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## 5.1 SERVICE ENVIRONMENT GUIDE

### 5.1.1 CONSUMER OUTCOME<sup>1</sup>

*"I feel I belong, and I am safe and comfortable in CHNC's service environment."*

### 5.1.2 ORGANISATION STATEMENT<sup>2</sup>

CHNC provides a safe and comfortable service environment that promotes the consumer's independence, function and enjoyment.

### 5.1.3 OUR POLICY<sup>3</sup>

CHNC is committed to:

- A welcoming and easy to understand service environment that optimises each consumer's sense of belonging, independence, interaction and function
- A service environment that is:
  - Safe, clean, well maintained and comfortable
  - Enables consumers to move freely both indoors and out
- Furniture, fittings and equipment that are safe, clean, well-maintained and suitable for the consumer
- Ensuring a safe environment in the delivery of services, including the consumer's home and<sup>4</sup> venues outside of our facilities.

### 5.1.4 RESPONSIBILITIES

- Management, with input from relevant stakeholders, develops, maintains, promotes and monitors processes and procedures that ensure the provision of safe and quality care and services
- Staff follow policies and procedures, participate in development opportunities, promote a culture of safe, inclusive and quality care and services and support consumers in the planning, delivery and evaluation of care and services
- Consumers and/or their representatives participate in the planning, delivery and evaluation of care and services and if they feel hindered or unsupported to do so provide feedback to management.

### 5.1.5 MONITORING SERVICE ENVIRONMENT

Processes and systems to ensure a safe and comfortable service environment are regularly audited as part of our audit program and staff, consumers and other stakeholders are encouraged to provide ongoing feedback on issues and areas where improvements can be made (see [Corporate Calendar](#) in Forms/Governance Documents and 8.9 Continuous Improvement).

<sup>1</sup> Australian Government Aged Care Quality and Safety Commission, [Guidance and resources for providers to support the Aged Care Quality Standards](#) (September 2022). Website accessed May 2023

<sup>2</sup> Ibid., p.93.'

<sup>3</sup> Ibid.

<sup>4</sup> In addition to the requirements of this Standard we also try to ensure the safety of our support staff and consumers in the consumer's home and other venues that services are delivered. See 5.3.10 A Safe Environment in the Consumer's Home.



## 5.2 A WELCOMING ENVIRONMENT FOR CONSUMERS<sup>5</sup>

CHNC operates from a modern, specifically planned centre that provides high quality services to home care consumers.

### 5.2.1 LAYOUT

#### Overview

CHNC's head office is located at 89 Waldron Road, Chester Hill. CHNC has a common entry, with lounges for consumers to sit while waiting for staff. Our day activities are held at the Girl Guides Hall at 159 Waldron Road, Chester Hill.

#### Utility areas

Utility areas including the main kitchen and food storage areas, laundry and cleaning and chemical stores are located at the Girls Guides Hall, near the rear of the building.

#### The Girl Guides Hall

The Girl Guides Hall is clearly marked and easily accessed via the mobility ramp. The hall is furnished with movable but comfortable tables and chairs. Tables can be moved to support small groups with different needs or preferences and the hall is large enough for different groups to undertake different activities. Consumers who do not wish to participate in activities are welcome to sit and watch or do as they prefer; however, staff and volunteers provide gentle persuasion to involve people to maximise socialisation.

Water and hot drinks are available and, with reference to wellness and reablement, consumers who can, are encouraged to make their own. Similarly, with lunches, consumers are encouraged to serve themselves but those who cannot are assisted as required. At tea times and lunch times consumers may eat where they like and with whom they prefer though staff work to ensure no one is left feeling isolated. Consumers who have specific dietary or fluid requirements are provided with suitable meals and drinks and are supervised as necessary. The consumers care plan outlines their dietary requirements.

#### Telephones and internet

Consumers are free to use their mobile phone throughout service.

### 5.2.2 ENTRY

The external area outside the Girl Guides hall has a wheelchair friendly paved entry ramp with a rail on one side.

Push-pull doors are installed for ease of access and egress and can be left open to provide light and fresh air flow. Personal information is available via password protected electronic files at the office, or locked in drawers if stored as paper records at the Head Office – 89 Waldron Rd, Chester Hill.

Staff and volunteers greet consumers and provide a level of interaction that is genuine but allows them to conduct their work. The front door is secure and lockable.

Floors are hardwood floors that are kept clear and dry of moisture or spills to prevent slips and to contribute to a warm welcoming environment. A varying range of chairs and tables are provided to meet the differing needs and preferences of consumers. Chairs and tables are easily moved allowing consumers to move items to meet their requirements.

Lighting is appropriate for reading and participating in activities.

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<sup>5</sup> Customised to CHNC locations.



Chilled water is available through water jugs placed on each table. Coffee and tea can be made from the secure table and can be taken to the consumers seats. Toilets are also available.

The Hall has multiple ceiling fans and wall-mounted heaters, ensuring the temperature is maintained to be comfortable to most people. Consumers are encouraged to provide feedback on the temperature and on any other aspects of the entry area.

### 5.2.3 SPECIAL NEEDS CONSUMERS

Doorways and walkways, both internally and externally, are wheelchair friendly and obstacle-free for people in wheelchairs or with mobility aids. Good visual access is provided for people who may be uncertain of where they are such as people with cognitive impairment or people with failing sight. An accessible toilet is available at both the Guide Hall and the Head Office.

### 5.2.4 CONSUMER INPUT ON ENVIRONMENT

As well as encouraging consumers to provide ongoing input to staff or through feedback or complaints processes, we offer a Consumer Advisory Body as well as feedback forms to be filled out monthly. The environment of the service is specifically addressed (see 8.9.7 Other Continuous Improvement Information Sources/Consumer meetings).

### 5.2.5 MAINTAINING THE ENVIRONMENT

All CHNC staff and volunteers monitor the consumer areas for cleanliness and tidiness and address any concerns they see immediately. Daily cleaning is conducted as required and a major clean of all areas once a week is completed. The contract gardeners do weekly garden maintenance and staff do daily sweeps and tidy-ups as required to minimise hazards.

As noted in 5.3 A Safe Environment, safety audits are conducted regularly, hazards are identified and dealt with immediately, incidents are reported and reviewed to minimise a re-occurrence. Consumers are also encouraged to report to staff anything they feel is unsafe or is not appropriate.

(See 2.7.7 Environmental Controls in 2.7 Infection Prevention and Control for details on cleaning practices in CHNC.)

## 5.3 A SAFE ENVIRONMENT

### 5.3.1 COMMITMENT TO SAFETY

CHNC ensures that a safe and healthy workplace is provided for consumers (and staff, volunteers and contractors) and that all services in our facilities are provided in a safe environment in line with Work Health and Safety (WHS) requirements<sup>6</sup> and our duty of care to consumers, staff, volunteers and contractors, through:

- Complying with Work Health and Safety Obligations (see 8.8.6 Work Health and Safety)
- Ensuring secure premises (see 5.3.2 Security)
- Ensuring the working environment meets regulatory requirements (see 8.8 Regulatory Compliance and (see 8.8.6 Work Health and Safety))
- Maintaining a smoke free internal environment. Staff are required not to smoke within the CHNC environment (for key points see 5.3.8 Identifying and Supporting Consumer Risk)
- Providing training to staff (induction and ongoing) on the need to ensure the safety of consumers and themselves (for key points see 7.4.3 Staff Education and Training/Mandatory training)
- Ongoing audits of our facilities (see below 5.3.4 Facilities Inspections and Safety Audits)
- The use and follow up of accident/incident/hazard forms (see below 5.3.5 Accidents, Incidents and Hazards)
- Ensuring the safety of special needs consumers (see 1.3.7 Consumers with Special Needs/Ensuring the safety of special needs consumers)
- Inviting feedback from consumers (see 8.9.6 Continuous Improvement Forms)
- Infection prevention and control (see 2.7 Infection Prevention and Control)
- Staff are trained in first aid (see below 5.3.6 First Aid and Emergencies/First aid)
- Regular maintenance and servicing of equipment and vehicles, as appropriate or recommended by the manufacturers (see 5.4.7 Monitoring and Maintaining Equipment and Facilities)
- Regular fire and evacuation training (see 5.4.11 Fire and Emergency Procedures)
- Regular maintenance of fire equipment (see 5.4.11 Fire and Emergency Procedures)
- Monitoring of food storage equipment including temperatures of fridges and freezers (see 5.4.7 Monitoring and Maintaining Equipment and Facilities)
- Ongoing audits and continuous improvement of our processes and procedures (see 8.9.7 Other Continuous Improvement Information Sources).<sup>7</sup>

### 5.3.2 SECURITY

CHNC premises include security systems to ensure the safety of consumers of staff and prevent the entry of intruders.

#### Building security

The Guide Hall and Head Office are secured through:

- Security grade doors
- Security grade windows which allow venting but prohibit entry
- After hours perimeter alarm system
- External cameras

<sup>6</sup> NSW: NSW Government [SafeWork NSW](#), [Work Health and Safety Act 2011](#) and the [Work Health and Safety Regulation 2017](#)  
All States: See also Australian Government [Safe Work Australia](#)

<sup>7</sup> See also [www.safeworkaustralia.gov.au](http://www.safeworkaustralia.gov.au)

### 5.3.3 ACCESS MANAGEMENT

Doors to both the Guide Hall and Head Office are locked with deadbolts and door locks.

Consumers and their representatives or other visitors are not permitted access to the offices or utility areas. All clinical and care contractors report to reception at Head Office. Contractors are provided with information to ensure they agree with the work health and safety requirements of the site.

### 5.3.4 FACILITIES INSPECTIONS AND SAFETY AUDITS

Safety audits facilities

A safety audit is completed for the Guide Hall, Head Office, kitchen and the office every six months using the Safety Audit Facilities form for each area. The audit is conducted by suitability trained staff.

Completed audit forms are forwarded to the Manager for review and identification of immediate maintenance issues.

(See 8.9.7 Other Continuous Improvement Information/Safety audits, for the process for dealing with the reports.)

### 5.3.5 ACCIDENTS, INCIDENTS AND HAZARDS

Accidents and incidents

Accidents, however minor, and near-miss accidents and other incidents that posed or could have posed a threat to the safety of staff, consumers or any other person, are reported on an Incident Report. (See 8.9.6 Continuous Improvement Forms/Staff accident incident report.)

Hazards

Staff are trained to identify and report health or safety hazards in our premises or facilities or in the consumer's home or external venues. (See 8.9.6 Continuous Improvement Forms/Hazard report.)

### 5.3.6 FIRST AID AND EMERGENCIES

First aid

Staff are encouraged to complete first aid training; the aged care staff are encouraged to have Senior First Aid Certificates and other staff can apply for funding to gain their First Aid Certificate.

A first aid kit is maintained in the office, the Guide Hall, the kitchen and in the transport vehicles. They are checked each month by Administration Team and items replenished, as necessary.

Emergencies

All staff receive training on what to do in the event of an emergency. This includes making them aware of the Emergency Manuals that stipulate what to do in the event of fire, flood and threats. Emergency Manuals are distributed throughout our facilities and are clearly visible and accessible.

In the event of a consumer suffering a medical emergency staff:

- Check the immediate area for signs of danger and remove or minimise if safe to do so
- Do not move the person unless they are exposed to a life-threatening situation
- Ring an ambulance on 000. If unsure if one is required, ring anyway and they will advise you
- Notify a senior staff person
- Stay with the person and administer first aid (if trained to do so) until assistance arrives
- Follow the instructions of Emergency Services or senior personnel.

(See [Managing Life Threatening Events](#) and [Managing Deterioration and Escalation Practices.](#))

### 5.3.7 CONSUMERS WITH DEMENTIA

We emphasise a dementia friendly environment designed on the Dementia Enabling Environment Principles documented by Dementia Australia<sup>8</sup> with input from consumers and their representatives, staff and design professionals to ensure it is welcoming and safe for consumers with dementia. These principles are also applied equally to all consumers.

The ten principles identified by Dementia Australia are:

1. Unobtrusively reduce risks
2. Provide a human scale
3. Allow people to see and be seen
4. Reduce unhelpful stimulation
5. Optimise helpful stimulation
6. Support movement and engagement
7. Create a familiar space
8. Provide opportunities to be alone or with others
9. Provide links to the community
10. Respond to a vision for way of life.

### 5.3.8 IDENTIFYING AND SUPPORTING CONSUMER RISK

#### General

CHNC recognises that all people have the right to take risks in their life and that there is dignity of risk. We endeavour to identify risks to the consumer to further ensure their safety in our facility through the commencement meeting and assessment processes.

When we do identify risks, we:

- Discuss with the consumer and their family/representative, the risks, the potential consequences to themselves and others and possible strategies to reduce the risks
- Discuss the risks with the consumer's medical practitioner or health service, with their or their representatives' consent
- Develop a support plan taking the risks into consideration as is appropriate
- Implement strategies to reduce the risks
- Make referrals if appropriate

In controlling risks, we are mindful of not unnecessarily restricting the movement of the person, or all consumers, or unnecessarily limiting the tasks and activities they like to undertake. Whenever possible our staff will provide support to people to undertake risky activities whilst remaining safe.

We use a process for mitigating risk and honouring consumer choice<sup>9</sup> outlined in the Assessment and Support Planning Practice, using the Consumer Choice Risk Assessment Form.

If the choice presents an unacceptable risk to others including our staff and the consumer will not modify their choice to mitigate the risk, we may modify or decline to provide any related services until the risk is mitigated.

<sup>8</sup> Dementia Australia [How to Design Dementia-Friendly Care Environments](#) Dementia Australia 2016

<sup>9</sup> Adapted from: The Hulda B and Maurice L Rothschild Foundation [A Process for Care Planning for Resident Choice February 2015](#) Website accessed January 2023

## Consumers with dementia

CHNC recognises that all people, including people with dementia, have the right to take risks in their life and that there is dignity of risk. To reduce the risks to consumers with dementia we:

- Ensure that grab rails are securely fixed to the wall
- Ensure that surfaces especially on the floor are non-slip
- Use a hand-held shower to make assisting with showers easier
- Create a bathroom that is warm, inviting and safe
- Use warm colours to make the space more inviting, and to give the impression of a warmer temperature
- Use grab rails that are of a clear contrasting colour to the wall
- Use door handles contrast with the colour of the door
- Reduce glare such as from mirrors and windows
- Provide even lighting.<sup>10</sup>

### 5.3.9 CONSUMERS WITH SENSORY IMPAIRMENT

Where consumers have sensory impairment, we use a range of strategies to support them. These are detailed in 1.3 Dignity and Respect for Consumers. (See 1.3.7 Consumers with Special Needs/ Strategies for particular consumer groups/ Consumers who are blind or vision impaired and Consumers with hearing impairment.) (See also [Supporting Sensory Impairments Practice](#))

Consumers who have a sensory impairment that may expose them to risk in emergency situations are identified on our list of vulnerable consumers and are supported as a priority in emergencies.

### 5.3.10 A SAFE ENVIRONMENT IN THE CONSUMER'S HOME<sup>11</sup>

#### Role of the consumer

As far as is practicable, we try to ensure safety in the consumer's home by requesting consumers to:

- Participate in a safety audit of their home prior to the delivery of support commensurate with assistance and/or negotiation with them to improve unsafe areas (see 8.9.7 Other Continuous Improvement Information/Safety Audits)
- Alert staff to any managed safety considerations on the client management system and in the support plan
- Obtain safe chemicals and limiting support staff to using these – a description of acceptable chemicals is included in the Consumer Handbook
- Obtain safe equipment such as vacuum cleaners or washing machines
- Not smoke in the home when support staff are there
- Secure any dogs/pets prior to the arrival of support staff
- Alert staff to any other risks in the home.

In addition we prepare plans for vulnerable consumers whose welfare or services may be put at risk from events such as bush fire, heat, cold, flood or other natural disasters (see 8.10.10 Business Continuity Plan and [Monitoring Consumer Health and Wellbeing in Severe Weather and Natural Disasters Practice](#)).

<sup>10</sup> Dot points taken from: Dementia Australia [How to Design Dementia-Friendly Care Environments](#) Dementia Australia 2016

<sup>11</sup> The Aged Care Quality Standards explicitly exclude consumer safety in the home. It is included here as it is part of the operations of service providers and should be documented in service provider policies and procedures

## Role of support staff

Support staff are aware of the following:

- Report any dangerous home and garden maintenance needs which the consumer is unable to do themselves such as accumulations of rubbish, broken and uneven paving, overhanging trees and shrubs
- Use correct transfer procedures and encourage the consumer to use prescribed walking aids and grab rails. If grab rails and ramps are needed to support consumer and staff safety, advise their supervisor
- Maintain good posture while standing, sitting, driving, cleaning, carrying and moving objects in the home and practice good back care when assisting consumers
- Kitchens - store sharp utensils and chemical cleaners and pesticides safely. Make sure the handles of pots and pans are not over a hot plate and are turned in. Use pot holders. Do not hang tea towels near a burner
- Bathrooms - store razors, scissors etc. safely. Avoid use of electrical appliances in the bathroom. If used ensure they are switched off and unplugged after use. When turning on taps, put cold on first and off last. Check positioning of bathroom aids (grab rails, bath seats etc.) and if alterations or additional aids are needed report to their supervisor
- Lighting - ensure there is good lighting. Encourage use of high wattage and clear globes in dark areas
- Electrical appliances - do not use any which have faulty connections or worn or frayed cords until repaired. Do not let extension cords obstruct walkways and do not place under mats or carpets
- Heaters - should not be placed in busy areas or near combustible materials (curtains, lounges etc.). Use a fireguard. Do not move when alight. Electric blankets to be kept straight and flat and are not used where there is a risk of incontinence
- Floors - dry after mopping and clean up spills as soon as possible. Never apply polish. Suggest non-slip backing on loose mats and move loose or frayed mats out of general walkway.

Support staff have access to an Incident Report to record accidents or incidents and a Handover Report to record other issues or changes in condition to their supervisor. Support staff complete an Incident Report to record health and safety hazards in consumers' homes, which are then actioned by the relevant team member.

Should an unsafe environment be evident, support staff contact their supervisor for advice and assistance and should endeavour to control the risk until further action can be taken.

Information and training on all the above are provided to support staff, as appropriate, immediately after recruitment and refresher training is provided annually.

All home support staff are also provided with portable RCDs to protect against electric shock.

(See also 8.9.8 Processing Continuous Improvement Forms.)

## Home safety audits

Home Safety Audits are completed by the Social Support Workers who have appropriate training either at the time of assessment or prior to the provision of in-home services and at the annual review using a Home Safety Checklist.

If any safety issues are identified that cannot be attended to by the consumer before the first service delivery the Home Safety Checklist is referred to the supervisor.

Any safety issues that can be attended to by us are referred to the supervisor for implementation through inclusion in the support plan. Issues that require action by the consumer are negotiated with the consumer. These could include:

- The need for repairs to the home
- Removal of unsafe items
- The exclusion of support in relation to particular areas of the house
- The control of pets

- Smoking.

Where it is unsafe for support staff to enter the home the delivery of services may be delayed until the risks are controlled.

The process for dealing with the reports is described in 8.9 Continuous Improvement (see 8.9.7 Other Continuous Improvement Information Sources/Safety audits).

#### Consumers living with dementia at home

CHNC recognises that all people have the right to take risks in their life and that there is dignity of risk. We also recognise that we have a limited role in the lives of home care consumers, and within that role we endeavour to identify risks to the consumer to further ensure their safety at home through the Commencement Meeting, assessment process and the completion of the Home Safety Checklist.

When we do identify risks, we:

- Discuss the risks and possible strategies to reduce the risks with the consumer and their family/representative
- Discuss the risks with the consumer's medical practitioner or health service with their or their representatives' consent
- Develop a support plan taking the risks into consideration as is appropriate
- Make referrals if appropriate

In controlling risks, we are mindful of not unnecessarily restricting the movement of the person throughout their home or unnecessarily limiting the tasks and activities they like to undertake. We consider noise management, lighting, colour contrast, textures and design in supporting orientation for people living with dementia and provide information on where home care consumers/representatives may access this information, such as Dementia Australia.

#### 5.3.11 SAFETY AUDITS EXTERNAL VENUES

A Safety Audit External Venue form is completed for all new venues used for consumer activities prior to the staging of the activity. The form is completed by a staff member involved in organising the activity. If any safety issues or risks are identified the appropriate supervisor is consulted as to whether the venue or facility should be used. The decision and reasons are recorded on the form.

The appropriate team member ensures that safety audits for external venues are reviewed at least once a year. Completed Safety Audit External Venue forms are filed in the Venues file with the Manager.

## 5.4 ASSET MANAGEMENT

### 5.4.1 APPROVED SUPPLIERS AND EXTERNAL CONTRACTORS

To ensure the integrity and reliability of supplies CHNC maintain a list of approved suppliers, including contractors. Approved suppliers are selected and evaluated by the Manager on the following criteria:

- Quality
- Reliability
- Timeliness
- Backup support and service and
- Cost.

External suppliers and contractors provide an ABN number and, if appropriate, evidence of public liability, current workers' compensation insurance and Police Checks. These details are noted on the Approved Suppliers List kept by the Aged Care Programs Coordinator. Performance is monitored on an ongoing basis and when contracts are reviewed using the abovementioned criteria.

New suppliers are approved by the relevant manager before goods or services are purchased from them.

If CHNC contracts out any service delivery a Subcontracting Agreement is developed specifying the scope of work and the contractor's responsibilities. They are also required to meet all relevant quality requirements under the Aged Care Quality Standards, and we may request evidence of compliance or conduct on-site audits of relevant information to ensure the safety and quality of service provision.

### 5.4.2 SUBCONTRACTING SERVICE DELIVERY<sup>12</sup>

CHNC subcontracts some services that we do not provide through in-house staff.

We maintain a detailed register of subcontractors used including the subcontractor's name and ABN, the services which the subcontractor is to deliver, the period of the subcontract, qualifications and licences and any other relevant information. This register is made available to the Department of Health and Aged Care on request.

CHNC remains responsible for the delivery of all services, regardless of any subcontracting arrangements and are also responsible for all reporting requirements.

We are responsible for consumer complaints about the services provided by subcontractors and investigate and ensure the complaint is resolved with the subcontractor. The same privacy requirements for consumers as required of CHNC also apply to any subcontractors.

We ensure a Subcontractor Agreement is signed by subcontractors and ourselves and ensure that all subcontractors meet the requirements of the Grant Agreement, the Guidelines and other program requirements and the Aged Care Quality Standards.

We use a risk-based approach to ensure that subcontractors are complying with the Standards by having regular contact with contractors, reviewing any feedback provided to the contractors and to us regarding service delivery, requesting and receiving a copy of the subcontractors' (those providing direct consumer services) Improvement Plan and Risk Plan annually and conducting internal audits of their operations if determined necessary.

In addition, any subcontractors delivering services provide us with information annually on police checks of their staff (See 7.3.10 Employment Checks/Police check) and details of relevant registrations and insurances.

<sup>12</sup> Australian Government Commonwealth DSS [Terms and Conditions Comprehensive Grant Agreement](#) 2014 Clause 28 Subcontractors p 21

Where a complaint regarding a subcontractor is made to the Department, CHNC liaise with the Department and ensure the subcontractor complies with all reasonable requests, directions and monitoring requirements requested by the Department.

### 5.4.3 ASSET RECORDING

CHNC records in an Assets Register any items with a purchase price of \$3,000.00 or more. The assets register is maintained in Excel by the Accounts Team and includes:

- Item number
- A description of the goods, including brand and model (if appropriate)
- The supplier
- The activity for which the asset was acquired
- The date of acquisition
- The purchase or lease price
- Asset description including serial number
- Asset location
- Sources of funding used to acquire the asset
- The depreciation schedule for asset (including the supplier recommended timeframe for decommissioning for medical equipment)
- The depreciated value of the asset
- Details of asset disposal (where relevant) including the sale.

#### CHSP assets<sup>13</sup>

CHNC complies with the requirements of the CHSP Grant Agreement including the Commonwealth Standard Grant Conditions Supplementary Terms. For CHSP assets with a purchase price of \$10,000 or more, inclusive of GST, we also include:

- CHSP grant contributions
- Other contributions by CHNC and
- Other contributions by third parties.

#### **CHSP grant conditions**

- We only use the Grant to purchase the assets specified in Item H of the Schedule
- The assets are used for the funded activity
- We obtain prior approval in writing if we want to use the Grant to purchase assets not specified in Item H of the Schedule
- We own the assets purchased with the Grant unless Item H of the Schedule states otherwise
- We follow all other requirements in relation to assets.

### 5.4.4 INSURANCE

CHNC arranges all insurances required by funding providers including:

- Public liability
- Workers' compensation

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<sup>13</sup> Australian Government CHSP Grant Agreement including the Commonwealth Standard Grant Conditions and the Supplementary Terms Effective as of 1 July 2018 Clause 5 Equipment and Assets p 1

- Directors' and Officers' Liability
- Professional indemnity insurance
- Property fire
- Contents theft and burglary (replacement cost)
- Volunteer insurance personal accident and public liability
- Motor Vehicle Liability Insurance
- Compulsory Motor Vehicle Insurance.

#### 5.4.6 STAFF AND VOLUNTEER VEHICLES

Staff and volunteers are not permitted to use their vehicles for work purposes if their vehicle insurance does not cover the vehicle for work purposes.

Staff and volunteers are required to provide a copy of their driver's licence, car registration and insurance. This is kept in their staff file and recorded with the Accounts Team. Staff are advised they are required to notify the organisation of any change to their vehicle licence and car insurance.

#### 5.4.7 MONITORING AND MAINTAINING EQUIPMENT AND FACILITIES

Corrective and preventive maintenance

CHNC has a corrective and preventive maintenance system coordinated by the Manager that details the facility preventive maintenance schedule to ensure pest control, environmental high cleaning, fire equipment and facilities monitoring (e.g. exit and general lighting, air conditioning, kitchen vents, gardening, equipment electrical testing, etc) are documented and planned on the maintenance schedule. Suitably qualified and skilled internal and external personnel are sourced to complete preventive and corrective maintenance. External personnel are required to document and provide evidence of work completed.

Corrective maintenance is completed in response to maintenance requests or hazard identification by consumers, staff, volunteers or contractors following the maintenance requests process below.

The Manager ensures follow up and completion of all maintenance tasks, documents the dates completed and maintains records of completion. If there is a delay in the completion of corrective or preventive maintenance, this is escalated to the relevant manager who determines the risk and takes appropriate action.

#### 5.4.8 ELECTRICAL SAFETY<sup>14</sup>

CHNC ensures the safety of electrical equipment through:

- Utilising Residual Current Devices on all equipment plugged into a power point in a consumer's home
- Testing and tagging electrical equipment, including RCDs on a regular basis.<sup>15</sup>

#### 5.4.9 CONSUMER OWNED EQUIPMENT

CHNC staff keep clean and advise on the suitability of equipment owned by the consumer and necessary to their care. Mobility and medical equipment are assessed by the relevant health professional to ensure suitability and safety. We monitor the equipment and advise the consumer and/or their representative when the equipment requires major cleaning, electrical testing, servicing or repair and will arrange this for the consumer at their cost. Equipment that is unsafe for the consumer or staff is not permitted to be used in CHNC.

<sup>14</sup> Australian Government Safe Work Australia [Managing Electrical Risks in the Workplace](#) October 2018

<sup>15</sup> Safe Work Australia, [WHS duties/ Inspecting and testing](#), Website Accessed May 2023

## 5.4.10 VEHICLE POLICY

### Key points

The use of vehicles is covered by our Vehicle Policy including:

- All grant conditions relating to the use of vehicles are adhered to
- Staff have an appropriate current license before using a vehicle
- All organisation-related vehicles are used solely for work purposes unless private use is agreed as a condition of employment and contain a first aid kit
- Vehicles are locked when unattended
- Users of vehicles:
  - Ensure that the vehicle is tidy inside
  - Has petrol
  - Report any damage or issues with the vehicle
  - Complete the Vehicle Log Sheet.

### Motor vehicle accident procedures

Staff who have a car accident while driving an organisation-related vehicle follow the procedures outlined below:

- Stop at once
- As much as possible, ensure that the vehicle is not posing a further traffic hazard
- Assist anyone who might be injured
- Get the names and addresses of all witnesses to the accident
- Report the accident to the police.

If another vehicle is involved, make sure you obtain and keep a record of the following information:

- The owner's name, address and telephone number
- The driver's name, address and driving license number or other identification
- The name of the owner's insurance company
- The make, type and registration number of the car.

Identify yourself to the other driver, together with your name, address and registration number.

If the police attend, make sure you:

- Provide the police with all relevant information about yourself and the other driver
- Obtain and keep a record of the attending police officer's name, rank, number and station.

As much as possible try to recall and commit to memory (or write down) the details of the accident while they are still fresh in your mind and take photographs if this helps.

Do not discuss the accident with anyone other than the police or our organisation's insurance company representative.

If personal injury or serious property damage is involved:

- Phone a senior staff person and the insurance company at once.
- Complete a Incident Report and give it to your supervisor as soon as possible after the accident.

## 5.4.11 FIRE AND EMERGENCY PROCEDURES

### Fire equipment

CHNC has a fire warning and management system and required fire equipment available throughout our facilities as per the requirements of the Building Code of Australia<sup>16</sup>.

All fire equipment is checked and maintained, as per the Australian Standard AS 1851-2012<sup>17</sup>, by a licensed contractor as per fire and emergency services legislation<sup>18</sup>. The contractor provides advice and ensures the system is fully compliant through:

- Regular testing and servicing of fire equipment
- Regular maintenance and replacement of smoke alarms
- Regular testing and servicing of other emergency equipment including exit lights and emergency lighting and
- The provision of Evacuation Maps throughout our facilities<sup>19</sup>.

### Displaying emergency procedures

Procedures in the case of fire and other emergencies and are available throughout our facilities. The procedures cover:

- Fire procedures
- Threatening telephone calls
- Bomb threat
- Earthquake/cyclone
- Flood
- Accident
- Chemical spill
- Missing consumers
- Gastrointestinal Disease Outbreak.

### Staff responsibilities

Each individual staff member has a responsibility to familiarise themselves with their workplace and be aware of:

- The most direct means of exit from the building
- The nominated assembly point for the building
- The location of any portable firefighting equipment within the building and its application
- Their responsibilities in supporting consumers, staff and other people in the event of a fire.

Annual training in fire and emergency procedures is mandatory for all staff. Fire drills are also held at least twice a year (see 7.4.3 Staff Education and Training/Mandatory training).

<sup>16</sup> Australian Government and States and Territories of Australia, [National Construction Code Series \(NCC\) 2022 Volume One - Building Code of Australia Class 2 to 9 buildings](#). Website Accessed May 2023

<sup>17</sup> Australian Standard AS1851-2012 Routine Service of Fire Protection Systems and Equipment

<sup>18</sup> NSW Government: [Be ready for an emergency evacuation](#) Website accessed September 2023

<sup>19</sup> NSW Government [Evacuation Decision Guidelines for Private Health and Residential Care Facilities](#) PDF Document 2016 (Whilst this is a NSW document it may be useful for providers across Australia.)