recruitment of Staff

All staff are recruited according to the organisation's Equal Employment Opportunity and anti-discrimination policies. This will apply to all staffing matters (including advertising, selection procedures and employment practices).

Applicants to fill vacancies for permanent positions (whether it is for replacement of existing staff or a new position) will, where appropriate, be sourced in one of the following ways –

The position may be -

- advertised externally (a copy of all advertisements will be retained by Community Care Options).
- advertised internally
- placed with an employment agency/consultant who will refer suitably qualified and experienced staff for the organisation's consideration.

Alternatively, appointments may also be made –

- from an eligibility list which was created for the position after advertisement within the previous six months;
- when existing staff members are transferred to a position at a salary level no greater than their current salary
- when the proposed employment is for one day per week or less.
- At the CEO's discretion for specific or specialised services required internally

## **Aged Care Quality Standards**

✓ Standard 8 – Organisational Governance

#### **National Disability Standards**

✓ Standard 6 – Service Management

#### **NDIS**

- ✓ Core Module 1-4
- ✓ High Intensity Daily Personal activities
- ✓ Support Coordination
- ✓ Implementing Behaviour Support Plans
- ✓ NDIS Rules 2018

Where the proposed employment is a contract period of three months or less. Such contracts may only be renewed for two further terms of three months

#### **Affirmative Action**

The organisation has adopted an affirmative action policy to promote equal employment opportunity for Aboriginal people. Aboriginal applicants for positions will not need to meet all of the essential skills and experience requirements. Appropriate training will be provided for Aboriginal staff where necessary to ensure they have the skills required for their position

#### **Delegation to Recruit**

For the position of CEO of the organisation – the Chairman in consultation with the

Board of Management.

For Members of the Management Team – the CEO.

For all other positions – the relevant Manager will discuss with the CEO and Operations Manager.

It is the responsibility of the Operations Manager to ensure the position description is current and includes duty statement and selection criteria for all positions. (In consultation with the relevant line Manager for the position being recruited).

#### The Selection Panel

Composition of recruitment selection panels for specific positions will be as follows

Support Worker positions -

- A minimum of two people, one of whom is a member of the management team.

All other non-management positions -

- A minimum of three people, one of whom is a member of the management team. Preferably one member external to the organisation (independent) if for a permanent position.

Management Positions other than the CEO position -

 A minimum of three people including: the CEO or representative of the Board; one member of the management team and one person who is not directly associated with the organisation (independent).

# The CEO's position -

 A minimum of three people including: two representatives of the Board; and one person who is not directly associated with the organisation (independent).

## All Selection Panels

- will be composed of both female and male panel members
- represent the diversity of the community by including people from Aboriginal, Torres Strait Island or from a cultural and linguistically diverse background where possible
- all panel members will be involved in both short listing and interviewing.

Recruitment training will be available to any person appointed to a selection panel who is inexperienced in the area.

#### **Recruitment Procedure**

- The Operations Manager is responsible to ensure the recruitment procedure is followed.
- Advertise the position specifying essential and desirable selection criteria;
- Display the selection criteria and position description on the employment page of the organisations' website:
- Direct applicants to the organisations' website where this information is displayed;

- On request, send applicants an application package which includes –
   Background information on the organisation;
   Mission statement, philosophy and values; and
   Copy of the position description.
- Shortlist for interview all applicants who fulfil all the essential requirements according to the selection criteria;
- Draft interview questions and determine criteria for scoring interviewees' answers consistently;
- Arrange an appropriate interview venue and notify interviewees of their interview time;
- Conduct interviews:
- Select the most suitable applicant and an eligibility list where appropriate.
   The eligibility list entitles persons to be considered for a similar vacancy should one arise within the next 6 months;
- outcomes of each interview are documented and signed by each panel member;
- Contact 2 professional referees for the suitable applicant, seeking out their comments on the applicant's ability to fulfil the selection criteria using a referee check list;
- Complete Federal Police check and, where applicable, Working with Children check, NDIS Worker Screeing Check;
- Offer the position to the successful applicant in writing;
- Sign an agreement of employment; and
- Inform the unsuccessful applicants (within 3 working days of the successful applicant accepting the position);
- The Operations Manager has delegation to give feedback on the interview to unsuccessful applicants who request such information.

## **Pre-employment Procedure**

When a new staff member is appointed, the following procedure applies –

- A letter of employment and position description specifying all the terms and conditions of employment is signed by the staff person and the CEO of the organisation;
- The new employee will accept the letter of appointment and position description by signing the acceptance section of both documents;
- The Operations Manager will keep one copy of this letter on the employee's file and the employee will retain one copy for their own records;
- The employee will complete and sign all necessary forms as per their orientation schedule; and
- The new employee's details will be processed and arrangements for payment of wages, superannuation etc.

Schedule for Revision of Policy: RECRUITMENT OF STAFF				
Date Adopted	Outcome	Author	Next Review	Comments
August 2005	Amended	A. Vaughan	2007	
February 2007	Amended	A. Vaughan	2009	
August 2011	Updated	D. Ryan	2013	
August 2014	Updated	D. Ryan	2016	
December 2016	Updated	D. Ryan	2018	
August 2018	Reviewed	D. Shipman	2021	
December 2020	Reviewed & Updated	D. Ryan	2022	
December 2022	Reviewed & Updated	D. Ryan	2024	

# 2.10 Staff Orientation/Induction

# **Aged Care Quality Standards**

✓ Standard 7 – Human Resources

# **National Disability Standards**

✓ Standard 6 – Service Management

#### **NDIS**

- ✓ Core Module 1-4
- ✓ High Intensity Daily Personal activities
- ✓ Support Coordination
- ✓ Implementing Behaviour Support Plans
- ✓ NDIS Rules 2018

#### Each new staff member -

- is given a staff manual which is specific to his or her position and which includes –
  - orientation schedule and time table;
  - Geographical area covered by the organisation;
  - A history of the organisation;
  - Mission statement and philosophy;
  - Management structure;
  - Board of management details;
  - Overview of the policy and procedures manual;
  - Staff roles and responsibilities;
  - Overview of WH&S and EEO policies; and
  - Other policies and procedures relevant to the particular position.
- undertakes staff induction program; and
- receives support and weekly formal supervision for the first 4 weeks.

Wherever possible, a hand-over period between the previous occupant of the position and the new employee will be organised.

# Rostering of Staff

All field staff will be rostered according to the relevant award, EEO, anti discrimination and WH&S policies. When considering staff for the allocation of rostered work, the following will be taken into account –

- The type and time of the service as required by the client
- the particular needs of the client in relation to the field staff (e.g. gender, previous experience with the particular client)
- the WH&S implications of the work i.e. training, age and experience required to complete the tasks
- the availability of different staff members
- the location of the staff member in relation to the client
- work required to meet minimum contract hours for each field staff

When considering individual staff requests to not be rostered for particular times,

the following will be considered -

- availability of work at other times to meet minimum contract hours
- availability of suitable staff to meet clients' needs
- whether the request concerns work-related activities (e.g. attendance at work related training).

#### **Procedure**

Direct care staff are rostered according to the requests for service by clients. The timing of service provision is determined by fixed appointments or events nominated by clients, or by availability of staff. Rostering of staff for the provision of direct service to clients is influenced by the factors outlined in the rostering policy.

The following checklist should be applied when deciding who should be rostered for each service. The table below can be used to audit rostering processes to ensure rostering is carried out in an equitable manner.

Staff member's name:	Yes/No
Date:	
Time of service:	
Available for the type and time of service required by the client	
Meets particular need of client	
WH&S implications addressed	
Lives or is already working in vicinity	
Staff requires work to meet contracted hours	
Another staff member is also available and suitable	
Staff member has other work related commitment at this time	
Staff member prefers not to work at this time	
For casual staff	
Has the staff member worked with the client recently?	
Is this staff member next on the casual pool list?	
Can the staff member be rostered for this service?	

#### Casual staff

A casual pool of staff will be maintained for backfilling when permanent staff are on leave. In order to ensure work is equitably allocated within the casual pool, the following will apply —

- A list of staff will be drawn and maintained
- Any available shift will be offered to the first person at the top of the list, based on the rostering procedure outlined above
- The rostering person will call each person on the list in turn until the shift can be allocated
- The person who is allocated the shift will then assume the last position on the list.
- The next available shift will again be offered to the person at the top of the list
- The list will be reviewed regularly to ensure that members of the casual pool are offered appropriate work, and to ensure no one staff member is disadvantaged by the rostering system.

# 2.11 Staff Supervision and Support

# **Aged Care Quality Standards**

✓ Standard 7 – Human Resources

# **National Disability Standards**

✓ Standard 6 – Service Management

# NDIS

- ✓ Core Module 1-4
- ✓ High Intensity Daily Personal activities
- ✓ Support Coordination
- ✓ Implementing Behaviour Support Plans
- ✓ NDIS Rules 2018

# Supervision

Supervision and support are important to ensure that staff are supported in their work and that their work is carried out effectively and professionally.

Supervision sessions provide an opportunity to follow through on staff development issues noted in staff performance appraisals.

All staff will be provided with regular supervision at least once every two months.

Staff should contact their supervisor if issues arise between supervision sessions which need to be dealt with in between formal supervision sessions.

Management is responsible for the supervision and support of staff.

Supervision will only be provided by persons who have the relevant skills and experience to do so.

Supervision sessions will include some of the following –

- Reflection on organisational issues;
- Reflection on own strengths and weaknesses;
- Identification of strategies for improving performance including role plays;
- Reflection on own progress; and
- Staff development and career issues.

The person providing supervision is responsible for keeping a record of issues discussed during supervision. The record will be signed by both the person giving and the person receiving supervision. A copy of the record will be kept on the employee's file. The employee will receive a copy of the record for their own use.

# **Peer Support**

All staff are expected to offer informal peer support to their colleagues when requested.

All staff will participate in work group meetings.

Direct care staff meetings will be held quarterly for the purposes of training and peer support.

Client focus groups will be scheduled where a Support Coordinator or Support Worker identify that a client's service can be enhanced through a collective sharing of resources. Client focus groups will involve the Support Coordinator and all direct care staff currently rostered to work with that client. The purpose of the meeting is to share strategies and knowledge so that all staff may work with the client towards common goals.

Schedule for Revision of Policy: STAFF SUPERVISION AND SUPPORT				
Date Adopted	Outcome	Author	Next Review	Comments
July 2003				
September 2011	Reviewed	D. Ryan	2013	
August 2014	Updated	D. Ryan	2016	
December 2016	Updated	D. Ryan	2018	
August 2018	Reviewed	D. Shipman	2021	
December 2020	Reviewed & Updated	D. Ryan	2022	
December 2022	Reviewed & Updated	D. Ryan	2024	

# **Support Worker Supervision and Support Procedure**

# **Purpose**

To provide direct care staff with a safe, constructive environment in which to discuss their work, to receive up to date information relating to their position, and assess their own performance against key performance Indicators.

#### Method

Small groups of Support Workers will meet bi -monthly. The Operations Manager will oversee the meetings. The meetings will focus on -

- general discussion about client related work including the sharing of strategies and information
- discussion about any new policies or procedures relevant to direct care staff
- reflection on self assessment by individuals against key performance indicators. The Manager should be respectful and aware of what individual group members may or may not wish to discuss.

At the end of each session, Support Workers will submit their self-assessment.

The Facilitator will -

- Make a copy and place it on the individual staff file
- Type the minutes of the meeting\*
- Return the original self assessment form to staff member in a sealed envelope with a copy of the minutes of the meeting.

The self-assessments will be reviewed at the annual staff appraisal.

#### Minutes of the meeting

- The minutes of the meeting are to be written by the supervisor during the supervision session.
- The minutes should be typed as soon as possible after the meeting by the supervisor and saved with a password on the document.
- Any issues that require the attention of management should be given, in writing to management for consideration.
- any other issues should be actioned as appropriate by the supervisor.

#### Issues the Manager must take to the management team

Any issues relating to -

- breach of policies and procedures
- WH&S, bullying, discrimination etc
- the award or industrial relations
- any issues otherwise requested by group members
- any issues which may affect all direct care staff.

# 2.12 Staff Trauma Support

#### Rationale

The organisation is aware that stress and trauma can have a negative effect on staff and they may have a strong physical and or emotional effect on the individual person. A traumatic incident involving one staff member can also impact on all staff members.

The organisation acknowledges that staff have a high degree of contact with many people who are aged, have a disability and often experiencing stress due to loss, ill health or family concerns. They may have complex care needs and/or a challenging behaviour due to their disability. Staff are often in a very stressful situation while trying to support clients come to terms with their losses both physically and emotionally. Staff may be involved in accidents while travelling to visit clients, or may be the first person to find a client has passed away.

To minimise the effect of the constant pressure, staff will be encouraged to discuss stressful situations with the Operations Manager. All issues will be treated with complete confidentially. The organisation should ensure all relevant contractors have trauma support procedures in place for their staff.

All office-based staff will receive training in basic debriefing skills. Management staff will be trained to debrief more comprehensively. The following procedures shall be observed in order offer appropriate support and to safeguard the well being of staff —

If medical treatment is required this should be immediately accessed.

Staff member should report all trauma incidents to supervisor as soon as possible after the incident so together they can plan on the further steps the staff member wishes to follow.

Should the incident also involve the supervisor, support should be sought from their Manager.

All reports should be considered confidential

Any WH&S issues should be addressed as per the organisation's policy.

Following a critical incident staff members are encouraged to –

- debrief with supervisor only this could involve more than one session
- request that a debrief session is held with peers
- access professional counselling organised and paid for by the organisation.

Managers may need to seek advice from specialist services depending on the type of trauma staff are experiencing.

The person debriefing will record the debriefing session. All debriefing sessions should be held as soon as possible after the incident —no longer than 72 hours.

# 2.13 Employee Assistance Program

Community Care Options is committed to supporting employees to enable them to work in a healthy and sustainable way and to fulfil the requirements of their employment. The organisation recognises that staff may experience circumstances in their personal lives' which may affect their ability to meet their job requirements for a period of time.

The Employee Assistance Program (EAP) is a professional, confidential counselling service for employees. The organisation will pay for up to three sessions of counselling per occasion, for the employee, where the staff member is unable to access counselling support through any other means ie primary health care system.

Counselling is provided by independent qualified, experienced professionals who have extensive training in counselling or psychology.

# Purpose of the EAP:

The EAP offers short-term, solution focused counselling. Counselling can assist staff to -

- clarify a problem,
- · identify options and
- develop plans to approach difficult issues in a constructive manner.

After counselling, the EAP counsellor may suggest that other, further assistance may be useful. If employees choose to take up a referral outside of the EAP, they are responsible for any costs. Where possible, referral is made to a service that is free, or within the employee's capacity to pay.

Employees concerned about any of the personal or work related issues listed below, or similar, may benefit from the EAP –

- Conflict, tension, pressure and stress
- Alcohol and drug problems
- Child and family problems
- Work pressure/problems
- Emotional stress
- Separation/divorces
- Relationship difficulties
- Personal trauma
- Grief and bereavement
- Health and lifestyle issues
- Gambling and addictions
- Financial/legal referrals
- Anxiety and depression
- Work-family issues.

# Accessing the EAP

The Operations Manager will assist staff members to identify their options for support through Medicare rebated and primary health care systems. Where the staff member is ineligible for or unable to access this generic support the Operations Manager will assist access to the EAP. He/she will provide a list of approved counsellors. The employee can then choose a counsellor and arrange an appointment. Staff will generally attend an EAP appointment in their own time, however if the issue is work related, the employee may request to attend the initial visit in work time. If this is approved, the employee will confirm a suitable time with their line manager, before arranging a counselling appointment. It is not necessary to divulge the nature of the problem when requesting time to attend.

# Confidentiality

All EAP consultations are strictly confidential. The counsellor does not share information about the employee unless authorised to do so by the employee in writing. In the case of workplace issues, the employee may authorise the counsellor to discuss the matter with their manager or another person they nominate to help address the situation.

# 2.14 Performance Planning and Review

# **Aged Care Quality Standards**

✓ Standard 7 – Human Resources

# **National Disability Standards**

✓ Standard 6 – Service Management

#### NDIS

- ✓ Core Module 1-4
- √ High Intensity Daily Personal activities
- ✓ Support Coordination
- ✓ Implementing Behaviour Support Plans
- ✓ NDIS Rules 2018

#### **Definition**

Performance Management is the process of identifying, evaluating and developing the work performance of employees, so that organisational goals are more effectively achieved, whilst at the same time providing employees with recognition, feedback and opportunities for self development.

Supervision is a process in which one worker is given responsibility to work with another worker(s) in order to meet certain organisational, professional and personal objectives. These objectives are competent, accountable performance, continuing professional development and personal support.

#### **Position Statement**

CCO is committed to ensuring the best possible quality service and outcomes for its clients. In order to achieve this it is necessary to plan, monitor and review the quality of staff skills and knowledge and how these are implemented to support client outcomes. Organisational staff will have regular supervision and annual performance planning and review.

Managing performance -

- is not just a once a year activity;
- is not just about telling employees what they are doing wrong, but it is also about acknowledging and celebrating what they are doing right;
- helps employees understand their contribution to the future of the organisation, and in turn their own future with the organisation;
- is about mutual feedback;
- helps employees to achieve alignment with the organisation;
- is not a disciplinary process;
- is a development process;
- needs to be simple.

# **Approach**

Creating a clear vision for the future to -

Identify what's really important

- Set meaningful organisational performance indicators
- Ensure that managers have ownership of these indicators
- Cascade indicators into individual performance measures in a way that employees know what's expected of them
- Allow recognition of those employees who align with and demonstrate ownership of these indicators.

Developing supporting policies and process such as -

- Job Descriptions
- Recruitment
- Performance Management
- Training and Development
- Recognition and Reward
- Workplace Agreements.

Implement transparent management tools that -

- Encourage users
- Ensure consistent application
- · Enhance opportunities for feedback
- Encourage employees to work towards goals
- · Ensure that training and development is appropriate
- Enhance management reputation
- Enhance employee performance and in turn organisation performance.

Competencies linked to individual performance -

- Developed with the involvement of the individuals directly effected
- Provide individuals with real ownership of their development
- Can allow individuals to relate their competencies to those of others doing similar jobs in the organisation.

#### **Primary Objectives for Performance Management**

- Provide and receive feedback on individual performance
- Provide clarification of managements expectations
- · Identify individual learning and development requirements
- · Set up future expectations.

#### **Performance Management Systems**

For the system to be effective the following is required –

- The system used must make sense to managers and employees
- The process needs to be as transparent as possible and specific to the organisation
- A cyclical living process
- Supported with structured education for managers
- Linked to meaningful measures for employees at all levels
- Linked directly to learning and development activities.

#### Informal performance review -

- Manager, supervisor or team leader acting in the role of coach
- Does not rely on formal authority but requires a formal reporting relationship
- Can occur at any time but usually occurs on a regular basis say once a month
- Consists of ongoing support and supervision

There are two main activities of effective performance planning and review – informal and formal review.

Informal review focuses on -

- Providing and receiving feedback on the employee's overall performance against their objectives
- Providing feedback and advice at the time performance or behaviour problems occur
- Providing praise at the time when the employee achieves the desired results.

#### Formal performance reviews -

- Structured session: a specific time and place is set aside for the evaluation interview
- Conducted by the manager within a formal context
- Usually conducted once a year

#### Supervision

The purpose of supervision is to -

- Ensure the worker is clear about roles and responsibilities
- Ensure the worker meets the organisations objectives and expected outcomes
- Establish, monitor and evaluate objectives and plans for work
- Ensure quality service to clients
- Assist with professional development
- Provide support and manage work related stress
- Ensure the worker has the resources to do the job.

#### Supervision -

- Occurs within the context of a clearly defined relationship within the organisation
- Is an ongoing process rather than an event
- Has as its main aim the best possible service to the clients
- Is a process by which supervisors impact on the service provided to the clients
- Has multiple and inter related objectives which include organisational, professional and personal objectives
- May occur in an individual and group setting and depends on clearly defined responsibility and authority

• Occurs within the context of a positive relationship.

#### Principles of Supervision

- All staff require supervision
- The best interests of the client come first
- Supervision is mandated by policy, and is based on clear roles and responsibilities
- Supervision is based on mutually defined expectations and a negotiated agreement
- Supervision is planned, formalised, regular and uninterrupted
- Supervision involves administration, education and support
- Supervision is based on clear and open communication and responsible use of information
- Supervision is integrated with other management practices
- Supervision is based on how adults learn and develop
- Supervision is inclusive and non-discriminatory
- Supervision is a shared responsibility
- Supervision promotes accountability to clients, the organisation and to professional ethics and standards
- Supervision promotes competent and empowered practice.

#### Three Functions of Supervision

#### Administrative

Planning and assigning work, reviewing and assessing work, aligning tasks to resources, establishing and monitoring work standards and outcomes.

#### Educational

Focusing on competencies required for the role, and on training and development needs; facilitating and providing knowledge and skills, information and feedback; reflecting on work and career.

#### Supportive

Focusing on the employee's responses and feelings to work, supporting the employee to deal with work related stress, providing constructive feedback.

Some administrative aspects of supervising are to –

- Identify and clarify accountability, responsibility and duties of the position.
- Identify, communicate and monitor performance standards
- Identify and communicate resources available
- · Identify and communicate organisational requirements
- Communicate the organisation's policies, function and context.

Some educational aspects of supervising are to –

Develop the employee's competence

- Provide new skills and knowledge
- Encourage self direction learning
- · Role model ethics, values and behaviours expected in the workplace
- Assist in reflection on ways to improve
- Assist in learning from mistakes.

Some supportive aspects of supervising are to –

- Encourage employees as professionals
- Provide constructive feedback
- Establish trusting relationships
- Monitor stress and develop stress reduction strategies
- Assist in management of emotions aroused by work
- Advocate for employees as needed.

## Operational procedures Performance planning and review

Will be conducted by the staff members immediate Manager. If the staff member is the CEO, by the Chairperson or another authorised member of the Board of Management.

Will build upon discussions in regular support and supervision sessions; and are based on job descriptions and agreed work plans.

### Objectives

The specific objectives of the annual staff performance planning and review are -

- to review the position and identify any changes in the position which have occurred since the previous review;
- to review the employee's performance over the past year;
- to highlight the employee's achievements;
- to identify training needs and develop a training plan;
- to allow free and confidential discussions about work between employee and Manager; and
- to discuss any work problems and search for a solution.

The specific objectives of the monthly support and supervision sessions are –

- to measure the employee's achievement of the key performance indicators
- to set short and long term professional development goals
- to highlight the employee's achievements
- to identify how management can support the employee
- to allow the employee a structured opportunity for ongoing self appraisal reflection.

The performance review session should be conducted in a way that is open, honest and positive. The Manager and the employee will -

review the position description so the staff member is fully aware of it and

- make any changes to the position description to bring it into line with actual practice;
- review the goals and objectives or position expectations previously agreed to with the employee;
- amend the performance review form in line with the changes made to the position description;
- review the employee's history (considering skills, training, experience and past performance reviews);
- conduct a performance review by following and completing the performance review form. Discuss the issues arising, considering the strengths, weaknesses and opportunities for development. Provide specific examples of both good and poor performance;
- document the supervisor's comments regarding the employee's strengths and areas requiring improvements;
- document the employee's comments about their strengths and challenges as well as their goals and objectives for the coming year;
- if the employee agrees, ask for feedback on team work from all other staff members;
- negotiate an agreed future plan for the employee's work and training;
- complete and sign all relevant documentation and keep a copy on the employee's personal file;
- if the employee disagrees with the supervisor's report in part or in full, then the employee should annotate the report. The annotated and original version should be filed. Such a circumstance should be exceptional, as the point of a review session is to develop an agreed future plan; and
- if the employee feels unfairly treated during the performance review process, she or he can take action in accordance with the grievance policy.

## 2.15 Staff Development, Education & Training

#### **Position Statement**

Community Care Options recognises that training and development is an integral part of the success of the organisation and that well trained, skilled and motivated staff is important for the organisation to deliver the best and most efficient service to our clients. We aim to develop a responsive, self motivated and flexible workforce.

#### Legislation

- ✓ Australian Quality Training Framework AQTF 2007
- ✓ NSW Vocational Education and Training Accreditation Board VETAB

#### **Aged Care Quality Standards**

✓ Standard 7 – Human Resources

#### **National Disability Standards**

✓ Standard 6 – Service Management

#### **NDIS**

- ✓ Core Module 1-4
- ✓ High Intensity Daily Personal activities
- ✓ Support Coordination
- ✓ Implementing Behaviour Support Plans
- ✓ NDIS Rules 2018

#### Objectives

- To encourage and assist all staff to develop a level of knowledge, skill and competence essential to the effective and efficient operation of the organisation as a whole;
- To offer individual staff members opportunities for career and personal development;
- To strive for quality of service at all levels;
- To orientate individuals towards excellent performance;
- To enhance a team approach;
- To encourage individuals to actively pursue their own development and job satisfaction: and
- To provide Community Care Options with a skilled workforce.

#### **Operational Procedures**

Training and development is a means by which staff can become more efficient and effective in the performance off their work, and enjoy greater job satisfaction, which directly assists in the delivery of services to our clients. The organisation will encourage and assist staff to develop a level of knowledge, skill and competence essential to the effective and efficient operation of the organisation.

An education and training plan will be actioned each year in conjunction with financial budgets. Implementation of the education and training plan shall include accredited course work, participation in conferences, workshops, in-service

training and peer support and supervision.

#### **Employment Related Training**

Each staff member will have their training needs assessed annually as part of the performance planning and review process and will be included in the education and training plan. Training will be specific to the roles and responsibilities of each staff member and shall be equitable to the training needs of other Community Care Options staff.

Staff who do not satisfactorily complete a course, may be required to repay part or all of any course fees paid by the service, at the discretion of the Management team.

Staff on approved training courses will count the time incurred in travelling to and from and attending courses as normal time.

Staff must achieve a satisfactory level of competency after training in order to satisfy the requirements of their position.

Staff are encouraged to identify areas where they need or would like extra professional development.

#### **Staff Development Opportunities**

Training will aim to provide all staff with opportunities to acquire skills necessary for their present position including further career development within the position. The organisation's support towards career development may include —

- In house CCO specific training and development through S&S, team meetings, client focus meetings. Will often involve presentations from external guest speakers.
- Staff attendance at workshops, seminars and conferences during work time
- Flexibility of working hours to participate in an accredited course of study
- Purchasing resources such as videos and research literature
- Financial support with fees for accredited courses at a recognised educational institution.

Any staff wishing to participate in staff development opportunities should discuss these with their line manager. Application for assistance with costs to attend courses or conferences need to be made on the appropriate form and authorised by the CEO.

Staff are to report back to their line manager and the CEO, regarding any training activities, which they have attended, and the value of the activity to their work.

To access any form of financial support towards courses, the course must have been approved by the organisation in the first instance.

## **Study Leave**

Leave requests for existing study will be considered on a case-by-case basis by the CEO. Courses deemed to be related to current employment may be approved study leave to attend exams or residential school with a maximum of 4 days per year.

Schedule for Revision of Policy: STAFF DEVELOPMENT, EDUCATION AND TRAINING				
Date Adopted	Outcome	Author	Next Review	Comments
July 2003	Adopted	A. Vaughan	2005	
July2006	Amended	N. Jut	2008	
May 2011	Amended	D Ryan	2013	
August 2014	Updated	D. Ryan	2016	
December 2016	Updated	D. Ryan	2018	
August 2018	Reviewed	D. Shipman	2021	
December 2020	Reviewed & Updated	D. Ryan	2022	
December 2022	Reviewed & Updated	D. Ryan	2024	

## 2.16 Reimbursement of expenses

Bona fide expenses incurred by staff in relation to attendance at approved training courses or conferences, will be reimbursed as follows –

- Staff indicate anticipated expenses on their application to attend training or conferences form.
- The person approving the form, generally the Manager, will give in principle approval of the anticipated expenses as outlined on the form.

The organisation will reimburse staff for bona fide and reasonable expenses, as approved in principle, and against the relevant receipts. Reimbursement of expenses may include items such as accommodation, some meals and fares.

# 2.17 Election of Staff Representatives to Working Parties and Committees

Community Care Options is committed to ensuring that staff are consulted on issues pertaining to their employment. Methods of consultation include conducting regular supervision and support groups, staff meetings, staff newsletters, WH&S, Board of Management and Quality Committee meetings.

#### **Staff Representation**

Staff shall have formal representation on the WH&S Committee and the Quality Committee. Employees will elect a staff member who works in their work group (department) to represent them on such committees.

#### **Nominations**

Staff may nominate themselves or be nominated by another member who belongs to the same work group (department). Nominations must be submitted to the chairperson of the meeting prior to the start of the meeting. Candidates who have been nominated for vacant positions shall have an opportunity to address their workgroup at the meeting immediately prior to the election being held

#### **Elections**

Notice of forthcoming elections shall be given at least one month prior to taking place. All staff belonging to the particular work group will be given the opportunity to attend the meeting, during which their representative is being elected. Election shall be by closed ballot. The results of the ballot will be announced at the conclusion of collection and counting of the votes. This will generally occur as part of the meeting. Successful candidates will then be appointed to the position/s.

#### **Term of Representation**

Representatives will serve a fixed term of no longer than 2 years, to ensure that all staff have an opportunity to participate in the consultation process.

#### **Role of Representatives**

To represent the interests of their work group

To advocate issues identified by work group

To review and consider data and information and bring perspectives that enable service improvement in all areas of the organisation. CCO is focused on continuous quality improvement and utilises data from many sources to assist evidence based decision making – WH&S reports, Feedback and Complaint forms, client exit feedback, client consultation through reviews and meetings. These committees allow for a balanced view of organisational perspectives and allow for suggestions for improvements in areas such as communication, culture, client services, and innovation.

Staff representatives are bound by confidentiality in relation to details of discussions. Minutes will be agreed and distributed to all staff through – Intranet, staff newsletters, posted on notice boards.

#### **Vacancies**

A representative may withdraw from the position by giving at least 4 weeks' notice of her or his intention to do so. Vacancies through resignation or through the representative leaving the employment of the organisation will be filled when they arise.

Schedule for Revise COMMITTEES	sion of Policy: EL	ECTION OF STAFF	REPRESENTATIVE	ES TO WORKING PARTIES AND
Date Adopted	Outcome	Author	Next Review	Comments
March 2004				
January 2011	Reviewed	D. Ryan		
August 2014	Updated	D. Ryan	2016	
December 2016	Updated	D. Ryan	2018	
August 2018	Reviewed	D. Shipman	2021	
December 2020	Reviewed & Updated	D. Ryan	2022	
December 2022	Reviewed & Updated	D. Ryan	2024	

## 2.18 Conduct Management

#### Definition

Conduct refers to an employee's behaviour and performance in the workplace.

#### **Position Statement**

Community Care Options has an obligation to maintain the integrity of the organisation and provide a high level quality of service to increase the quality of life and independence of people living in our community. There are certain expectations regarding standards of workforce performance and conduct to ensure the integrity, quality of service and effective functioning of the organisation. All persons associated with CCO, Board members, permanent and casual employees and volunteers are expected to behave according to the Code of Conduct and Ethics policy and organisational policies and procedures.

#### Responsibilities

All managers will ensure that staff are aware of the Code of Conduct and will assume responsibility for compliance with these expectations. It is management's duty to take appropriate and reasonable action to address and manage poor performance or unacceptable conduct should this occur among staff. In the case of the CEO, it is the Board of Management's responsibility. Action taken by management will ensure -

- consultation with the individuals and employees involved;
- fairness in the treatment of individual employees;
- equitable and consistent management of the disciplinary process; and that
- all disciplinary action and processes are fair, just and reasonable.

#### **Approach**

The focus in addressing poor performance will be to encourage and foster improvement through strategies such as investigation, interview, counselling and/ or buddy support, including written expectation of improvement expected and warning of consequence should improvement not occur. Lack of improved performance may lead to disciplinary action and/or employment termination. In the case of unacceptable conduct, management will usually encourage behavioural change through strategies similar to poor performance, with a lack of changed conduct leading to disciplinary action and/or employment termination. More serious situations of unacceptable conduct may directly result in employment termination however, and dismissal without warning may occur should there be a sufficiently serious and wilful nature of misconduct.

#### Legislation and Standards

- ✓ Anti-Discrimination Act 1977
- ✓ Freedom of Information Act 1989
- ✓ Independent Commission Against Corruption Act 1988
- ✓ NSW Industrial Relations Act 1996
- ✓ Work Health and Safety Act 2011
- ✓ Protected Disclosures Act 1994
- ✓ Child Protection (Prohibited Employment) Act 1998
   ✓ Community Care Common Standards
   ✓ National Disability Standards

- ✓ Aged Care Standard✓ NDIS Code of Conduct

#### **NDIS**

- ✓ Core Module 1-4
- ✓ High Intensity Daily Personal activities
- ✓ Support Coordination
- ✓ Implementing Behaviour Support Plans
- ✓ NDIS Rules 2018

#### **Operational Procedures**

#### **Procedural fairness**

The facts in a counselling or disciplinary situation will be substantiated by investigation and interview and the processes for conduct management will be fair, reasonable and consistent according to these operational procedures –

- Opportunity is provided for response, explanation and defence by employees involved in the conduct management process.
- Employees required to attend interviews that may result in counselling, disciplinary action or employment termination are given written notice of interviews 24 hours in advance, with allegation details to be discussed.
- A support person may attend any interview held with employees and may be a fellow employee, union representative or other person of the employee's choice. Management will also have a witness in attendance.
- Proper written documentation is kept including details of discussions, outcomes, expectation for improvement and a timeframe for compliance.
- Disciplinary action or employment termination is promptly taken if there is a lack of expected improvement within a given timeframe.

#### **Poor Performance and Unacceptable Conduct**

Poor performance and/or unacceptable conduct can include, but is not limited to, the following –

- Failure to comply with CCO policies, procedures;
- Failure to comply with professional and/ or legislative requirements;
- Negligence, inefficiency and/ or incompetence resulting in poor performance and/ or unacceptable conduct;
- Failure to comply with reasonable directions;
- Dishonesty, fraud, theft and/ or other unlawful activity;
- Disclosure of confidential information;
- Bullying or harassing or discriminative behaviour;
- Unauthorised and/ or excessive absenteeism:
- Failure to work required hours;
- Failure to comply with Work Health & Safety requirements;
- Being under the influence of drugs or alcohol whilst on duty;
- Abuse and/ or misuse of Community Care Options property;
- Unauthorised public comment or publically compromising CCO integrity.

#### **Stages of Process and Documentation**

The following procedures detail stages of the counselling and disciplinary processes. Employees must be aware that all of the following stages may not be applicable in each case of poor performance or misconduct. Depending upon the

circumstances of each situation, certain procedures from the following will be applied, regardless of whether all steps have been previously followed. For example, in cases of serious misconduct, final warning or termination may apply regardless of whether the employee had received counselling or a prior warning.

In addition, management may repeat the following counselling and disciplinary steps where the particular circumstances require it.

All copies of minutes of interviews, letters and other documentation relating to counselling, disciplinary and/ or employment termination procedures are placed on the employee's personnel file.

#### Counselling

Where certain issues regarding an employee's work performance or misconduct arise, management may initiate counselling of the employee concerned to make them aware of the deficiencies in their performance and/ or unacceptable conduct and the standard of performance and/ or conduct that management requires the employee to meet.

The objective of Counselling is to identify and outline expected improvement, within a specific timeframe, in order to prevent incidents that would require disciplinary action. The person handling the counselling procedures shall follow the principles of procedural fairness as outlined in this policy and the following steps –

#### A Investigation

- Conduct an investigation to gather all relevant information including obtaining information from relevant persons involved in the incident; and
- Allow adequate notice of interview, including both the organisations and the employee's right to include a witness of their choice at interview and inform the employee in writing of details of the alleged unacceptable conduct.

#### **B** Counselling Interview

- No witness shall participate in interview discussions;
- Interview of the employee concerned, clearly explaining the allegations;
- Employee responds to the allegations at the counselling interview;
- No further action is taken because the allegations are not substantiated; or
- The action required to rectify the poor performance or unacceptable conduct, is clearly explained, with expected improvement targets and a specific timeframe for achievement;
- Establish whether Community Care Options can provide assistance to the employee to achieve the expected change.
- The employee is informed of the consequence of not achieving the expected change, including any disciplinary action that could lead to employment termination;
- Set a date for review of the expected improvements as soon as possible following the timeframe specified.
- Complete an agreed written record of the interview within 24 hours, to be signed by the CEO or Manger conducting the interview and the employee. This record should include clear details of the expected change and timeframe for achievement.

 If an agreed written record cannot be reached, then witnesses should be included in formatting an agreed written record or note a refusal by the employee to sign the written record and the reasons for that refusal.

#### C Following the Counselling Interview

- Provide the employee with a copy of the written record, including clear details of expected improvement targets and a specific timeframe for achievement and a date for review of performance and/or behavioural change;
- Support and monitor the employee's progress at regular intervals during any applicable review period.

#### D Review meeting

- inform the employee whether the target improvement(s) has been reached and whether further action is required; or
- Inform the employee that she/he has failed to reach and maintain the required standard of conduct or there have been further instances of inappropriate conduct during the review period, therefore Disciplinary Action procedures (section 3.5) will be taken.

#### **E Following the Review Meeting**

- Complete an agreed written record of the Review Meeting within 24 hours, to be signed by the CEO or Manger conducting the review and the employee. This record should clearly state that expected change has been achieved and that expectation remains the change will be maintained into the future.
- If the employee has failed to reach and maintain the required standard of conduct or there have been further instances of inappropriate conduct during the review period, the written document will outline the disciplinary procedures to be taken, inlouding a timeframe.

#### **Disciplinary Action**

Where certain issues regarding an employee's work performance or misconduct are sufficiently serious, the CEO may initiate disciplinary processes and take action to warn the employee that deficiencies in their performance and/ or unacceptable conduct will not be tolerated by the organisation and may lead to employment termination if not corrected.

When deciding whether to take disciplinary action against an employee, Community Care Options will follow these processes –

#### **Investigation Interview**

- No witness should participate in interview discussions;
- Interview the employee concerned, clearly explaining the allegations;
- Allow the employee to respond to the allegations;

The CEO will either -

- Take no further action because the allegations are not substantiated; or
- Determine whether the substantiated unacceptable conduct warrants a warning or immediate employment termination.

If a warning is to follow, then -

- Clearly explain the nature of the unacceptable conduct, with expectation of improvement targets and a specific timeframe for achievement;
- Establish whether Community Care Options can provide assistance to the employee to achieve the expected change.
- Inform the employee of the consequence of not achieving the expected change, including further disciplinary action or employment termination;
- Set a date for review of the expected improvements as soon as possible following the timeframe specified.
- Complete an agreed written record of the discipline interview within 24 hours, to be signed by the CEO and the employee. This record should include clear details of the expected change and timeframe for achievement, including consequence for non achievement.
- Provide the employee with a copy of the written record
- Provide the employee with a written warning concerning unacceptable conduct requiring change. Include clear details of expected improvement targets and timeframe with a stated consequence for non achievement;
- Monitor the employee's progress at regular intervals during any applicable review period.

If employment termination is to follow, then either -

- Clearly explain the unacceptable conduct, with explanation that the
  misconduct was of a serious nature and the organisation does not believe
  improvement within an expected timeframe is possible. Proceed with
  termination; or
- Clearly explain the unacceptable conduct, with explanation that the
  misconduct was of such a serious nature that the organisation believe
  instant dismissal is appropriate and inform the employee that wages will be
  paid up to the time of dismissal only. Also inform the employee that
  dishonesty, fraud, theft and/or other unlawful activity, assault, failure to
  comply with Work Health & Safety requirements or being under the
  influence of drugs or alcohol whilst on duty may be further investigated by
  external legal institutions. Proceed with termination.

#### **Employment Termination**

#### **Employment Termination with Notice**

The process of investigation and an interview, as set out above, will also be followed in a situation of expected employment termination. As in all stages of the Conduct Management process, an employee has the right to include a witness of their choice at interview.

When an employee's substantiated misconduct is sufficiently serious, the CEO may terminate employment, with notification as stipulated in the relevant award. Following interview, the CEO shall provide the employee with a Termination Letter stating the reasons for the employment termination, a Certificate of Employment and an Employment Separation Certificate.

At the discretion of the CEO, the notification period may be worked or paid in lieu. Upon termination, wages due to an employee, and any other monetary entitlements, shall be paid on the date of termination or forwarded by post on the next working day. (Award)

#### **Employment Termination without Notice**

In a most extreme and serious case of refusal of duty, malingering, illegal behaviour or neglect of duty, employment termination may be instant and without notice. However, before instant dismissal occurs, a full investigation must be conducted with an opportunity for the employee to respond to allegations made. If employment termination is instant, the employee shall be liable only for payment up to the time of dismissal.

The following may warrant instant dismissal –

- Serious neglect of duty;
- Serious or repeated inefficiency or incompetence;
- Gross insubordination and abuse;
- Dishonesty, including theft;
- Being under the influence of alcohol and/or illegal drugs;
- Serious and/or wilful misconduct:
- Criminal activities:
- Discrimination or harassment; and
- Serious and wilful misbehaviour and disobedience.

#### **Appeal**

If an employee is dissatisfied with the process or outcome of any counselling or disciplinary procedures, the employee is encouraged to follow the procedures outlined in CCO's Workforce Dispute and Grievance policy to report their grievance. Alternatively, the employee may wish to contact an external agency such as their union or the Industrial Relations Commission of NSW.

#### **Cross Reference and Further Reading**

- ✓ Code of Conduct and Ethics Policy✓ Workforce Dispute and Grievance Policy
- ✓ Bullying & Harassment Policy

Schedule for Revis	sion of Policy: CONDUCT MAI	NAGEMENT		
Date Adopted	Outcome	Author	Next Review	Comments
November 2010	Reviewed/Updated	D. Ryan	2012	
August 2014	Updated	D. Ryan	2016	
December 2016	Updated	D. Ryan	2018	
August 2018	Reviewed	D. Shipman	2021	
December 2022	Reviewed & Updated	D. Ryan	2024	

## 2.19 Working from Home

#### **Position Statement**

Community Care Options believes that providing employees with the opportunity to utilise working from home arrangements helps promote excellence, engagement and efficiencies in both individual and organisational performance.

#### **Working From Home (WFH)**

Whether working from home is reasonably practicable will depend on the specifics of the workplace, the facilities available for workers to work remotely and the ability for workers to do their work safely from home.

In deciding whether working from home is appropriate for a worker, in consultation with the worker and their representatives, CCO will consider –

- the individual worker's role
- whether the worker is in a vulnerable person category for contracting virus or disease eg pandemic
- whether the worker is at risk of spreading virus/disease
- suitability of work activities
- workflows and expectations
- workstation set up
- surrounding environment such as ventilation, lighting and noise
- home environment, such as partners, children, vulnerable persons and pets
- communication requirement such as frequency and type
- mental health and wellbeing of the worker
- safe working procedures and training requirements, and
- potential risk of infection on journeys to and from the workplace.

If work can be completed at home, and the *risks* that arise from working remotely can be effectively managed, encouraging or directing workers to work from home may be the best way to minimise the risk of exposure to COVID-19.

Existing workplace policies on working from home apply to arrangements implemented as part of the COVID-19 response. Some variations may be acceptable eg the ability to work from home while also caring for children.

The Working from Home policy has been reviewed and endorsed by CCO's elected Health and Safety Representatives (*HSRs*).

Whether working at the office or at home, a worker has the right to stop or refuse unsafe work when there is a reasonable concern of exposure to a serious risk to health and safety from an immediate or imminent hazard. In some circumstances, this could include exposure to the COVID-19 virus. Any concerns about health or safety should first be raised with a Manager or a Health and Safety Representative (HSR).

A worker may also contact a union for advice. If a worker decides to stop work as it is unsafe, they must notify their Manager as soon as possible and be available to

carry out alternative work arrangements.

#### Legislation

Work Health & Safety act

The *model WHS laws* still apply if workers work somewhere other than their usual workplace, for example, from home. CCO has duties to ensure the health and safety of our workers, even if they are working from home.

In consultation with workers and their representatives, CCO will do the following to minimise risks -

- provide guidance on what is a safe home office environment, including what a good workstation set up looks like, why workers should not be *sedentary* all day and how to avoid this
- allow workers to borrow any necessary work station equipment from the office to take to the home as agreed
- require workers to familiarise themselves and comply with good ergonomic practices, consistent with any workplace policies and procedures, for example requiring workers to complete a workstation self-assessment checklist and provide their responses to you
- maintain regular communication with workers
- provide access to information and support for mental health and wellbeing services.

## Beyondblue has a freely available <u>website</u> or CCO has an existing employee assistance program (EAP).

 appoint a contact person in the business who workers can talk to about any concerns related to working from home.

CCO will consult with workers, on how CCO's existing policies and procedures apply when working from home, including –

- notification of incidents, injuries, *hazards* and changes in circumstances
- consultation and review of work health and safety processes, and
- attendance, timesheets, leave and other entitlements and arrangements.

CCO may consult workers for an inspection of the worker's home work environment to ensure it meets health and safety requirements. This can be achieved through virtual means such as photos or video to avoid the need for a physical inspection. In many cases, given the types of *risks* associated with the activities to be undertaken, an inspection will not be required.

#### WHS risks of working from home

Working from home may change, increase or create work health or safety *risks*. CCO will consult with workers before *control measures* to address these *risks* are implemented.

Some key considerations that may affect the *WHS risks* of workers working from home or remotely include -

- pre-existing injuries the worker may have
- communication frequency and type between the employer and worker

- management of the work program, workload, activities and working hours
- surrounding work environment
- workstation set up, such as desk, chair, monitors, keyboard, mouse and computer
- work practices and physical activity
- mental health and wellbeing of the worker, and
- other responsibilities the worker may have such as facilitating online learning for children or a caring role.

CCO will do what we reasonably can to manage the *risks* to a worker who works from home.

Workers also have health and safety obligations to minimise *risks* when working from home including -

- following procedures about how work is performed
- using equipment provided by the workplace as per the instructions given and is not damaged or misused
- maintaining a safe work environment, such as designated work area, moving furniture to ensure comfortable access, providing adequate lighting and ventilation, repairing any uneven surfaces or removing trip *hazards*
- managing their own in-house safety, such as maintaining electrical equipment and installing and maintaining smoke alarms
- notifying the employer about risks or potential risks and hazards, and
- reporting any changes that may affect their health and safety when working from home.

#### Mental health risks and working from home

The COVID-19 pandemic is a stressful and uncertain time for all Australians. Working from home can create additional *risks* to mental health.

WHS duties apply to both physical health and mental health. CCO must, so far as is reasonably practicable, ensure the mental health of their workers and protect their workers from psychological *risks*.

Working from home can have psychological *risks* that are different to the *risks* in an office or regular workplace. A psychosocial hazard is anything in the design or management of work that causes stress. Some psychosocial *hazards* that may impact a worker's mental health while working from home include –

- being isolated from managers, colleagues and support networks
- less support, for example workers may feel they don't have the normal support they receive from their supervisor or manager
- changes to work demand, for example the impacts of the COVID-19 pandemic and a move to working at home may create higher workloads for some workers and reduced workloads for others
- low job control
- not having clear boundaries between home-life and work-life
- fatique
- poor environmental conditions, for example an ergonomically unsound work station or high noise levels, and

poor organisational change management, eg workers may feel they haven't been consulted about the changes to their work.

Working from home may also impact a worker's mental health in other ways, such as from changed family demands, eg home schooling school-aged children who are learning from home, relationship strain or family and domestic violence.

#### Looking after the mental health of workers at home

CCO must eliminate or minimise the risk to psychological health and safety arising from work as far as is reasonably practicable, including when your workers are working from home.

Good communication with workers is especially important when they are working from home. Managers will have regular and clear communication with workers to set realistic and clear instructions on workloads, roles and tasks, to monitor work levels and to check that work can be successfully completed from home without creating any additional safety *risks*. Adjust any work tasks and ways of working as appropriate.

Steps that can be taken to manage *risks* to CCO's workers' mental health where reasonably practicable include –

- providing information about mental health and other support services available to your workers
- maintaining regular communication with workers and encouraging workers to stay in contact with each other
- staying informed with information from official sources and sharing relevant information with workers and HSRs as it becomes available
- offering workers flexibility, such as with their work hours, where possible
- making sure workers are effectively disengaging from their work and logging off at the end of the day
- responding appropriately to signs a worker may be struggling, eg. changed behaviour
- informing workers about their entitlements if they become unfit for work or have caring responsibilities
- eliminating or minimising physical risks, and
- providing workers with a point of contact to discuss their concerns and to find workplace information in a central place including HSRs.

CCO and workers share responsibility for ensuring a safe workstation set up. To ensure workers' workstation set up is safe, CCO will –

- provide guidance on what is a safe home office environment, including setting up an ergonomic workstation, why workers should not be sedentary all day, and how to avoid this
- require workers to familiarise themselves and comply with good ergonomic practices, for example by requiring workers to complete a workstation selfassessment checklist and provide their responses to you
- provide a health and safety checklist for working from home for workers to use, for example checking for trip *hazards* in the work space
- consider organising a workstation assessment by a competent person

where practicable, allow workers to borrow equipment, such as chairs, monitors, keyboards and mouses, from the office, and

have ongoing discussion with workers regarding their workstation set up.

Workers must follow reasonable policies or directions set by CCO. This may include completing workstation checklists and following any other reasonable safety policies and directions given them. As with any other work environment, workers must inform Management of any work-related incidents or injuries that occur while working at home and are encouraged to report health and safety concerns to Managers and their *HSR*. In undertaking safety check CCO will ensure workers have access to first aid based on an assessment of their duties and home work environment.

## Obligations to workers to ensure that they have suitable breaks and work reasonable hours while working from home

CCO must ensure workers continue to access their workplace entitlements, including breaks, standard hours and any agreed to flexible work arrangements.

#### Worker has contracted COVID-19 while working from home.

If a worker has contracted COVID-19 CCO will need to follow the health advice provided by our public health authority. CCO will discuss leave arrangements with the worker and determine if the worker has had contact with any other workers while they were infectious.

Workers who have been isolated after having tested positive for COVID-19 can return to work when they have fully recovered and have met the criteria for clearance from isolation. Clearance may be by the public health authority or the persons treating clinician.

It is possible that a worker with COVID-19 could potentially work from home, if for example, they have no or minor symptoms. This would be subject to the advice from the relevant treating clinician and discussions with the worker. Eg a doctor may recommend reasonable adjustments, including reduced working hours or changes to a worker's workload.

Before workers return to their usual workplace CCO must ensure proposed arrangements are consistent with the latest advice from public health authorities. CCO may also need to undertake a risk assessment and consult with workers and *HSRs* before workers return to the usual workplace.

As part of risk assessment CCO must consider vulnerable workers and ensure that they are not put at risk by a direction to return to the workplace. Pending a risk assessment, it may be that vulnerable workers should remain in a working from home arrangement for a longer duration that those workers who are not vulnerable.

### Responsibilities Employees

Employees are responsible for -

Completing Work from Home Form

- Undertaking the duties to be performed at the home office in accordance with the employees Position Description
- Being available to undertake work during the hours/days as per employment contract
- Being contactable during the periods in which home based work is carried out and available for communication
- Ensuring the work environment is free from all distractions (i.e. carer responsibilities, personal visitors, personal domestic duties) during working hours. Managing personal responsibilities appropriately so that employment obligations can be met.
- Allowing the employer access to the residence if required for work-related purposes; for example to discuss/resolve work related issues or to undertake risk assessment.

#### **Managers**

Managers are responsible for -

- Completing Working from Home Form
- Providing required information, resources, training and support as reasonable so that work can be undertaken as agreed.
- Ensuring open communications so that work can be performed and monitored as required.
- Ensuring regular opportunities for communication between manager, team and employee including taking all reasonable steps to provide to the employee all information required to perform their role.
- Ensuring that the work carried out by the employee in the home based work site is taken into account when the work performance of the employee is under review.
- Provide training and career development opportunities to the employee on the same basis as for other employees.

#### **Policy Practice and Procedure**

This agreement will be read in conjunction with –

- Relevant Industrial Award/Agreements where applicable.
- Internal organisational policies and procedures as amended from time to time.
- Employee's current employment contract.
- Employee's current/proposed position description
- Working from Home Request/Approval Form

All CCO policies, including Work Health and Safety, which apply at the staff member's usual place of work, shall, as far as practicable, apply in carrying out home based work. Access to the CCO computer network must comply with the CCO IT Remote Access Guidelines and all internet/telecommunications based costs are at the employees expense.

Any distractions that may occur whilst the employee is working from home, such as pets, renovations, childcare, second business, should be disclosed by the

employee and strategies for management agreement.

Home based work is not accepted by CCO as a suitable substitute for dependent care of eg. young/aged/sick person. Leave should be taken in these circumstances. Failure to meet these specifications may result in disciplinary action.

WFH Agreements are to be reviewed for effectiveness at least every 3 months of agreement being made. CCO retains the right to withdraw any WFH agreements in conjunction with organisational policy changes or general performance review.

#### Written agreement

All changes to work arrangements, both short and long-term, must be agreed in writing by both CCO and the employee.

#### **Equipment and Expenses**

Expenses relating to the home base work arrangement will be managed in accordance with this table.

Expenses that may be covered	Expenses that will <b>NOT</b> be covered
Landline – calls itemised for work	Internet costs
purpose	
Mobile (personal) – calls itemised for	Home utilities such as gas, electricity,
work purpose	water
	Rent or mortgage repayments
	Home contents or building insurance or
	the replacement of CCO lost or stolen
	property
	Home office furniture or business
	equipment requirements
	Any modifications required or
	depreciation

Any and/or all equipment owned or leased by the employer will remain the property of the employer at all times.

#### **Termination of agreement**

WFH Agreements are to be reviewed for effectiveness as and when required. CCO retains the right to withdraw WFH agreements in conjunction with organisational policy changes or general performance review.

The parties may, at any time cancel this agreement immediately for reasons including, but not limited to the following -

- Employee resignation
- Risk assessment/s pose unreasonable requirements on organisation
- Role performance standards not being adequately met
- Required safety/security standards unable to be adequately met

- Employee not meeting undertakings (ie. in accordance with their application for WFH, this agreement, position description, inspection results, organisational policies & procedures)
- Changes in role/supervisory requirements
- Arrangement requires unreasonable financial investment by organisation
- Notice of cancellation of this agreement shall be in accordance with the term stated above or as agreed between the parties
- Change in organisational policy relating to WFH

If this agreement is terminated by either party, the employee agrees to continue to work from the employer's workplace as directed.

Schedule for Revision	of Policy: V	VORKING FROM	И НОМЕ	
Date Adopted	Outcome	Author	Next Review	Comments
August 2013	Adopted	L Chowdhury		
December 2016	Updated	D. Ryan	Dec 2018	
September 2018	Reviewed	D. Shipman	2021	
August 2020	Reviewed & Updated	D. Ryan	2022	
December 2022	Reviewed & Updated	D. Ryan	2024	

### Working from Home (WFH) Form

Key dates	Date of Request:
	Commencement:
	Approved:
Employee Name	
Current position	
Manager	
Address where home based work will be undertaken	
Duration of Agreement	
How many days/hours per week for WFH?	
Landline/mobile number to be used as contact	
On WFH days, what are the start & finish times?	
Have you read & signed the WFH Policy?	
Has the WFH checklist (below) been completed?	

Please list the equipment/ items needed to adequately perform the work outlined above from home (where applicable). Add additional items if required.

W	ork Environment	Yes	No	Comments
De	esignated Work Area & ergonomics			
•	A work area has been identified for dedicated work/home office			
•	The work floor is level and there is limited use of mats/or rugs that may cause injury			
•	Quality ergonomic chair with adjustable height and lumbar support is used			
Er	ovironmental Conditions			
•	Lighting is adequate for the tasks being performed. Easy to see and comfortable on the eyes			
•	Ventilation and room temperature can be controlled, regardless of season			
•	There is no excessive noise affecting the work area			
•	Walkways are clear of clutter and trip hazards			
Er	nergency Preparedness			
•	In the case of emergencies, a path to the exit is sufficiently wide and free of obstructions or trip hazards to allow unimpeded passage			
Co	ommunications			
•	Communications procedure has been established to ensure regular contact between employee and manager			
	ectrical			
•	Power outlets are not overloaded with double adapters and power boards			
•	"Safety switch" earth leakage circuit protection is in place for work related equipment			
•	Electrical cords are safely stowed			
•	Connectors, plugs and outlet sockets are in a safe condition			
•	Electrical equipment free from any obvious external damage			
De	claration			
	<ul> <li>I declare that the information provided above is true and corr accurately and honestly.</li> </ul>	ect and	has bee	en compiled
	<ul> <li>Attached is a diagram and photo of work area that highlights home that will be used when working.</li> </ul>	the rele	vant are	eas of my
	<ul> <li>I understand that my application for undertaking home based rejected based on the information I have provided above.</li> </ul>	l work m	ay be a	ccepted or
Em	ployee Signature: Date:			

## 2.20 Employee Exit Procedure

#### The Exit Interview

This offers an opportunity to provide information to both the employee and to Community Care Options about how the organisation's future performance could be improved. The interview should cover the employee's reasons for leaving, how the position met or failed to meet the employee's expectations and any changes the employee could recommend to improve Community Care Options. Employees may also request feedback and advice on their performance.

Wherever possible when an employee leaves Community Care Options, an exit interview will be conducted by the CEO or the employee's direct Manager. Following such an interview, the supervisor should consider whether any action should be taken considering the employee's comments.

#### **Exit Procedure**

- The organisation's staff will be responsible for organising other exit arrangements (such as termination procedures and pay, filing resignation or termination documentation etc).
- The CEO is responsible to ensure that there is a letter of resignation from the employee if they resigned, or a letter of termination if they were dismissed. Copies of these letters will be kept on file.
- If requested, prepare a written statement of employment detailing the period of employment and type of work performed
- If requested and appropriate, prepare a Statement of Employment or reference
- Ensure that all property belonging to the organisation is returned, including keys, files and equipment
- Ensure that all outstanding bills (e.g. petrol or private phone calls owing) are settled by the employee
- Ensure that the employee's security code is deregistered with the security company.

Schedule for Revision of	Policy: EXIT PROCEDUR	RE		
Date Adopted	Outcome	Author	Next Review	Comments
December 2016	Updated	D. Ryan	Dec 2018	
September 2018	Reviewed	D. Shipman	2021	
December 2020	Reviewed & Updated	D. Ryan	2022	
December 2022	Reviewed & Updated	D. Ryan	2024	

## 2.21 Rewards and Recognition Program

Community Care Options is committed to attracting, developing and retaining the highest quality staff. Vital to pursuing this aim is the acknowledgement of employees for their contributions and the recognition of outstanding performance.

#### **Definition**

Reward - a thing given in recognition of service, effort, or achievement.

Recognition - If you are given recognition, people show admiration and respect for your achievements. This policy encourages CCO Managers to actively identify and recognise excellence and establishes the principles of reward and recognition at CCO, in addition to including practical guidance.

#### **Position Statement**

Community Care Options (CCO) seeks to create an environment where employees are valued and acknowledged for their contribution to organisational outcomes, specifically high quality client care. Such an environment fosters engagement with CCO and with CCO's vision and mission It serves to both attract and retain those who contribute to the achievement of this vision

#### **Aged Care Standards**

✓ Standard 8 – Organisational Management

#### **National Disability Standards**

✓ Standard 6 – Service Management

#### **NDIS**

✓ Core Module 1-4

#### Intent

The intent of the Reward and Recognition Policy is to

- ✓ acknowledge and reward outstanding performance when it happens;
- √ foster professional and career development;
- ✓ provide for a range of informal and formal rewards and recognition, which may or may not have monetary value;
- ensure that processes are transparent, and rewards and recognition are fairly and equitably applied; and
- ensure that rewards and recognition are meaningful to the individual or team.

#### **Principles**

The reward and recognition policy is based on three basic principles –

Leadership - It is the responsibility of supervisors and leaders to take an
active role in the performance management of their staff, to acknowledge
and recognise the achievements of staff, to foster their engagement and to
support their career development. Leaders should recognise the

contribution by staff at all levels in relation to their opportunities to contribute and not just those who, for a particular reason at the time, have a higher profile than their colleagues.

- Accountability Rewards and recognition must be applied fairly and
  equitably within the organisation through a process which is as transparent
  as possible. Monetary reward and recognition decisions must be made and
  documented in accordance with the relevant allowance policy. While less
  formal rewards and recognition should not be constrained by strict rules and
  procedures, care must be taken to ensure that no individual or group is
  inadvertently favoured or neglected.
- Fiscal responsibility Reward decisions must be made in accordance with CCO's financial accountability requirements. Allowances and monetary bonuses for outstanding performance remain discretionary. While the financial position of CCO may vary, we are strongly committed to reserving a budget for rewards and recognition.

#### **Informal Recognition**

The most effective means of acknowledging the work of others and letting them know that their contribution is valued, remains that of informal and immediate recognition. Various studies have found that all forms of recognition are valued by employees, however the positive effects of a single event, even a significant pay rise, will not last very long. The advantages of informal positive feedback are not only that it can be delivered immediately, but it can also be given whenever appropriate, without being limited by a set process or budget.

Informal recognition should not be used as an alternative to allowances or bonuses where deserved. It should be incorporated into everyday working life, to compliment formal rewards rather than replace them.

Informal recognition takes many forms, from a simple thank you for a job well done, to a note of appreciation, acknowledgement in a wider forum, or celebratory occasions on completion of particular tasks or projects.

#### Formal recognition

Performance Development and Appraisal (PDA)

The Performance Development and Appraisal is the formal process by which an employee's performance is assessed and through which outstanding performance may be recognised. The PDA is explained in the University Policy: Performance Development and Appraisal, which is supported by the PDA procedures. Individual financial rewards must be formalised through the PDA process. The PDA may prompt a supervisor to consider recommendation for a monetary or non-monetary reward. Similarly, it may be apparent that an employee is deserving of a particular reward, and the PDA can be triggered to formalise the process.

#### **Discretionary Allowances and Payments Statement**

CCO's CEO may approve discretionary allowances and payments to attract and retain employees who have special skills or expertise, address altered market conditions, and recognise and reward outstanding performance.

A performance allowance or bonus can be paid for outstanding overall performance, while a bonus may also be paid for outstanding performance on a particular task or on achievement of negotiated stretch outcomes. Performance allowances and bonuses should not be used for an employee who is performing their job competently, rather they are intended to apply to recognise achievements well above what is expected of the position.

#### Non-pecuniary benefits

Outstanding performance may also be recognised through a non-pecuniary reward such as payment for professional development, conference fees, coffee, morning tea's, lunch. This can often be more meaningful for the recipient and is often a means of maximising the value of a benefit. It can also be an effective way to reward a team.

#### **Team Programs**

Teams are encouraged to devise their own reward and recognition programmes. Be creative. This can be simple messages of appreciation or regular or semi-regular events where outstanding performance is recognised.

#### **Fringe Benefits Tax**

Whenever CCO funds are expended for employee rewards other than through the salary system, fringe benefits tax (FBT) must be taken into consideration. For example, a celebratory event after the successful completion of a project can attract FBT under certain conditions.

While the incurring of FBT may considerably increase the cost of a reward, it is not necessarily a reason not to proceed, as long as the FBT component is factored into the allocated budget. For instance, the provision of a service to an employee such as casual childcare to enable attendance at a conference, may be more appreciated by an employee in particular circumstances than a cash bonus provided for the employee to pay for the service.

#### **Gender Pay Equity**

CCO is required to conduct regular gender pay equity audits. Accordingly, when considering payments of bonuses or allowances there must be consideration of the amounts paid to employees of both genders to ensure, as far as practicable, equity for the same levels of performance.

#### Examples of Recognition and Rewards

- ✓ Devise a peer nomination scheme, where staff are encouraged to nominate their peers for recognition.
- ✓ Make a large calendar that can be posted. Call it the "celebration calendar" and use Post-Its and written notes of recognition tacked onto specific dates to honour contributions made by team members.
- ✓ Name a continuing recognition award after an outstanding employee.
- ✓ A personal letter of thanks to the employee or team member from a senior manager for a significant contribution (you might need to get the information to this person before the letter can be written).

- ✓ Write a letter of praise recognising specific contributions and accomplishments. Send a copy to senior management and the employee's personnel file.
- ✓ Movie tickets.
- ✓ A framed memento/letter/certificate.
- ✓ Inscribe a favourite book as a gift.
- ✓ Purchase a plant or flower arrangement with appropriate message.
- ✓ Buy the person something to use in his or her hobby.
- √ Take the person to lunch as a form of thanks or to mark a special event.
- ✓ A gift card to be used by the person to purchase a product of their choice

This is not an exhaustive list.

CCO aim to be creative in devising the most meaningful means of recognising the efforts of individuals and teams. If you have some ideas please forward them in writing to your direct supervisor.

Following on from our most recent newsletter, whereby clients were invited to nominate an employee who they wanted to see recognised for their care and support, we saw an impressive 40 nominations.

As a token of the organisation's appreciation for the ongoing commitment to our clients, and for going above and beyond, all those nominated will receive a gift card, and have their pictures displayed on the soon to be hall of fame, just off reception.

As a Management Team, we have taken on board feedback from staff, clients and other stakeholders, and have decided to continue the Rewards and Recognition Program for the foreseeable future. We hope that this gesture will not only reward staff for their efforts, but encourage and motivate them to strive for continuous quality improvement.

Should you receive positive feedback about any CCO employee, please email me with the following:-

- Date of Feedback
- Employee's name
- Client/Stakeholder providing the feedback
- Details of the positive feedback

This information will be recorded, and the Employee will receive a memo with the feedback from the client/stakeholder, and a voucher within the week.

Our formal Fe	edback and Compla	ints process sti	Il exists, and is	a mechanism v	ve
encourage all this assists us	clients to utilise, who to improve their clie	ether providing ent experience.	positive or neg	ative feedback,	as
This program	is open to all CCO E	Employees			