

Umbrella Multicultural Community Care Services Inc

Governance and Quality Framework

	Umbrella Multicultural Community Care Services Inc.			
Umbrella Inc Governance and 0	Quality Framework	Version 1.0	August 2023 2	

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1. Overview

Expected Client outcome as per Standard 8, Aged Care Quality Standards

I am confident the Umbrella Multicultural Community Care Services Inc is a well-run organisation. I know I can partner with Umbrella Inc in improving the delivery of my care and services.¹

Organisation statement ²

The Umbrella Inc Board of Management is responsible for providing safe and quality care and services for Umbrella's clients and carers.

Our policy ²

Umbrella Inc Board of Management:

- Ensure that clients are engaged and supported in the development, delivery and evaluation of care and services
- promote a culture of safe, inclusive and quality care and services, in a culturally,
 linguistically and religiously appropriate way and are responsible for delivering them
- ensure effective, organisation-wide governance systems.

These governance systems relate to:

- information management
- continuous improvement
- financial governance
- workforce governance
- regulatory compliance
- risk management
- feedback and complaints
- a clinical governance framework (where clinical care is provided)³.

Umbrella Inc has policies and procedures that align with the Aged Care Quality Standards and each of these governance systems.

Australian Government Department of Health <u>Standard 8: Organisational Governance Aged Care Quality Standards</u> June 2018.

Based on the requirements for <u>Standard 8: Organisational Governance Aged Care Quality Standards</u> June 2018.

³ This requirement applies only if clinical care is delivered.

Responsibilities

Management (in collaboration with stakeholders) develops, maintains, promotes and monitors processes and procedures that ensure safe and quality care and services.

Staff:

- follow policies and procedures
- participate in training opportunities
- promote a culture of safe, inclusive and quality care and services
- help clients plan, deliver and evaluate care and services

Clients and their representatives help plan, deliver and evaluate care and services. They also give feedback to management if they feel hindered or unsupported in doing this.

Monitoring organisational governance

Umbrella Inc's governance processes and systems are monitored to ensure they are up to date.

Umbrella Inc encourages staff, clients and other stakeholders to provide feedback on any issues and areas where we can improve.

Definitions

Term	Meaning	
Antimicrobial stewardship	Ongoing actions to: • reduce the risks of increased antimicrobial resistance • extend the effectiveness of antimicrobial treatments. This includes strategies such as monitoring and reviewing how antimicrobials are used.	
Carer (informal)	A person who assists with care, support and help. This doesn't include employees, contractors or volunteers.	
Clinical care	Clinical Care is a form of one-to-one care which is designed to support those affected by clinical health conditions.	
Clinical governance	Clinical governance ensures that everyone – from clinicians to managers and members of governing bodies, such as boards – is accountable to clients and the community for assuring the delivery of health services that are safe, effective, integrated, high quality and continuously improving. Clinical governance is the set of relationships and responsibilities established by a health service organisation between its state or territory department of health, governing body and executive.	
Code of Conduct for Aged Care	The Code of Conduct for Aged Care was introduced on 1 December 2022. The Code aims to improve the safety, health, wellbeing and quality of life of aged care consumers by: promoting ethical conduct, transparency, and accountability; building trust in aged care services; protecting consumers against workers who pose an unacceptable risk of harm.	

Term	Meaning	
Consumer/client	A person we provide, or intend to provide, home care and other related services for.	
Consumer/client- directed care	Care designed around a person's needs, preferences and background. This includes partnerships between clients.	
Cultural safety	 Culturally safe care and services: are socially, emotionally and physically safe for clients respect a person's identity, so who they are and what they need isn't questioned or denied. 	
Dignity of risk	The concept that all adults have the right to make decisions that affect their lives and have those decisions respected, even if there is some risk to themselves.	
Diversity	A person's varied needs, characteristics and life experiences, such as specific social, cultural, linguistic, religious, spiritual, psychological, medical, and care needs. This includes diverse gender and sexuality identities, experiences and relationships, including lesbian, gay, bisexual, transgender or intersex (LGBTIQ+).	
Infection prevention and control	Strategies to create safe care environments through practices that minimise the risk of infectious agent transmission.	
Respectful	 Understanding a person's culture Acknowledging differences Being actively aware of these differences Understanding that each client is unique and has a right to be treated inclusively and respectfully. 	
Serious incident response scheme	The SIRS is an initiative to help prevent and reduce the risk and occurrence of incidents of abuse and neglect of older Australians receiving Commonwealth-subsidised aged care and services. It commenced in residential aged care on 1 April 2021 and was extended to home services on 1 December 2022. The SIRS sets out arrangements for providers of aged care to manage and take reasonable action to prevent incidents with a focus on the safety, health, wellbeing and quality of life of consumers. The Aged Care Quality and Safety Commission must be notified of all reportable incidents.	

Term	Meaning	
Special needs groups	People with special needs, including: • people from Aboriginal and Torres Strait Islander communities • people from culturally and linguistically diverse backgrounds (CALD) • people who live in rural or remote areas • people who are financially or socially disadvantaged • veterans • people who are homeless or at risk of becoming homeless • care leavers • parents separated from their children by forced adoption or removal • people who are lesbian, gay, bisexual, transgender and intersex (LGBTI). (as defined in Aged Care Act 1997, section 11-3)	
Support staff including support workers	All staff involved in delivering services and care to clients, at hom in social support group program settings.	

2. About Umbrella Inc

Overview

Umbrella Multicultural Community Care Services Inc is a not-for-profit community organisation that provides aged care services to older people of culturally and linguistically diverse backgrounds and those identifying as LGBTIQ+.

Our services include:

- Home Care Packages
- Commonwealth Home Support Program services
- Aged Care Volunteer Visitors Scheme
- Carer Gateway
- Care Finder Program
- Multicultural Village Hub
- Rainbow Migrants

Mission

At Umbrella Inc, we believe that everyone has an equal right to enjoy their 'Golden Years.' We believe that language, gender identity, cultural or financial status should not be a barrier to accessing quality services. We believe that Umbrella's ethos of respect, passion, commitment to our mission, and our staff's hard work, can change someone's life.

Purpose

Umbrella Inc strives to create and deliver innovative, high quality, culturally appropriate and accessible aged care services with respect, compassion and commitment to addressing diverse needs and aspirations of our valued clients and make their 'Golden Years' healthy, happy and enjoyable.

Our Values

Compassion:

We are passionate about helping people.

We work in a supportive, caring and culturally appropriate way.

We value our differences, like family.

Excellence:

We provide quality and safe services.

We actively seek to improve.

We are dynamic, inclusive and collaborative.

Respect:

We are open and honest.

We embrace diversity.

We celebrate achievements.

Accountability:

We do what's right and learn from mistakes.

We take responsibility.

We lead by example.

Partners with clients

Our clients partner with us to deliver high-quality care and services that meet their needs throughout their time with us.

Aged care sector statement of principles

While working to achieve our objectives, we remain aware of the <u>Aged Care Sector Statement of Principles</u>.

It has several guiding principles for the aged care system of the future:

- Client choice is at the centre of quality aged care.
- Support for family carers will remain a major part of home care delivery.
- The provision of formal home care is innovative and responsive.
- The system is both affordable for all and sustainable.4

Target group for Home Care Packages and Commonwealth Home Support Program

Umbrella Inc's target group is older people (65 years and over) whom My Aged Care has assessed as eligible for a Home Care Package or Commonwealth Home Support Program services.

Services

Home Care Packages are individually planned and coordinated packages of community aged care services for people with higher needs than the CHSP can cater for.

Services include:

- personal care
- nursing care
- allied health/therapy

⁴ Australian Government Department of Health <u>Aged Care Sector Statement of Principles 2015</u>

- assistance with medication
- · meal preparation and diet
- domestic assistance
- home maintenance
- · home modification
- goods, equipment and assistive technology
- transport
- social support individual or group
- respite care.

Umbrella Inc Constitution

Umbrella Inc is a legal entity under the Associations Incorporations Act 2015 (WA) Constitution that:

- underpins our operations and services
- provides the legal framework for our Board of Management

The Umbrella Inc Board of Management and CEO ensure our policies and practices are consistent with the constitution.

In particular, the Board ensures we meet all legal requirements outlined in the Constitution.

The Board is responsible for reviewing the Constitution to ensure it is up to date and relevant to the changing environment we operate in.

Umbrella Inc is also governed by the *Australian Charities and Not-for-profits Commission Act* 2012.

Board of Management

Umbrella Inc Board of Management includes:

- President
- Vice President
- Secretary
- Treasurer
- Ordinary Board Members.

The Board skill set is varied with a minimum of one member who has experience in clinical care. Board members are recruited to ensure an appropriate skill set across the Board.

Role of the Board

The Board:

- provides strategic direction
- ensures good governance
- adopts an annual budget
- monitors operations to make sure we:
 - meet our objectives
 - o remain a viable organisation
 - meet our legal requirements, particularly around the organisation's funding, contractual arrangements, staff employment and service delivery
 - ensure the safety of staff and clients

The Board is responsible for providing safe and quality care and services⁵.

Working with the CEO

The Board works with the CEO, who:

- implements the Board's directions and decisions
- gives the Board information to effectively monitor operations and budgets
- ensures day-to-day operations are managed in line with policies and procedures.

If any issues aren't covered by policies and procedures, the CEO refers them to the Board for a decision.

Involvement in management

The Board governs Umbrella Inc but is not involved in day-to-day management. The Board delegates authority and provides guidelines to the CEO.

The Board cannot direct staff or volunteers unless authorised by a meeting of the Board.

The Board can nominate a member to liaise with the CEO.

Responsibilities

Legal responsibilities

Umbrella's Board of Management operates within relevant federal, state and local government laws and funding provider requirements.

The Board also operates in line with:

- the Constitution
- the Associations Incorporations Act 2015 (WA)

Accountability for the provision of safe and quality care and services is a requirement of <u>Standard 8 of the Aged Care Quality Standards</u>

- Aged Care Act 1997 and related principles
- Aged Care Quality Standards
- funding and grant agreements
- ACNC Act 2012
- And all other relevant acts, regulations, industry standards and codes of practice e.g.
 Privacy Act; WA Work, Health and Safety Act (2020)

The Board complies with all legislation relating to staff and volunteers, including:

- minimum employment conditions and relevant awards (Fair Work Act)
- work, health and safety
- · equal employment opportunity
- workers' compensation
- superannuation
- insurances
- other relevant legislation or regulations.

Policy and planning responsibilities

The Board ensures that:

- Umbrella Inc has clear and relevant objectives to guide operations, including a strategic plan
- clients receive safe and quality care and services in line with the Aged Care Quality
 Standards and relevant funding program guidelines through management reports
- policies and procedures are up- to- date

Financial responsibilities

The Board will exercise prudent financial management, act honestly, in good faith and in the best interests of both the organisation and is stakeholders, whilst in the process of undertaking its fiduciary duty

The Board ensures that:

- Umbrella Inc has an approved annual budget
- expenditure is within the budget
- Umbrella Inc has enough income to meet budget expenditure requirements
- the conditions of funding agreements and guidelines are met
- funds are accounted for and a financial audit is done every year.

Staff management responsibilities

The Board ensures that:

the best possible staff are recruited and offered appropriate training

• staff receive training, support, direction and supervision.

Decision making

The Board:

- makes decisions in good faith for a proper purpose
- doesn't have a material personal interest in a decision and immediately discloses any interest they do have
- makes all decisions in the organisation's best interests
- determines how a decision will affect the organisation's business performance, especially if it involves significant funds or could affect Umbrella's reputation
- understands Umbrella's financial position and performance and ensures the organisation can pay its debts on time
- Obtains trusted professional advice where needed to make an informed decision.

Working with management team and clients

The Board ensures its directions and decisions are implemented.

It works with the CEO, senior management and clients to achieve the best results for all parties.

Attendance at meetings and meeting quorum

Umbrella's Constitution 17 (4) states 'At a Board meeting, 50% plus 1 of the total number of Board members constitute a quorum.'

Board members aim to attend all scheduled and extraordinary board meetings.

If a Board member can't attend a meeting, they must notify the President or CEO as soon as possible to ensure the meeting meets the quorum.

Umbrella's Constitution 14 (3) states 'If a member of the Board misses more than three (3) consecutive Board meetings, or three (3) meetings in a financial year without a valid reason, the Board can then declare a casual vacancy'.

Code of Conduct

The Board operates best when all members understand their responsibilities. This Governance Framework clarifies responsibilities, expectations and includes code of conduct for board members.

Board members agree to:

- follow Umbrella Inc. Values
- follow all the rules, including those in the constitution, and others set by the Board
- follow any organisational policies and procedures
- attend board meetings whenever possible (in person or online) and send apologies if attendance is impossible
- represent Umbrella Inc positively

- not discuss confidential information with people outside Umbrella Inc, staff or members without the Board's consent
- not physically or verbally abuse Umbrella Inc clients, staff (including volunteers) or members
- act honestly, in good faith and in Umbrella Inc's best interests.

The Umbrella Inc Board also follows the Aged Care Quality and Safety Commission's Code of Conduct

Conflicts of interest

All Board members, Umbrella members, staff and volunteers act in the organisation's best interests.

If someone's business or personal interests or affiliations conflict with (or look like they conflict with) the organisation's interests, this procedure applies:

- If a board member has a direct or indirect monetary interest in any contract the board is considering, they must tell the board as soon as they become aware of it.
- This interest is recorded in the minutes of the board meeting where it is disclosed.
- This member can't participate in any board discussion or decision about that contract.

If a conflict of interest is raised or identified, the conflict is noted in the Board meeting minutes.

Vacancies on the Board and recruitment of Board members

According to Umbrella's Constitution,13 (2), the Board shall consist of a total of no less than 8 members and no more than 12 members, all of whom shall be members of the Association.

Vacancies on the Board:

Constitution 15 (1): The Board shall have the power at any time to appoint any member of the Association to fill any casual vacancy on the Board until the next Annual General Meeting.

Constitution 15(2):

The continuing members of the Board may act, notwithstanding any casual vacancy in the Board, but if and so long as their number is reduced below the number fixed by or pursuant to these rules as the necessary quorum of the Board, the continuing member or members may act for the purpose of increasing the number of members of the Board to that number or for summoning a General Meeting of the Association, but for no other purpose.

Appointment of a member of the Association to fill a casual vacancy of the Board (until the next Annual General Meeting) is undertaken through:

- a Board member recruitment process, including an application form to join the Board of Umbrella Inc
- a Board Member recruitment interview and assessment against criteria

Orientation for new Board Members

New Board members receive an Orientation Pack and meet with the Chief Executive Officer at a mutually convenient time.

The CEO or a delegated staff member prepares and distributes this information.

Resignation or Removal from office of a member of the Board

Umbrella's Constitution 14 (1-10) outlines the circumstances and processes for a board member either resigning from the board, applying for a leave of absence or their membership of the board being terminated.

Approved provider responsibilities ⁶

Key personnel

Umbrella Inc. is an approved provider under the *Aged Care Act 1997* and therefore must meet all the requirements relating to key personnel.

Section 8-3A of the Act defines key personnel as people who are:

- responsible for planning, directing or controlling the applicant's activities.
- responsible for the operation of an aged care service conducted by the applicant, whether or not they are employed by the applicant.
- Key personnel can include, but are not limited to, CEO, executive staff members, managers and all members of the Board of Management. The allocation of appropriate Key Personnel is the Board's responsibility and the criteria is outlined below.

Disqualified individuals⁷

Key personnel cannot be disqualified individuals.

Section 10A-1 of the Aged Care Act defines a disqualified individual as someone who:

- has been convicted of an indictable offence8
- is insolvent under administration (bankrupt)
- · is of unsound mind.

Umbrella Inc makes sure none of our key personnel are disqualified individuals, we ensure that each person understands the obligations of key personnel and approved providers regarding disqualified individuals.

⁶ Australian Government Department of Health website <u>Becoming an Approved Provider/What are Key</u> Personnel.

Australian Government Department of Health Home Care Packages Program Operational Manual A Guide for Home Care Providers Version 1 March 2020 15.2 My key personnel have changed. What do I need to do? p 92.

⁸ Including murder, manslaughter, aggravated assault, the intentional and unlawful administration of drugs or poisons, major and minor indictable offences (SA). committing fraudulent or dishonest activities. If a person has been convicted of an offence, check with a legal advisor to see if the offence is indictable. Victoria does not distinguish rights

If we believe someone *may* be a disqualified individual, we take the steps outlined below.

Before a person can become one of our key personnel, we:

- 1. obtain a police certificate for them (with their consent)
- 2. conduct a search of the Aged Care Banning register
- 3. conduct a search of bankruptcy records
- 4. Relevant Statutory Declarations.
- 5. Employment, Curriculum Vitae and referee checks

If we decide that someone *is* a disqualified individual, we remove them as key personnel.

Umbrella Inc keeps copies of all documentation.

Note: If we fail to take reasonable steps to ensure our key personnel are not disqualified individuals, we may:

- have to pay a fine
- have our approved provider status revoked
- face a prison sentence.

Key personnel must:

- tell the board if they become a disqualified individual
- renew their documentation every three years.

The CEO and Board President are responsible for ensuring checks occur when needed, in conjunction with the Human Resources staff.

Banning Orders – Aged Care Banning Order Register

A banning order is a form of enforcement action which prohibits or restricts a person from engaging in, providing or being involved in the provision of aged care.

An offer of tenure for board members and employment for staff and volunteers cannot occur until the completed police record check and referee checks have been assessed and the Aged Care Banning Order Register is checked for entries against the name of applicant.

Umbrella Inc is obligated to take reasonable steps to ensure their workers and governing persons comply with the Code of conduct for Aged Care.

All Umbrella Inc new employees and board members will be provided with a copy of the Code.

Material changes in circumstances9

Approved providers must be able to provide compliant, high quality and safe home care services at all times.

⁹ Australian Government Department of Health <u>Home Care Packages Program Operational Manual A Guide for Home Care Providers Version 1 March 2020</u> 15.1.2 Material changes to suitability p 91

Providers are assessed against their:

- experience in providing aged care or other relevant care
- understanding of approved provider responsibilities
- systems in place (or to be implemented) to meet these responsibilities
- records of financial management and the methods used, or proposed, to ensure sound financial management
- conduct as a provider and obligations arising from the receipt of Australian Government payments for providing aged care or other relevant care.

The Board must do everything it can to prevent a change in circumstances that would affect our suitability to provide aged care.

We must also tell the <u>Aged Care Quality and Safety (ACQSC) Commissioner</u> if such a change does <u>occur within 14 days</u>, <u>including changes in key personnel</u>. Penalties apply if we don't advise of these changes.

The board must also:

- tell the ACQSC commissioner the name and address of a home care service before providing home care through that service
- tell the commissioner about any changes to a service's name and address within 14 days of the change
- comply with any agreement we make in lieu of having our approved provider status revoked
- respond to a commissioner's request for information (within 14 days of the request or other period specified) about:
 - o our suitability as an aged care provider
 - payments made under the Aged Care Act 1997 or Aged Care (Transitional Provisions) Act 1997
 - o our financial situation

See:

Financial disclosure obligations¹⁰

¹⁰ Australian Government Department of Health <u>Home Care Packages Program Operational Manual A Guide for Home Care Providers Version 1 March 2020</u> 15.3 What are my financial disclosure obligations? p 93

Volunteers

Volunteers play a vital role in our organisation, including in the Aged Care Volunteer Visitor Scheme (ACVVS). Umbrella Inc adheres to the national guidelines for the ACVVS and has a Volunteer Code of Practice.

The Umbrella Inc volunteer program has policies and procedures that guide:

- attracting, managing, recognising and retaining volunteers
- managing risk and safety.

We also collect and analyse information that inform management of the volunteer program, including:

- annual volunteer satisfaction surveys
- police checks on all volunteers
- training register

3. Governance structure and processes

Governance structure – as per organisational chart

All reporting and supervision are based on the organisational chart.

Governance processes

Corporate governance responsibilities

The organisation's corporate governance responsibilities include:

- financial governance
- · clinical governance
- · risk governance
- other governance, such as human resources and legal.

The CEO manages Umbrella Inc's governance systems and processes and ensures appropriate reporting to the board.

The governance processes are built on cooperation and reporting among the different levels of management and the board.

Governance reporting process

Umbrella Inc has several processes to ensure that governance oversight and reporting is adequate, including:

- regular reports to the Board by the CEO, finance manager and other key managers
- established governance processes and systems, such as a strategic plan, approval of an annual budget and monthly financial reports
- a clinical governance framework (in development)
- a clinical governance policy
- internal audits, a continuous improvement plan, continuous improvement register and a risk management plan.

Clinical governance¹¹

Umbrella's Clinical Governance Policy is focused on care provided by support workers and limited clinical (nursing) care provided by nursing staff.

The Policy includes Antimicrobial stewardship, Minimising the use of restraint and Open Disclosure.

¹¹ Based on the Australian Government Aged Care Quality and Safety Commission <u>Toolkit Clinical Governance</u> <u>Framework Guide</u> July 2019.

Antimicrobial stewardship:

Umbrella Inc. supports and works to change those practices that have contributed to the development of antibiotic resistance and implement new initiatives to reduce inappropriate antibiotic usage and resistance.

Minimising the use of restraint:

Restraint means any practice, device or action that interferes with a client's ability to make a decision or restricts a client's free movement. Umbrella Inc. creates a restraint-free environment within the client's home, at social support activities and out in the community. We focus on responding to the client's behaviour and understanding its cause.

Practising Open Disclosure:

Umbrella Inc has systems to support communication with clients about incidents that have caused harm. Open disclosure usually includes an apology and explaining the facts of what happened. It also includes listening to the client's experience of what happened and explaining the steps Umbrella has taken to prevent it from happening again.

Whistleblowers 12

This section outlines Umbrella Inc's Whistleblower Policy.

Overview:

The Whistleblower Policy has been developed so people can raise concerns about situations where they believe Umbrella or people connected with Umbrella have acted in a way that constitutes serious wrongdoing. This can include unethical, illegal, corrupt or other inappropriate conduct.

Applicability:

Umbrella Inc's policy applies to:

- All current or former Umbrella workers (including volunteers)
- Any individual, associate, family member or dependent of a worker
- Current or former Board members

If they do choose to speak up in line with this policy, Umbrella Inc will extend to them the relevant rights and protections under this policy.

Definition of a Whistleblower:

A whistleblower is a person who discloses actual or suspected Reportable Conduct.

¹² Australian Government ASIC Media Release <u>19-308MR ASIC gives guidance on companies' whistleblower policies and relief to small not-for-profits</u> (accessed 1 March 2020). ASIC is providing relief to not-for-profits or charities with less than \$1 million annual revenue from having a written whistle blower policy. However, they are still bound by the whistleblower protections legislation (see link). GGJ Consultants recommend all organisations have a written policy to clarify responsibilities and processes for whistleblowers and others involved in whistleblower disclosures.

Reportable Conduct is any past or present activity, behaviour or situation considered to be:

- dishonest
- corrupt (including accepting or offering a bribe, of facilitating payments or other such benefits)
- fraudulent
- illegal (including theft, drug sale or use (including the use of alcohol during work hours), violence or threatened violence, or property damage)
- breach of regulation, internal policy or code (such as Umbrella Code of Conduct)
- improper conduct relating to accounting, internal controls, compliance, actuarial, audit or other matters of concern to the whistleblower
- a serious impropriety or an inappropriate situation or circumstances
- endangering health or safety
- serious mismanagement of Umbrella's resources

Protected disclosure: If a whistleblower has reasonable grounds to suspect Reportable Conduct, even if it turns out their concerns are mistaken, Umbrella will support and protect them and anyone else assisting in the investigation. Umbrella will not tolerate any damage inflicted on the whistleblower because they or somebody else has made, or might make, a report of Reportable Conduct.

Handling and Investigating a Disclosure

Upon receiving a Protected Disclosure, Umbrella will, within three to five working days depending on each case, endeavour to assess the disclosure to determine whether:

- It qualifies for protection; and
- A formal, in-depth investigation is required

Confidentiality

A worker can choose to remain anonymous while making a disclosure, throughout the investigation and after the investigation is finalized. Umbrella will do all it can to protect confidentiality.

A whistle blower's identity will not be disclosed unless:

- they consent in writing to the disclosure
- the disclosure is made to ASIC, APRA or the Australian Federal Police (AFP)
- the disclosure is made to a legal practitioner to obtain advice
- disclosure is necessary to prevent or lessen a threat to a person's health, safety or welfare

Reviews and updates

The whistleblower policy is reviewed and updated:

if identified as necessary after a whistleblower incident

Umbrella Multicultural Community Care Services Inc.

- as part of scheduled reviews of Umbrella policies and procedures
- when legislative changes occur that relate to whistleblower requirements.

We conduct reviews and updates through our continuous improvement process. (See our 'Continuous improvement' section.)

We manage changes to legislative requirements through our regulatory compliance process. (See our 'Regulatory compliance' section.)

Organisational calendars

The key management team and program managers maintain calendars which include:

- meeting dates for key management meetings
- management reports to CEO and Board of Management
- funding report dates
- policy and procedures reviews
- scheduled audits and surveys
- reviews of key documents (e.g. client handbook, service agreements).

4. Financial management

Roles and tasks

Umbrella Inc Board

The Umbrella Inc Board, which includes a Treasurer, is responsible for financial management, including:

- monitoring the organisation's financial management
- ensuring financial management and accountability framework is designed to comply with all relevant legislative requirements
- ensuring a robust system of compliance and controls management
- making satisfactory arrangements for auditing Umbrella's financial affairs and,
- monitoring and approving budgets including major capital commitments

CEO

The CEO is responsible to the Board for:

- ensuring the Board has all the necessary information to make sound financial decisions
- reviewing and inspecting the annual budget
- monthly progressive and accurate reporting of the balance sheet, profit and loss statement for Umbrella and the program budgets and budget comparisons
- works with the management team to identify financial program issues and obtains recommendations for solving them.

Finance manager

The finance manager ensures that the finance department functions well and is responsible for all associated activities, including:

- preparing financial reports
- monitoring income and expenditure against the budget and advising the CEO,
 management Team and relevant program and project staff of any issues
- preparing program and project accountability reports
- assisting the CEO and management team as needed.

Financial management practices

These practices apply to financial management in Umbrella Inc:

Bank accounts

All bank accounts are maintained and require Board approval to establish new accounts.

Signatories

Up to three senior managers may be designated signatories to the accounts. The CEO is also a designated signatory.

Budget

An annual budget is developed by the CEO and Finance Manager and presented to the Board Treasurer for review. The CEO and/or Finance Manager present the budget to the Board for endorsement before or in the first month of the financial year.

The Board will approve a Business Plan, including annual budgets for Income and Expenditure, which supports the current Strategic Plan.

A program budget process will be undertaken in May of each year, presented to the Board as a Projected Income and Expenditure Statement, including individual program budgets.

General Ledger Account Management

Accounts payable and receivable records will be kept current by month.

The Chart of Accounts will be accurately coded to program budgets for both Income and Expense entries.

General Ledger accounts will be regularly reported to the CEO and the Board.

Books of accounts

The Finance Manager is responsible for maintaining the books of accounts on MYOB, for processing all receipts and payments, for assisting the CEO in the preparation of the annual budget and for preparing monthly, quarterly and annual financial reports.

Reports

Financial reports are presented to the Board, as per the annual Board and any relevant subcommittees meeting schedule.

Income

Umbrella Inc receipts all monies received.

Payments

All payments are made by credit card or electronic transfer (except petty cash).

Recurrent payments are made electronically where possible.

Supplier accounts

Where possible, Umbrella Inc establishes accounts with suppliers and charge purchases to those accounts. Accounts are paid in full on receipt of the statement or invoice.

Monthly and end of Year Reconciliations and ATO reports

Monthly reconciliations: the cheque account is reconciled; Instalment Activity Statement is completed and forwarded to the ATO; Business Activity Statement is completed and forwarded to the ATO; Superannuation Guarantee contributions are reconciled, and payments made.

End of year reconciliations: Books of accounts are balanced and closed off; wages are reconciled, and payroll is finalised through the Single Touch Payroll direct to ATO

5. Funding reports and monitoring

Funding provider accountability reports

Funding reports are completed as a condition of funding grants.

The CEO is responsible for ensuring that reports are prepared as required, and reviewed and signed off by the designated positions before they are sent to the funding provider.

Funding provider acknowledgement

Umbrella Inc acknowledges the support of funding bodies in all published material that relates to the grant agreement.¹³

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¹³ Australian Government Department of Health <u>Commonwealth Home Support Programme - Program Manual 2018-2020</u>, Acknowledging the Funding p. 87.

6. Planning

Clients as partners

The focus of Umbrella's service planning is to develop and deliver the best services that meet clients' needs and preferences.

To achieve this, Umbrella welcomes clients and their family and friends/carers as partners. We encourage and support them to express their views about Umbrella and the care and services we provide.

Umbrella is also in the process of establishing a Client Committee to obtain more in-depth feedback about care and suggested improvements.

Continuous Improvement Plan and Register

Umbrella develops an annual plan for continuous improvement to assist in planning any improvements operationally, across the organisation.

The organisation also maintains a continuous improvement register which details improvements in the operations of home care programs and other services/programs/operations across the whole organisation.

The training and compliance coordinator maintains the continuous improvement plan and register.

Strategic plan

The Board, with the CEO and key management team, develops a strategic plan that covers major, longer- term directions and changes. The CEO is responsible for executing it. Client and family carer input is also canvassed.

Umbrella's planning process:

Planning activity	Notes	When
Continuous improvement activities	See 'Continuous improvement' section. These activities help us identify improvements, create a plan and feed into the continuous improvement register	Ongoing
Review and development of the strategic plan	Includes high level plans for the next three – five years	As determined
Aged Care Quality Standards Quality Review processes	Umbrella has processes and systems to ensure safe and quality services. Internal audits identify improvements needed to meet the Aged Care Standards and opportunities for improvement. These feed into the Continuous Improvement Register and Plan	Ongoing, annually, as required (frequency depends on what is being reviewed)

Umbrella Multicultural Community Care Services Inc.

Planning activity	Notes	When
Ongoing implementation of (and monitoring progress in implementing) items identified in the continuous improvement register	Reported through staff and managers monthly reports, staff and other meetings	Monthly

7. Regulatory compliance

Identifying relevant requirements

The CEO and Board ensure that all Umbrella operations, including client services, comply with:

- funded program guidelines
- relevant legislation
- regulatory requirements
- · professional standards.

Key legislation, regulations and other requirements include: (with reference to current version):

- Aged Care Quality Standards
- Aged Care Quality and Safety Commission Guidance and Resources for Providers to Support the Aged Care Quality Standards
- Aged Care Sector Statement of Principles
- Australian Government Department of Health Charter of Rights
- Carers Recognition Act 2004
- Aged Care Act 1997 and Principles, including¹⁴:
 - Accountability Principles 2014
 - Approval of Care Recipients Principles 2014
 - Approved Provider Principles 2014
 - Quality of Care Principles 2014 (containing the Aged Care Quality Standards)
 - Records Principles 2014
 - Sanctions Principles 2014
 - Subsidy Principles 2014
 - User Rights Principles 2014 (containing the Charter of Aged Care Rights)
- Aged Care (Subsidy, Fees and Payments) Determination
- Aged Care Quality and Safety Commission Act
- Aged Care Quality and Safety Commission Rules
- Commonwealth Home Support Program Guidelines and Manual
- Commonwealth Home Care Packages Program Operational Manual

¹⁴ Australian Government Department of Health <u>Home Care Packages Program Operational Manual A Guide for Home Care Providers Version 1 March 2020</u> 2.5 What governs the Home Care Packages Program? P. 12 Note: Information regarding pre-1 July 2014 provisions are in Appendix A.

- CHSP, HCP, ACVV, Village Hub, Rainbow Migrants, Care Finder and other relevant Grant Agreements
- Notices and advice from the Department of Health, Aged Care Quality and Safety Commission, My Aged Care, Services Australia, Office of the Information Commissioner, ASIC and other relevant government departments
- Work, Health and Safety Act (WA)
- Legislation governing the employment of staff and volunteers including: Fair Work
 Act 2009; relevant staff awards; work health and safety; income tax; superannuation;
 equal employment opportunity; anti-discrimination, workers compensation and injury
 management
- Privacy Act 1988 and Australian Privacy Principles
- Fire and Emergency Regulations
- NHMRC Australian Guidelines for the Prevention and Control of Infection in Healthcare 2019
- Food Standards Australia New Zealand Food Standards Code Standard 3.3.1 Food Safety Programs for Food Service to Vulnerable Persons.
- Racial Discrimination Act 1975 and Sex Discrimination Act 1984
- Human Rights and Equal Opportunity Commission Act 1987
- Disability Discrimination Act 1992
- Medical Treatment Planning and Decisions Act 2016 (Making and Advance Care Directive)
- Australian Charities and Not-for-Profit Commission Act 2012

Monitoring legislation changes

The CEO, key Management team and Training and Compliance coordinator are responsible for keeping up to date with changes in legislative and regulatory requirements.

These changes are monitored through:

- review of peak body and organisational websites, email communication updates, newsletters, noting advice of impending changes e.g Department of Health and Aged Care
- changes advised by any other government or statutory authorities e.g. the Department of Commerce; Fair Work Australia;
- review of industry body newsletters/emails noting information about changes to requirements
- review of newsletters and notices from Fair Work Ombudsman
- accessing relevant information on the internet, through webinars and workshops
- advice from Umbrella Board members and service provider networks

Implementing changes

When information advising of legislative, regulatory or funding changes is received, it will be reviewed by the CEO, key management team and Compliance coordinator to identify if/what the implications are for Umbrella and the timeframe/s involved.

The following process is followed:

- updating relevant policies and procedures
- recording these updates in the policy and procedure amendment schedule
- updating relevant forms
- advising staff about changes through staff meetings, notices, memos and emails, and education and training
- informing other stakeholders, such as clients, referrers and suppliers, through discussions and meetings, notices and correspondence/emails.

Applying regulatory compliance processes

Umbrella has policies and procedures which reflect legislative requirements, including:

- police checks for all staff, volunteers, including Board members
- work health and safety and workers compensation
- equal employment opportunity
- superannuation
- privacy
- insurances
- food safety

Examples of processes to implement requirements:

- All staff and volunteers having a current National Police Certificate updated every three years.
- Work health and safety considerations being part of risk management strategies for staff and volunteers.
- Privacy and confidentiality being maintained
- Food safety requirements for delivering and/or serving food.

Monitoring compliance and impacts on Umbrella

- When changes to practices and processes are implemented in response to legislative, regulatory, guideline or professional standards requirements, the CEO and managers monitor and evaluate these changes to ensure the requirements have been implemented and there are no unintended consequences.
- Mechanisms may include monitoring workers meetings and reports, client feedback/complaints and meetings with stakeholders.

Work, Health and Safety

- Umbrella is under the jurisdiction of the Work, Heath and Safety Act (WA)
- The Umbrella Inc Board recognises its responsibility to: ¹⁶
- provide safe work premises
- assess risks and implements appropriate measures for controlling them
- ensure goods and substances are used and handled safely
- provide and maintain safe vehicles, machinery and materials
- assess workplace layout and provide safe work systems
- provide a suitable working environment and facilities
- have insurance and workers compensation insurance for employees

Board, employees, contractors and volunteers

The Umbrella Board, staff, contractors and volunteers must all:

- comply with instructions given for work, health and safety
- use any personal protective equipment (PPE) provided and be trained to use it.
- not deliberately or recklessly interfere with or misuse any item provided for the work health and safety of the workplace, place others at risk or injure themselves

¹⁶ Australian Government Business Health and Safety website Accessed September 2019

8. Continuous improvement

Overview

The Umbrella Board of Management is committed to continuously improving all aspects of Umbrella's operations to improve the services we deliver to clients.

The organisation regularly seeks input and feedback from clients, carers, the workforce and others and uses the input and feedback to inform continuous improvements for clients and the whole organisation.

Management team role

The key management team's role includes overseeing Umbrella's continuous improvement process.

The key management team:

- supports staff and volunteers to identify improvements to the continuous improvement processes.
- reviews data, including client feedback, to identify improvements
- implements continuous improvement processes
- maintains the Continuous Improvement Register and Plan

Continuous improvement and risk management

Umbrella's Board and key management understand that risk management and continuous improvement are closely related and need to be integrated

For more information, see the section on:

- 'Risk management' for our risk management processes.
- 'Continuous improvement work plan'.

Improvement process

Umbrella's improvement process reflects the 'Plan, do, check, act' model shown in Figure 1.

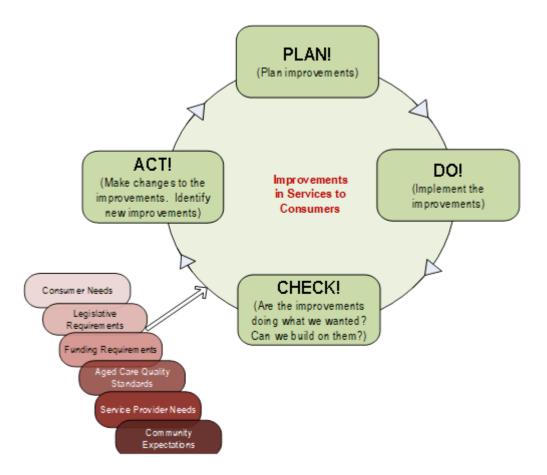


Figure 1: Plan, do, check, act improvement cycle

Plan

- Clarify issues or problems.
- Collect and review data or other information about issues or problems.
- Identify the causes of issues or problems.
- Clearly identify possible improvements.
- Clarify the outcomes for improvements.
- Develop strategies to implement improvements. Consider stakeholders and strategies to get management support.
- Identify how to measure the improvement's success and collect the data.
- Identify key tasks.

Do

- Get approval for improvements.
- Implement the improvements and assign key tasks.
- Monitor the implementation and make sure key tasks are completed.
- Collect data on improvements.

Check

- Ask whether the improvement worked. If not, find out why.
- Check for any unintended consequences.
- Collect ongoing data about Umbrella operations, such as client feedback, staff
 accident/incident reports, adverse event reports, hazard reports and audits. Assess
 what the data says about the improvements.

Act

- Consider whether the improvements suggest other improvements, such as staff training, procedure reviews and operational changes.
- Share evaluation feedback with relevant stakeholders.
- If improvements didn't work, consider what to do next.
- If there were unintended consequences, consider whether to do anything about them.
- Consider new data to see if it suggests improvements.
- Look for things to improve look at problems and consider solutions.

We are committed to ongoing improvement – it's built into our culture and practices.

This ensures the organisation continues to change and adapt to the needs of its clients, funders and the wider community.

9. Risk management

Overview

Umbrella has systems and processes to help identify and assess risks to the health, safety and well-being of clients and workers. If risks are identified, Umbrella finds ways to reduce or remove the risks in a timeframe matching the level of risk and how it's affecting clients and staff/volunteers.

Umbrella's risk management system identifies and evaluates incidents and 'near misses' (including incidents in delivering care and services). Umbrella uses this information to improve its performance and how it delivers quality care and services.

Role of Board of Management and CEO:

The Umbrella Inc Board is responsible for ensuring Umbrella has strategic guidance regarding risk management.

The CEO is accountable for ensuring risks are identified, and appropriate treatment is applied to mitigate and/or minimise risks.

Risk Management Plan:

Risk management plans include:

- Date identified the date the risk was identified;
- The specific risk identified the risks identified by Umbrella staff, volunteers (including Board members), clients
- What can go wrong and how Umbrella will mitigate or minimise the risk.

Risk Rating Matrix:

The following Risk Rating Matrix is used to determine the status of each risk based on the likelihood and consequences of the risk. The management team judges the **Likelihood** and **Consequences** of the risk to identify the rating. The risks are rated without controls in the first instance, controls are identified, and then the risk is reassessed as low or medium with the controls in place. This allows Umbrella to gauge the success of our risk mitigation strategies. The Risk Rating Matrix is also included in the Risk Management Plan.

CONSEQUENCES					
	Insignificant 1	Minor 2	Moderate 3	Major 4	Catastrophic 5
Almost Certain A	Medium	High	High	Extreme	Extreme
Likely B	Medium	Medium	High	High	Extreme
Possible C	Low	Medium	High	High	High
Unlikely D	Low	Low	Medium	Medium	High
Rare E	Low	Low	Medium	Medium	High

Methods for reviewing risks:

- Annual external financial audit
- Workplace Health and Safety Committee
- Regular maintenance and checks of equipment
- Program internal audits
- Client feedback and complaints
- · Incident reports
- Worker performance review
- Business/operational plan review
- Annual surveys and questionnaires clients, volunteers and staff
- Review of contract agreements

All social support activities have a risk assessment report, the template of which is updated annually.

The risk assessment report is given to the program coordinator leading the activity.

The report must identify all risks rated 'medium' or above and include strategies for addressing the risk. These medium or above risks must be communicated with the senior manager as a matter of priority.

Identifying controls

Controls are strategies to manage risk balanced with the control's cost and inconvenience.

Common controls include:

- providing staff training
- providing information, including updated processes, procedures

- using safe or safer equipment
- changing procedures or practices, including reviewing clinical care processes
- doing personnel checks, including referee checks, driver licences, motor vehicle registrations, professional registrations and criminal history checks
- developing plans for dealing with risks that occur.

Recording improvements

Umbrella Inc records improvements implemented as a result of risk management reviews and planning in the:

- Continuous improvement plan
- Risk Management Plan.

This ensures the improvements are implemented, monitored and evaluated.

Controls are identified and the risk rated again with the controls in place. This helps the Board of Management and CEO gauge the success of risk mitigation strategies.

		CONSEQUENCES				
		Insignificant 1	Minor 2	Moderate 3	Major 4	Catastrophic 5
Q	Almost Certain A	Medium	High	High	Extreme	Extreme
LIKELIHOOD	Likely B	Medium	Medium	High	High	Extreme
LIKE	Possible C	Low	Medium	High	High	High
	Unlikely D	Low	Low	Medium	Medium	High
	Rare E	Low	Low	Medium	Medium	High

Figure 2: Risk management rating matrix

Client choice and risk – the dignity of risk

Dignity of risk is a concept that supports a client's independence and right to make their own choices, including taking risks.

Refer to Umbrella's Client Risks Policy and Procedure (Standard 1 Requirement (3) (d): Each client is support to take risks to enable them to live the best life they can.

Abuse and neglect

Umbrella follows the West Australian Government's guidelines for elder abuse to ensure the safety of our clients.

Forms of elder abuse

The Western Australian Government recognises five forms of abuse:

- physical abuse
- sexual abuse
- psychological or emotional abuse
- financial exploitation
- neglect or abandonment

Umbrella Inc organises staff and volunteer training about forms of elder abuse, disseminates information via social media and promotes the Elder Abuse Helpline and other services.

Serious Incident Response Scheme

The SIRS is an initiative to help prevent and reduce the risk and occurrence of incidents of abuse and neglect of older Australians receiving Commonwealth-subsidised aged care and services. It commenced in residential aged care on 1 April 2021 and was extended to home services on 1 December 2022.

The SIRS sets out arrangements for providers of aged care to manage and take reasonable action to prevent incidents with a focus on the safety, health, wellbeing and quality of life of consumers.

There are 8 types of reportable incidents under the Commission's Serious Incident Response Scheme:

Unreasonable use of force – e.g. hitting, pushing, shoving, or rough handling a client;

Unlawful sexual conduct or inappropriate sexual conduct – such as sexual threats against a client, stalking, or sexual activities without client consent;

Neglect of a client – for example, withholding personal care, untreated wounds, or insufficient assistance during meals;

Psychological or emotional abuse – such as yelling, name calling, ignoring a client, threatening gestures, or refusing a client access to care or services as a means of punishment;

Unexpected death – where reasonable steps were not taken by the provider to prevent the death, the death is the result of care or services provided by the provider or a failure by the provider to provide care and services;

Stealing or financial coercion by a staff member – for example, if a staff member coerces a client to change their will to their advantage, or steals valuables from the client;

Inappropriate use of restrictive practices – where it is used in relation to a client in

circumstances such as:

- where a restrictive practice is used without prior consent or without notifying the client's representative as soon as practicable;
- where a restrictive practice is used in a non-emergency situation, or
- when a provider issues a drug to a client to influence their behaviour as a form of restrictive practice;

Unexplained absence from care – where the client is absent from the service without explanation and there are reasonable grounds to report the absence to the police.

Aged Care Code of Conduct

The Code of Conduct for Aged Care was introduced on 1 December 2022.

The Code aims to improve the safety, health, wellbeing and quality of life of aged care consumers by:

- promoting ethical conduct, transparency, and accountability;
- building trust in aged care services; and
- protecting consumers against workers who pose an unacceptable risk of harm.

The Code applies to:

- approved providers of home care, residential and flexible care services;
- governing persons of approved providers Board members and Chief Executive Officers;
- aged care workers of approved providers including volunteers, contractors and subcontractors of the provider

Banning Order

An order made by the Aged Care Quality and Safety Commission that a person cannot be involved in the provision of aged care, or in providing certain care, support and services. Banning orders may include conditions on how the person is engaged in the aged care sector and are maintained on the Banning Orders Register.

Workplace bullying

Umbrella Inc believes all workers should be able to work in an environment free from bullying and will take all reasonable steps to ensure workers are not bullied in the workplace.

Workplace bullying is a risk to health and safety. It can occur wherever people work together in all types of workplaces. It may cause the loss of trained and talented workers, reduce productivity and morale and create financial and legal risks.

The longer the behaviour continues, the more difficult it is to address and the harder it becomes to repair working relationships.

Umbrella takes steps to prevent it occurring and responds quickly if it does. Refer: Preventing Workplace Bullying – Policy and Procedure (Standard 7 – Human Resources)

COVID Safe Management Plan and Activity Continuity Plans

The COVID 19 global pandemic had a significant impact on Umbrella's operations, staffing and clients.

As an approved aged care provider, Umbrella Inc. developed a comprehensive, organisation wide COVID Safe management plan, updated as required by WA and Commonwealth Government guidelines.

In response to the COVID 19 pandemic, Umbrella programs also developed and updated an Activity Continuity Plan and all clients had an Client Emergency Care Plan.

10. Information management systems

Information management is the collection and management of information from one or more sources and the distribution of that information to more or more audiences. Information management sometimes involves those who have a stake in or a right to that information.

The objective of information management is to manage data efficiently and to make information secure, easily accessible, meaningful, accurate and timely to support data-driven decision making. It is an umbrella term that encompasses all the systems and processes within an organisation for the creation and use of corporate information.

Information management includes: people, processes, technology and content.

Communication strategies

These communication strategies underpin how we manage information in Umbrella:

- regular and structured meetings key management team and programs
- regular reporting, including CEO and program manager monthly reports to the Board
- Umbrella Intranet with: Policies and Procedures; Work Instructions; Training; Forms and Templates; Human Resources; Employee Wellness; Work Health and Safety; Marketing and Communication.
- training for staff in relevant policies and procedures
- staff induction/orientation and induction manuals
- staff and client involvement in continuous improvement process
- staff involvement in planning process
- · emails and memos to staff as required
- letters and notices to clients as required;
- information for the public through the Umbrella website and Facebook page

Systems used to maintain information and records

Umbrella's primary information and records management system is the shared electronic drives and hard copy client and human resources files.

The following business and administrative database and software applications are endorsed for the capture and storage of specific information and records:

Sandwai: Client information and management

MYOB: Finance system

Policies and procedures

Umbrella has policies and procedures that align with the Aged Care Quality Standards. New policies and procedures are developed as needed and all policies are reviewed every three

years or more often if required.

Umbrella encourages all staff to be involved to ensure our policies and procedures reflect practice, and to promote familiarity and a sense of ownership with the material.

Umbrella maintain all forms on the Umbrella Intranet site: Forms and Templates.

Accessing policies and procedures

All staff can access the policies and procedures through the Umbrella Intranet site.

Updating policies and procedures

Umbrella reviews and updates policies and procedures, forms and templates or other material in response to:

- changes to legislation or regulation e.g. the Serious Incident Response Scheme
- changes in funding or funding guidelines and requirements
- feedback from clients, carers, staff and volunteers
- management decisions
- adverse event reports
- financial audits
- quality audits (internal) and reviews (external)

Actions from key management meetings

The meeting minutes reflect:

- follow-up actions that were decided at the meeting
- any changes that need to be reflected in the policies and procedures or the need for new policies e.g. Code of Conduct

Control of policies and procedures

- Staff can access electronic copies of policies and procedures through the Umbrella Intranet
- Only the CEO, or a delegated senior management team member can change the original files.
- Staff may print the documents, but these are uncontrolled documents (other than the authorised printed copies).
- Policies and procedures, including forms, are reviewed over a three-year period, or as needed.

Client information

Principles for collecting client information

(See 'Consumer rights and responsibilities', 'Consumer rights' and 'Personal information'.)

Managing client information

The Aged Care Act¹⁷ specifies the records that aged care providers must keep.

These include:

- client assessments
- individual support/care plans
- medical records, progress notes and other clinical records
- schedules of fees and charges
- agreements
- · accounts of clients
- records of clients' entry, discharge and leave arrangements
- records of a determination that a client is a 'client with financial hardship'
- a record of whether a client (a continuing home care client that we started providing home care to through a home care service on or after 1 July 2014) chose in writing to be covered by the pre or post-1 July 2014 arrangements, maybe we can delete this now
- up-to-date name and contact details for at least one representative of each client and any other client representatives
- copies of unspent funds notices
- records of payments of the client portion or transfer portion of clients' unspent home care amounts
- copies of notices of published exit amounts.

Umbrella must keep these records for seven years after the client ceases receiving Umbrella services.

Office files

The administration team and/or the relevant home care coordinator creates office files as needed and stores them in lockable filing cabinets. These files are secured.

In-home files

Clients with in-home services also have a home file with information needed by support workers

Electronic records

Client information is also stored electronically on the client management system (Sandwai). Home care coordinators complete data entry, including entering new clients, amending data, exiting clients and providing service requests for the care coordination team.

Staff record all client services and case notes in the client management system. Financial records for Home Care Package clients are maintained for each HCP client on the client management system.

Archiving

Archiving will occur once a client has exited Umbrella services, or a worker no longer works/volunteers at Umbrella. Their hard copy files will be archived.

Client or worker's electronic files will be moved into an archived folder. All hard copy archived information is entered in the archives index.

The index records the date of archiving, the file contents, the archive box name and number and the file number and date of destruction.

Timelines for maintaining records

Records are securely destroyed after the time periods shown in the below table.

Documents	Destruction	Department responsible
Worker records	Seven years after the worker ceases	Human Resources
Volunteer records	employment Seven years after the volunteer ceases their role	Community Visitors Scheme or Social Support Department or CEO (for Board members)
Client records	Seven years after the client ceases receiving services	CHSP, HCP and CVS programs
Payroll, wage and other employment records	Seven years from the end of the financial year	Finance Department
Financial records including claims for payments	Seven years	Finance Department
Umbrella Financial records (GST records, sales and purchases, liabilities, income and expenditure)	Seven years	Finance Department
General administrative records	Seven years	Reception
Policies and procedures	Seven years (stored in S Drive only)	Quality – electronic versions only
Operational records documents (Board minutes, resolutions, statutory books)	Indefinitely	NA Scan to CEO Drive

Information technology

Umbrella Inc recognizes the pivotal role of information technology (IT) to support the strategic goals of Umbrella.

The use of computers within Umbrella follows the Australian Privacy Principles, the Privacy Act 1988 and the Privacy Amendment 20021 and Umbrella's policies and procedures.

Our information technology systems ensure we can:

- meet Umbrella's needs
- protect clients, staff, volunteers and organisational information
- support the collection of service delivery data and reporting obligations outlined in our grant agreements.

Security is maintained with routine maintenance, software updates, monitoring, firewalls and anti-virus programs.

MyGovID

Staff need MyGovID to access most online government services on behalf of the Umbrella Inc., including:

- My Aged Care Portal
- Relationship Authorisation Manager (RAM)
- DEX< PRODA.

Relevant staff are authorised to access relevant health services, including My Aged Care, on behalf of Umbrella Ic.

Data Backups

All data is synchronized to the 'Cloud' and is only accessible to the IT Manager. All data stored on network drives are backed up locally and to the Cloud. Data stored on individual computers are not backed up.

External programs

Installing programs and other external data or utilities can:

- introduce viruses into the workplace
- cause serious problems with the computer system.

Therefore, staff are not permitted to install programs, external data or utilities onto any workstation without the CEO's approval.

Passwords

The IT team will assign staff their login details.

Email

All emails are filed in folders set up by the relevant staff member.

Emails that document service feedback and information relevant to operations are sent to the CEO or relevant program manager.

Internet access

Internet access is only for work-related purposes.

Social media

Umbrella has established social media accounts to assist in achieving its strategic communications' objectives. The interactive and public nature of social media has potential benefits and risks for Umbrella's reputation. Umbrella's policy and procedure apply to the use of Umbrella's official social media accounts (such as Facebook, LinkedIn, Instagram and Twitter (by internal and external users.

Responding to data breaches

Umbrella Inc is committed to managing personal information following the Privacy Act 1988 (Cth) and Umbrella's Privacy and Confidentiality Policy.

The Data Breach procedure outlines how Umbrella manages any potential data breaches.

The process of managing personal information requires Umbrella to:

- Implement practices, procedures and systems to ensure compliance with privacy laws and appropriately handle any enquiries or complaints about privacy;
- Report on 'eligible data breach' to the Office of the Australian Information Commissioner (OAIC) and any affected individuals.

Data breach

A data breach occurs when personal information an entity holds is accessed or disclosed by unauthorised parties, or is lost.

A data breach can include:

- lost or stolen physical devices (such as laptops and storage devices) or paper records that contain personal information
- unauthorised access to personal information by an employee
- accidental disclosure of personal information due to 'human error' (e.g. an email sent to the wrong person)
- disclosure of personal information to a scammer due to inadequate procedures for confirming someone's identity.

A data breach occurs if Umbrella holds personal information about an individual and breach our legal obligations about its collections, handling, use or disclosure of the provisions of our Privacy and Confidentiality Policy and Procedure.

Notifiable data breaches

Under the <u>Notifiable Data Breaches scheme</u>, Umbrella Inc. must notify a person whose data has been breached and the Office of the Australian Information Commissioner (OAIC) if:

- there has been unauthorised access to or disclosure of personal information that Umbrella Inc holds (or information has been lost and unauthorised access or disclosure is likely to occur)
- the breach is likely to seriously harm to any person the information relates to

Umbrella Multicultural Community Care Services Inc.

• Umbrella Inc hasn't been able to take action to prevent this harm.

Responding to a data breach

A data breach response plan enables Umbrella to respond quickly to a data breach, which can substantially decrease the impact of a breach on affected individuals, reduce the cost associated with dealing with a breach, and reduce the potential reputational damage.

The Data Response team will consist of:

- Chief Executive Officer
- Senior Managers
- IT Coordinator (if the breach involves Information Technology)

Figure 5: OAIC data breach action plan for health service providers



DATA BREACH ACTION PLAN

FOR HEALTH SERVICE PROVIDERS

A data breach occurs when information held by an organisation is compromised or lost, or is accessed or disclosed without authorisation. For example, unauthorised access to health records, or lost client data.



CONTAIN

Take action to contain the breach

Take immediate steps to limit further access to, or distribution of, the affected information and to reduce the possible compromise of other information. Activate your organisation's data breach response plan, and seek professional assistance if required.

For example, stop the unauthorised practice, recover the records, or disconnect the system that was breached. Additional steps may include setting or changing passwords on client databases, turning on two factor authentication, attempting to recall unread emails, changing computer access privileges, and disconnecting internet connectivity.



Does the data breach relate to the My Health Record system?

No

Yes



EVALUATE

Assess any risks associated with the breach Consider whether the data breach involves personal information and is likely to result in serious harm to any individuals (such as physical, psychological, emotional, financial or reputational harm). Can remedial action remove the likelihood of serious harm?

If remedial action is successful, a provider should progress to the review stage. If not, this may be an eligible data breach under the Notifiable Data Breaches scheme regulated by the Office of the Australian Information Commissioner. Assessment guidelines can be found on their website (see reverse).

0

All data breaches related to the **My Health Record system** must be reported!

This includes situations that have (or may have) resulted in unauthorised collection, use or disclosure of information in a My Health Record and events or circumstances that have (or may have) compromised the security or integrity of the My Health Record system.



NOTIFY Contact all relevant parties

When an organisation believes an *eligible databreach* has occurred, they must promptly **notify affected individuals**.

The organisation must also **notify the Office of the Australian Information Commissioner** as soon as practicable using the form that is available on their website (see reverse).

When a data breach relates to the My Health Record system, organisations must notify the Australian Digital Health Agency as soon as practicable (see reverse). In most cases you will also need to ask the Agency to contact affected individuals. Organisations must also notify the Office of the Australian Information Commissioner* as soon as practicable (see reverse).

* Public hospitals and health services are only required to notify the Australian Digital Health Agency.



Does the affected data contain **Medicare** details? Contact **Services Australia** (see reverse).



REVIEW

Minimise the likelihood and effects of future data breaches

- Thoroughly investigate the cause of the breach.
- Develop a prevention and response plan and conduct audits to ensure the plan is implemented.
- Review and strengthen security practices, consider changing organisational policies and procedures for maintaining data, and revise staff training practices.
- Refer to the Office of the Australian Information Commissioner's Guide to health privacy and other resources to identify additional steps that may be required (see reverse).
- Advice from the Australian Cyber Security Centre is also available to assist organisations with developing a cyber incident response plan (see reverse).



CONTACT INFORMATION

Office of the Australian Information Commissioner (OAIC)

The OAIC oversees the Notifiable Data Breaches scheme and privacy aspects of the My Health Record system. For more information on notifiable data breaches:

Web: oaic.gov.au/data-breach-preparation-and-response

Assessing an eligible data breach

Web: oaic.gov.au/data-breach-response-steps

Report a notifiable data breach
Web: oaic.gov.au/report-a-data-breach

Report a My Health Record data breach

Web: oaic.gov.au/my-health-record-data-breach

Guide to health privacy

Web: oaic.gov.au/guide-to-health-privacy

Enquiries

Web: oaic.gov.au/contact-us **Phone:** 1300 363 992

Services Australia (Medicare)

Services Australia can assist breached organisations by placing impacted customers on a watch list to monitor for any compromise or misuse of customers' Medicare records.

Email: protectyouridentity@servicesaustralia.gov.au

Phone: 1800 941 126

Australian Digital Health Agency (My Health Record system)

All data breaches related to the My Health Record system must be reported to the Australian Digital Health Agency. The Agency will contact affected healthcare recipients, when this is required under the My Health Records Act 2012. Where a significant number of people are affected, the general public will be notified.

Web:

my health record. gov. au/for-health care-professionals/how to s/manage-data-breach

 $\textbf{Email:} \ \ \textbf{MyHealthRecord.Compliance@digitalhealth.gov.au}$

Phone: 1800 723 471

Australian Cyber Security Centre (ACSC)

The ACSC leads the Australian Government's efforts to improve cyber security, with the role of helping to make Australia the safest place to connect online. For advice on what to consider in developing an incident response plan:

Web: cyber.gov.au/advice/developing-an-incident-response-plan

Report a cyber security incident

Web: cyber.gov.au/report

Alert service: Sign up to the ACSC's Stay Smart Online free alert service on the latest online threats and how to respond at staysmartonline.gov.au

You can also seek support from Australia's national identity and cyber support service, IDCARE by calling 1300 432 273

11 Review of Umbrella Inc Organisational Governance and Quality Framework

Umbrella's Organisational and Quality Framework should be reviewed annually to ensure information is current and relevant. This includes when new aged care reforms are introduced.

The Framework will also need to be reviewed when the revised ('strengthened') Aged Care Quality Standards are implemented by the Department of Health and Aged Care.

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- Australian Government Aged Care Act 1997 and Principles https://www.legislation.gov.au/Series/C2004A05206
- Australian Government Aged Care Quality and Safety Commission, Aged Care Open Disclosure Framework and Guidance https://www.agedcarequality.gov.au/sites/default/files/media/ACQSC Open Disclosu re.pdf
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 https://www.agedcarequality.gov.au/aged-care-performance/banning-orders-register
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 https://www.agedcarequality.gov.au/resources/guidance-and-resources-providers-support-aged-care-quality-standards
- Australian Government Aged Care Quality and Safety Commission, Serious Incident Response Scheme https://www.agedcarequality.gov.au/sirs
- Australian Government Australian Securities and Investment Commission (ASIC), RG 270 Whistleblower Policies, https://asic.gov.au/regulatory-resources/find-a-document/regulatory-guides/rg-270-whistleblower-policies/
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 2018 https://www.agedcarequality.gov.au/providers/standards
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- Australian Government Department of Health, Charter of Aged Care Rights (effective 1 July 2019) https://www.agedcarequality.gov.au/consumers/consumer-rights
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 Operational Manual 2023 https://www.health.gov.au/resources/publications/home-care-packages-program-operational-manual-a-guide-for-home-care-providers?language=en
- Australian Government Department of Health, National Guide to the CHSP
 Consumer Contribution Framework (last updated 30 January 2018)
 https://www.health.gov.au/resources/publications/national-guide-to-the-chsp-client-contribution-framework
- Australian Government Department of Health, Schedule of Fees and Charges for Residential and Home Care (updated quarterly) https://www.health.gov.au/resources/publications/schedule-of-fees-and-charges-for-residential-and-home-care?language=en
- Australian Government Office of the Australian Information Commissioner, Data Breach Action Plan for Health Service Providers, 11 February 2020 https://www.oaic.gov.au/privacy/privacy-guidance-for-organisations-and-government-agencies/health-service-providers/data-breach-action-plan-for-health-service-providers
- Australian Government Office of the Australian Information Commissioner, Data
 Breach Preparation and Response: A Guide to Managing Data Breaches in
 Accordance with the Privacy Act 1988 (Cth), p. 8
 https://www.oaic.gov.au/privacy/privacy-guidance-for-organisations-and-government-agencies/preventing-preparing-for-and-responding-to-data-breaches/data-breach-preparation-and-response
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- Government of Western Australian, Carers Recognition Act 2004

 https://www.wa.gov.au/government/publications/carers-recognition-act-fact-sheets
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- Government of Western Australia, Work Health and Safety Act, 2020 https://www.legislation.wa.gov.au/legislation/statutes.nsf/law_a147282.html
- Government of Western Australia, Department of Health Responding to the Abuse of Older People (Elder Abuse) Policy https://www.health.wa.gov.au/About-us/Policy-frameworks/Clinical-Services-Planning-and-Programs/Mandatory-requirements/Aged-Care/Responding-to-the-Abuse-of-Older-People-Policy
- Safe Work Australia, Model Code of Practice: Managing electrical risks in the workplace, https://www.safeworkaustralia.gov.au/doc/model-code-practice-managing-electrical-risks-workplace

Appendix 1: Aged Care Quality Standards and Umbrella policy and procedures

Aged Care Quality Standard Umbrella policy and procedure

Standard 1 Consumer dignity and Choice STD1a Dignity and respect Standard 1 Consumer dignity and Choice STD1b Diversity Standard 1 Consumer dignity and Choice STD1c Care and Service Delivery Standard 1 Consumer dignity and Choice STD1c Charter of Aged Care Rights Standard 1 Consumer dignity and Choice STD1c Choice and independence Standard 1 Consumer dignity and Choice STD1c Choice and independence Standard 1 Consumer dignity and Choice STD1c Partnering with carers and representatives Standard 1 Consumer dignity and Choice STD1c Supporting client decision making Standard 1 Consumer dignity and Choice STD1c Supporting client decision making Standard 1 Consumer dignity and Choice STD1d Managing client Risks Standard 1 Consumer dignity and Choice STD1d Managing client Risks Standard 1 Consumer dignity and Choice STD1c Customer service Standard 2 Ongoing Assessment and planning STD2a Assessment and planning-reviews Standard 2 Ongoing Assessment and planning STD2a Assessment and planning-reviews Standard 2 Ongoing Assessment and planning STD2b Assessment and planning-reviews Standard 2 Ongoing Assessment and planning STD2b Assessment and planning-partnerships Standard 2 Ongoing Assessment and planning STD2b Assessment and planning-partnerships Standard 3 Ongoing Assessment and planning STD2b Assessment and planning-communication Standard 3 Personal Care and Clinical Care STD3a Personal Care and Clinical Care STD3b High Risk Care Standard 3 Personal Care and Clinical Care STD3b Medication Standard 3 Personal Care and Clinical Care STD3b Medication Standard 3 Personal Care and Clinical Care STD3b Medication Standard 3 Personal Care and Clinical Care STD3c Medication Standard 3 Personal Care and Clinical Care STD3c Managing client's personal care information Standard 3 Personal Care and Clinical Care STD3c Managing client's personal care information Standard 3 Personal Care and Clinical Care STD3c Managing client's personal care information Standard 3 Personal Care and Clinical Care STD3c Ops		
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Standard 3 Personal Care and Clinical Care	Standard 2 Ongoing Assessment and planning	STD2c Assessment and planning-partnerships
Standard 3 Personal Care and Clinical Care	Standard 2 Ongoing Assessment and planning	STD2d Assessment and planning-communication
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Standard 3 Personal Care and Clinical Care	Standard 3 Personal Care and Clinical Care	STD3b High Risk Care
Standard 3 Personal Care and Clinical Care	Standard 3 Personal Care and Clinical Care	STD3b Medication
Standard 3 Personal Care and Clinical Care	Standard 3 Personal Care and Clinical Care	STD3c End of Life
Standard 3 Personal Care and Clinical Care	Standard 3 Personal Care and Clinical Care	STD3d Deterioration and Health Changes
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Standard 3 Personal Care and Clinical Care	STD3	Ops Managing Hydration and Nutrition
Standard 3 Personal Care and Clinical Care	STD3	Ops Managing Pain
Standard 3 Personal Care and Clinical Care	STD3	Ops Minimising Restrictive Practices
Standard 4 Services & supports for daily living	STD4a	Services and Supports
Standard 4 Services & supports for daily living	STD4b	Wellbeing
Standard 4 Services & supports for daily living	STD4c	Supporting social connections
Standard 4 Services & supports for daily living	STD4d	Sharing information
Standard 4 Services & supports for daily living	STD4f	Referrals
Standard 4 Services & supports for daily living	STD4f	Meal quality
Standard 4 Services & supports for daily living	STD4g	Equipment
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Standard 5 Organisation service environment	STD5a	Environment-friendly and comfortable
Standard 5 Organisation service environment	STD5b	Environment-clean and maintained
Standard 5 Organisation service environment	STD5c	Environment-furniture and equipment
Standard 5 Organisation service environment	STD5	Ops Epidemic/Pandemic
Standard 6 Feedback and complaints	STD6a	Complaint Management Policy & Procedure
Standard 6 Feedback and complaints	STD5b	Advocates Policy & Procedures
Standard 6 Feedback and complaints	STD6c	Open disclosure Policy & Procedure
Standard 6 Feedback and complaints	STD6d	Feedback (Continuous Improvement)
Standard 7 Human Resources	STD7a	Workforce Sufficiency (leave)
Standard 7 Human Resources	STD7b	Code of Conduct
Standard 7 Human Resources	STD7c	Workforce Capability (training)
Standard 7 Human Resources	STD7d	Recruitment
Standard 7 Human Resources	STD7e	Workforce Performance Management
Standard 7 Human Resources	STD7	Ops Separation of Employment
Standard 7 Human Resources	STD7	Injury Management
Standard 7 Human Resources	STD7	Ops Conflict of Interest
Standard 7 Human Resources	STD7	Ops Gifts
Standard 7 Human Resources	STD7	Ops Dress Code
Standard 7 Human Resources	STD7	Ops Worker Compliance
Standard 7 Human Resources	STD7	Ops Working from Home
Standard 7 Human Resources	STD7	Ops Home Visits
Standard 7 Human Resources	STD7	Ops Workplace Health and Safety
Standard 7 Human Resources	STD7	Ops Challenging or Aggressive Behaviour
Standard 7 Human Resources	STD7	Ops Vehicles and Driving

Standard 7 Human Resources	STD7	Ops Emergency & Evacuations
Standard 7 Human Resources	STD7	Ops Work Related Stress
Standard 7 Human Resources	STD7	Ops Grievance
Standard 7 Human Resources	STD7	Ops Alcohol, Other Drugs and Smoking
Standard 7 Human Resources	STD7	Ops Manual Handling
Standard 7 Human Resources	STD7	Ops Preventing Workplace Bullying
Standard 7 Human Resources	STD7	Ops Induction and Orientation
Standard 7 Human Resources	STD7	Ops Grey Fleet
Standard 7 Human Resources	STD7	Ops Student Placements
Standard 7 Human Resources	STD7	Ops First Aid Procedure
Standard 7 Human Resources	STD7	Ops Parental Leave
Standard 7 Human Resources	STD7	Ops COVID19 prevention and management
Standard 7 Human Resources	STD7	Ops Traineeships
Standard 8 Organisational Governance	STD8a	Organisational Engagement
Standard 8 Organisational Governance	STD8b	Organisational Culture
Standard 8 Organisational Governance	STD8b	Privacy and Confidentiality
Standard 8 Organisational Governance	STD8c	Governance - Systems
Standard 8 Organisational Governance	STD8c	Regulatory Compliance
Standard 8 Organisational Governance	STD8c	Workforce Governance
Standard 8 Organisational Governance	STD8c	Information Management
Standard 8 Organisational Governance	STD8d	Governance- Risk Management
Standard 8 Organisational Governance	STD8e	Governance- Clinical
Standard 8 Organisational Governance	STD8	Whistleblowing
Standard 8 Organisational Governance	STD8	QM Quality Management
Standard 8 Organisational Governance	STD8	QM Internal Audits
Standard 8 Organisational Governance	STD8	QM Policy Development
Standard 8 Organisational Governance	STD8	IT Information Technology (IT)
Standard 8 Organisational Governance	STD8	IT- Passwords Procedure
Standard 8 Organisational Governance	STD8	IT- Data Breach Procedure
Standard 8 Organisational Governance	STD8	IT- Emails Procedure
Standard 8 Organisational Governance	STD8	IT- Mobile Phones Procedure
Standard 8 Organisational Governance	STD8	FIN Financial Management
Standard 8 Organisational Governance	STD8	FIN Corporate Credit Card Procedure
Standard 8 Organisational Governance	STD8	FIN Client Fees Policy & Procedure
Standard 8 Organisational Governance	STD8	FIN Delegations Policy & Procedure
Standard 8 Organisational Governance	STD8	FIN Petty Cash Procedure
Standard 8 Organisational Governance	STD8	FIN Payroll Procedure

Umbrella Multicultural Community Care Services Inc.

Standard 8 Organisational Governance	STD8	FIN Assets Management Procedure
Standard 8 Organisational Governance	STD8	FIN Fraud Management Policy & Procedure
Standard 8 Organisational Governance	STD8	FIN Funding and Grant Applications
Standard 8 Organisational Governance	STD8	RM Incident Management Policy
Standard 8 Organisational Governance	STD8	Strategic Planning Policy
Standard 8 Organisational Governance	STD8	Insurance Policy
Standard 8 Organisational Governance	STD8	COMMS Social Media Policy
Standard 8 Organisational Governance	STD8	COMMS Marketing and Communication
Standard 8 Organisational Governance	STD8	Ops Employee Excellence Awards
Standard 8 Organisational Governance	STD8	Code of Conduct for Aged Care
Standard 8 Organisational Governance	STD8	Donations and Fundraising Procedure