



Participant and Family Handbook

Participant and Family Handbook

This is your handbook and guide to getting started with What Ability!

What is in this handbook?

Information about:

- ✓ Your rights
- ✓ Your information and privacy
- ✓ Your consent
- ✓ Your access to advocacy
- ✓ Our service
- ✓ Your support plan
- ✓ Your Service Agreement

...and much more!

Dedication:

This guide is dedicated to our What Ability participants and families.
Thank you for helping us make What Ability such a special place for all.

Table of Contents



Your Rights	4
Consent	4
Confidentiality	5
Money Handling	5
Getting Started with What Ability	6
Eligibility and Registration	6
Your Service Agreement	7
Your support plan	7
Referral to other organisations / Transition to other providers	7
About our services	8
Independence	9
Choice and Decision making	9
Dignity of Risk	9
Guardianship	9
What to do if you're not happy	10
Advocacy and other support (inc. external to provider)	13
Ensuring you have Support	15
If you need to cancel your booking?	15
If What Ability needs to cancel your booking?	15
If something happens during a booking?	15
Circumstances change	15
Incident Management	16
Your Service Agreement	17
Your support MAP	18
Ongoing feedback/assessments	19

Contact Us

Address	401/19 Roseby Street, Drummoyne NSW 2047
Phone	02 9719 9014
After Hours Contact Number	0423 004 307
Email	info@whatability.com.au

For Onboarding and Administration - contact the office on 02 9719 9014 or via email, info@whatability.com.au

Your Rights

Consent

What Ability gathers your consent so we can effectively:

- ✓ collect and develop tailored support plans
- ✓ build assessments
- ✓ communicate information about your support
- ✓ administer medication

In line with the Privacy Act 1988, including the Australian Privacy Principles, our policy ensures we meet our legal and ethical obligations that put your rights first!

What Ability captures your consent in the following steps:

- ☐ the Sign Up form
 - collects permission to gather and store information
 - store information to develop a consent plan and make effective assessment on support needs
- ☐ the Consent form
 - outlines use of consent, privacy and personal information
 - collects permission to share information
 - collects three (3) nominated person/s or organisation/s who are approved to communicate with What Ability for specified purposes
- ☐ Social media publicity consent form
- ☐ Medication chart



We will aim to review your consent annually! You can also withdraw or change your consent at any time.

If there is anyone you choose not to include in your support network, you can share those details and What Ability will document this on your profile.

Where the participant we support is unable to provide consent, we will obtain written consent from your nominated guardian. In some instances, verbal consent may be necessary and will be documented.

How to Change your Information or Remove your Consent

What Ability's Support Squad is able to assist you in the process of changing your information or removing your consent at any time.

You can contact the Support Squad via phone (02 9719 9014) or email (info@whatability.com.au) to discuss what you would like to happen.

Confidentiality

Confidentiality ensures that information is accessible only to those authorised to have access and is protected throughout its lifecycle. Confidential information may be marked as such because it includes your personal information or detail about your support.

Your safety comes first! Our confidentiality policies are in place to protect your information and communication with What Ability and relevant stakeholders (eg Government bodies, approved third parties, approved family members, your support network).

We specify document retention periods in-line with NSW legislation. If you no longer have support from What Ability, after seven (7) years, due to auditing requirements, your information is destroyed in a secure manner such as shredding or deleted.

Money Handling

Part of your support plan involves money handling between yourself and your support worker. This could be paying for your ticket for bowling, purchasing food for lunch or topping up your transport card for the ferry. We have a policy in place to ensure you are safe. We have support worker training and internal audits to make sure these procedures are checked regularly.

Under no circumstances are you to receive financial advice from your support worker. It is a criminal offense and you must report it if this happens.

On your booking we recommend you have a debit card that has funds accessible for the activities planned. Your support worker is required to provide receipts at the conclusion of your booking.

If you feel the policy is not being followed or could be improved, reach out to our support squad!

Getting Started with What Ability

Eligibility and Registration

To see if What Ability can support you, you must fill out the Sign Up form (either online or over the phone) and attend a Meet & Greet with our Support Squad.

Requests for support can be made in the following ways:

- ☐ Phone or email request
- ☐ On-site visit to What Ability
- ☐ A general enquiry via the Contacts page or Sign Up form through the What Ability website

Here is our onboarding process:



The Welcome Pack

Your Welcome Pack will include:

- ☐ the Participant and Family handbook
- ☐ Consent form
- ☐ Social media publicity consent form
- ☐ What Ability visual calendar
- ☐ your Medication information form

Your Service Agreement

To finalise your onboarding process, you or your guardian need to complete and sign your Service Agreement. At What Ability there's no lock in contracts! We want you to get the support you need, when you need it.

If you choose not to sign your service agreement, a copy will be provided via email and also at your first booking.

If you're an NDIS participant, your Service Agreement renewal date should align. We will aim to check this agreement annually. You can always call the Support Squad if your circumstances change.

Your support plan

After giving your consent to do so, What Ability will create your tailored support plan. Our support plans are built around community access. This document will also include your behavioural, medical, dietary, preferred activities and any other relevant information.



Referral to other organisations / Transition to other providers

If you are transitioning from a school or another service provider, we need your consent to contact that provider e.g. school, NDIA or other services. This will help us build out your support plan. The information also informs your support requirements, schedules, plans, and person-centred goals to assist in the transition.

If you no longer require What Ability support, we will ensure your exit occurs in a professional, planned and collaborative manner.

Exit planning is an integral part of the exit process and is conducted in close consultation with you, and where appropriate the family, carer and any other important people from the participant's support network.

About our services

What do we mean when we say happiness comes first?
We facilitate fun in the safest possible way!

We provide community-based activities across Sydney:

- ☐ Day programs
- ☐ Weekend support
- ☐ Overnight camps

These activities are tailored to your goals and needs.
Activities can look like swimming, bush walks, parks, beaches, recreation centers, and indoor activity facilities.



What Ability is able to Support all participants whether they are Self managed, Plan Managed or NDIA managed. What Ability is also able to support participants who are not NDIS participants, however GST will be included in this circumstance.

Withdrawal of Support

What Ability may need to choose to withdraw or temporarily stop a participant's access to supports for the following reasons:

- Relocation to an area outside What Ability's area of service delivery
- Where the support schedule and service is no longer able to meet the participant's needs or will assist in achieving their chosen goals
- Transfer to another service provider
- The participant is unwilling to meet the reasonable conditions required in their support plan and thus affecting the safe delivery of a service to the participant and the work, health and safety of staff
- Approvals not being provided within an agreed timeframe by participant / person responsible e.g. consents, Support Plan confirmations etc. to enable safe supports to be provided
- Changes in the participant's status and/or condition results in the support they require exceeding the skills and expertise What Ability staff can provide
- There has been no contact between the participant and What Ability for a period of 3 months (following multiple prompts to do so by What Ability)
- The participant and/or family member/carer engages in behaviour that is unacceptable to What Ability such as violence, abuse, aggression, theft or property damage
- The participant has perpetrated a criminal or other act of a serious and reportable nature
- The death of the participant using the service

Dignity of Risk Choices

In accordance with Australian law, every person has the right to make their own choices. This means that everyone can choose to take certain risks, to learn from their mistakes, and to choose how they want to live.

What Ability staff support and enable participants in their choice and decision makings, including their right to make dignity of risk choices. Access to supports

available and provided by What Ability will not be withdrawn or denied solely on the basis of a dignity of risk choice made by the participant.

Service Provider Transition

A participant may choose to stop receiving supports provided by What Ability at any time, if he/she chooses to do so.

What Ability will support transition to another service provider, including the development of a risk assessment and Transition Plan, and speaking with the participant's new service provider to ensure the transition is efficient and effective.

Exit planning is an integral part of the process and is conducted in close consultation with the participant, and where appropriate their family, carer, person responsible (as appropriate), and any others the participant identifies from their support network.

Fees / Rates

We follow the NDIS guidelines for our pricing. We claim funding under Core Support within Social community and Participation and Daily Participation. If you would like to discuss funding and your plan in detail please call the office 02 9719 9014 and we can inform you of the current rates.

Camps

We offer 16 camps throughout the year, both mid-term and holiday camps. These camps are overnight care with our support workers on a private property on the Central Coast and in Hawkesbury. A typical stay is one to 3 nights and includes a swimming pool and lots of fun outdoor activities. All camps are charged at the current NDIS STA rates.

Independence

Choice and Decision making

Each participant at What Ability, will be given the opportunity to participate as fully as possible in making decisions about the events and activities of their daily life, in relation to the services they receive.

Participants will be encouraged and supported to exercise their right to make informed decisions and choices about the individual services they receive, the activities they would like to participate in and the lifestyle they would like to follow. Duty of care issues will be considered when supporting participants to make decisions to take risks.

An informed decision is one made after the participant has all the relevant available information about the options, and about the risks involved. Staff members will support and respect informed decisions made by participants.

Dignity of Risk

Planning and service delivery takes into account the participant's right to the dignity of risk in decision-making is supported. The participant is supported to make informed choices about the benefits and risks of the options under consideration. If required risks are appropriately managed using our risk management policy and framework.

Dignity of risk refers to the concept of affording a person the right (or dignity) to take reasonable risks, and that the impeding of this right can limit personal growth, self-esteem and the overall quality of life.

In Australian law, every person has the right to make their own choices. This means that everyone can choose to take certain risks, to learn from their mistakes, and to choose how they want to live.

What Ability staff support and enable participants in their choice and decision makings, including their right to make dignity of risk choices.

Access to supports available and provided by What Ability will not be withdrawn or denied solely on the basis of a dignity of risk choice made by the participant.

Guardianship

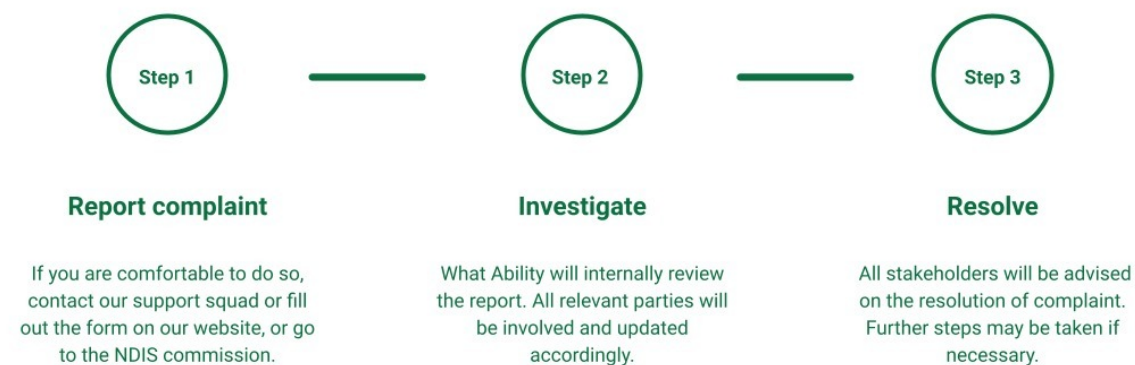
The intention of What Ability is that the participants, their families, carers, guardians and advocates will have full opportunity for input over the development and review of this Support Guide, through representations to the What Ability's staff, management and through our documented communication channels.

What to do if you're not happy

Making a complaint (including complaining directly to external agencies e.g. directly to NDIS)

The purpose of this policy is to outline how people are able to provide feedback and make complaints about any aspect of What Ability and the process that we will take to address and/or respond to the complaint without prejudice.

What Ability is committed to managing complaints in an accountable, transparent, timely and meaningful way and in the most direct way possible.



What Ability supports and encourages the rights of our participants, their families/carers and stakeholders to lodge and pursue any complaint in relation to any aspect of What Ability or its operations.

Step 1:

- ☐ Contact Jake or a member of the Support Squad, if you are comfortable to do so on 0427 999 690 or 02 9719 9014.
- ☐ You also have the right to contact the NDIS commission directly. Those contact details are provided below.
- ☐ If you wish to make a complaint and are uncomfortable talking to a manager you may access the complaint form on the What Ability website. This form is also attached at the back of the Support Guide.

Step 2: What Ability will internally review the report. All relevant parties will be involved and updated accordingly.

Step 3: All stakeholders will be advised on the resolution of the complaint. Further steps may be taken if necessary.

What Ability expects that most complaints/feedback will be able to be addressed and responded to by the people directly involved or at a support worker/middle management level, with only the most serious or unresolved complaints being dealt with by the Support Squad Manager and/or General Manager. However, where complaints require investigation or a more formal review, we will ensure that sufficient resources are allocated as a means to ensure that complaints are proficiently managed and investigated and will only allocate suitably skilled and

qualified employees to investigate and manage complaints of that nature. If required, What Ability will refer to, or seek guidance from external agencies, such as the NDIS Commission or beyond that the NSW or Commonwealth Ombudsman.

Useful Contacts and Services

Individuals or parties with a complaint may make contact with the following bodies should the complaints remain unresolved or at any time in the complaints process. These may include:

The NDIS Commission

Ph: 1800 035 544

Email: contactcentre@ndiscommission.gov.au

Website: <https://www.ndiscommission.gov.au>

NSW Ombudsman

Free call (outside Sydney metro area): 1800 451 524

TTY: (02) 9286 1000

Email: nswombo@ombo.nsw.gov.au

Website: www.ombo.nsw.gov.au

Human Rights and Equal Opportunity Commission (CTH)

Phone: (02) 9284 9600

Complaints Infoline: 1300 656 419

Privacy Hotline: 1300 363 992

TTY: 1800 620 241

Website: www.hreoc.gov.au

Email: infoservice@humanrights.gov.au

National Disability Abuse and Neglect Hotline

A hotline for reporting or complaining about the abuse or neglect of a person with a disability at home, in the community, or in any other location. The hotline will refer a complainant to a relevant state or local agency where necessary.

Free call: 1800 880 052

TTY: 1800 301 130

National relay service: 1800 555 677

Fax: 02 9318 1372

Website: www.disabilityhotline.org

Email: hotline@workfocus.com

Intellectual Disability Rights Service (IDRS)

A community legal centre specialising in legal and rights issues for people with a disability.

2C/199 Regent St REDFERN NSW 2016

Phone: (02) 9265 6300

Free call: 1300 665 908

Fax: (02) 9318 2887

Website: www.idrs.org.au

Email: intakejas@idrs.or.au

People with Disability Incorporated

For people with a disability who wish to make a complaint about their rights being infringed.

Phone: (02) 9370 3100

Free call: 1800 422 015

TTY: (02) 9318 2138

TTY: 1800 422 016 free call

Fax: (02) 9318 1372

Website: www.pwd.org.au

Email: pwd@pwd.org.au

Anti-Discrimination Board (NSW)

Hunter Office

Phone: (02) 9268 5544

TTY: (02) 4929 8419

Tollfree (NSW): 1800 670 182

Website: www.lawlink.nsw.gov.au/adb

Email: adbcontact@justice.nsw.gov.au

Disability Advocacy NSW

Parramatta Office: Lv 15, 60 Station Street E, Parramatta NSW 2150

Phone and TTY: 1300 365 085 or (02) 4927 0111

Fax: (02) 4927 0114

Email: nepeanbluemountains@da.org.au

Multicultural Disability Advocacy Association

MDAA Head Office

Phone: (02) 9891 6400

Fax: (02) 9897 9402

Address: 10-12 Hutchinson Street, Granville NSW 2142

Postal: PO Box 884, Granville NSW 2142

Email: mdaa@mdaa.org.au

Toll free (GRANVILLE, Sydney) 1800 629 072

Advocacy and other support (inc. external to provider)

What Ability acknowledges that any participant of our services has the right to seek support of an advocate or advocacy agency to help with all aspects of service delivery provided by What Ability or from other service providers.

Whenever possible participants will be supported and encouraged to self-advocate, but whenever required, we will facilitate access to an advocate for any participant should they wish us to do so.

It is understood that the level of support from participants will vary and be dependent upon the needs and approval of each participant. The role of advocate may be undertaken by more than one individual/organisation.

What Ability will ensure that advocates are identified and included within the individual record of each participant.

Any communication with the nominated advocate will be undertaken in a timely, open and transparent manner and consistent with the approval of each participant. Information on the role and services offered by advocacy agencies will be readily available and supported by the organisation to enable access by participants or their families if required or requested.

Consistent with ethical practice, staff of What Ability should not be identified as an advocate for any participant of What Ability in any aspects of service delivery between the participant, What Ability or any third-party person/organisation. It is acknowledged that at times What Ability staff will be asked to attend meetings in a professional capacity to present information on behalf of the participant or organisation. In these circumstances it is expected that this representation will be restricted to the management team positions and be undertaken consistent with the scope of their position within the organisation.

We will not disclose any information about the participant to an advocate when the person is not present, unless we have the participant's express permission to do so. If a participant wishes us to disclose information to an advocate, they will be required to disclose this information and instructions in writing.

Participants may use an advocate:

- ☐ any time they wish to communicate with us
- ☐ at initial consultation
- ☐ during interviews and reviews

An advocate is a person, who with the agreement and authority of the participant represents their interests.

An advocate may be a family member, a friend, another professional or a formal advocacy service.

Definitions

Advocate: An advocate is a person who supports a participant/consumer to protect and promote their rights and interests. An advocate can, with the service user's permission, negotiate on a consumer's behalf or support the consumer to negotiate for him or herself. An advocate does not conciliate or arbitrate between an organisation and service user. An advocate 'stands beside' a service user to support them to make their own decisions. An advocate is an important resource for a participant/service user in situations where a consumer feels confused, overwhelmed, intimidated or under confident. An advocate can be a family member, friend or an outside organisation.

Useful Contacts and Services

Disability Advocacy (DA) NSW

Find your local advocate: www.dana.org.au/find-an-advocate

Telephone contact: 02 4927 0111 OR 1300 365 085

Provide individual advocacy services to people with a disability who have serious and urgent problems.

Indigenous Disability Advocacy Service (IDAS)

Telephone Contact: 1300 114 327

Provide individual advocacy services to Indigenous people with disabilities, their families and carers who have serious and urgent problems.

Multicultural Disability Advocacy Association of NSW (MDAA)

Telephone Contact: 4927 0111 or 1800 629 072 Provide individual advocacy services to people with disabilities, their families and carers from non-English speaking backgrounds.

Intellectual Disability Rights Service (IDRS)

Telephone Contact: 1800 666 611

The IDRS provides telephone advice on a range of legal issues and representation in priority areas such as criminal law, care and protection and guardianship

Ensuring you have Support

If you need to cancel your booking?

If you or the participant are sick

If you or the participant feel unwell or sick and can not complete your booking, you are required to contact What Ability to advise them of this with reasonable notice and we can cancel/reschedule your booking at your request.

If your support worker does not show

If your support worker is not at the designated pick up point at the start of your booking for the booking, you are required to call anyone from the Support Squad so we are able to investigate further.

If What Ability needs to cancel your booking?

What Ability will do our best to contact you as soon as possible if there are any changes or cancellations to any bookings.

If something happens during a booking?

Circumstances change

If there is a change of circumstances for an activity, or change of pick up/drop off. E.g Property is lost during a booking.

Support Workers or What Ability will contact you regarding any changes and to discuss how to best move forward.

Incident Management

What Ability is committed to providing a safe environment for all participants, personnel, contractors and visitors. What Ability is committed to establishing a formal process to report and investigate all workplace accidents/incidents and near miss occurrences. This includes all participants, staff and visitors. The process includes identifying contributing factors of the accident/incident or near miss and making the necessary recommendations to prevent a recurrence.

When an incident occurs during a booking What Ability's Support Squad will be informed immediately and will take any immediate actions that may be required. What Ability's Support Squad Manager will contact the Participants relevant contact to inform them of the incident.

What Ability investigates all incidents to document all of the factual information about what has occurred. What Ability's Support Workers will be supported through the incident process.

The Support Squad is responsible for all incident management. What Ability is invested in Support Worker training to encourage all Support Workers to confidently manage any crisis situation.

Please reach out if you have any questions in relation to incident management. The process is also outlined within the Policies and Procedure.

Improving Your Services

What Ability encourages our staff and participants to fill out a feedback form after camp/group activities to ensure we are doing the best we can in supporting our participants.

These forms are on our website.

All feedback is valid and is passed on to the What Ability Leadership Team as we strive to improve our services every day.

Next steps

Your Service Agreement

If What Ability can support you, post meet and greet you will receive a customised Service Agreement with What Ability. This is an example of what it will look like below.

Your Agreement with What Ability

This document applies only if you agree to receive Disability services from What Ability PTY LTD.

This service agreement will commence on the: 28-03-2020 and run until the 21/10/2021.(The End date of your NDIS plan)

Client details

Name: [REDACTED]

Address: [REDACTED]

NDIS Number: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Representative details (if applicable)

Name: [REDACTED]

Address: [REDACTED]

Type of representative: [REDACTED]

Nature of legal authority to sign: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Parties

This Service Agreement is for a participant in the National Disability Insurance Scheme (participant), and

is made between the What Ability Pty Ltd Company and the participant, and their representative, as detailed below:

This service agreement is for the provision of the support services for the period of time stated below, or for as long as the individual listed above chooses to access the service.

Start date (today's date): [REDACTED] End date: [REDACTED]

What Ability Pty Ltd and this Service Agreement

This Service Agreement is made for the purpose of providing support under the participant's NDIS plan. A copy of the participant's plan is attached to this Service Agreement, if permission is given by the participant or their representative. The parties agree that this Service Agreement is made in the context of the NDIS (What Ability Pty Ltd), which is a scheme that aims to:

- Support the independence and social and economic participation of people with disability
- Enable people with a disability to exercise choice and control in the pursuit of their goals and the planning and delivery of their supports.

Your support MAP

We use the support MAP as a creative tool to graphically record what support means to you! MAPs are a planning style developed by Judith Snow, Jack Pearpoint and Marsha Forest with support from John O'Brien and others.



If you're completing the MAP without a facilitator, follow these 8 steps:

1. Think of four words or images that describe a map to you
2. Describe what has happened to you in the past. Try and choose three words. This could be about experiences good or bad, places you like or dislike and/or people
3. Share your dream! This can be as many words or images as you want. For some people, dreaming is about aspirations – they may want to travel the world or have a house by the sea. Whichever way the dreams are expressed, they provide a very strong focus for the rest of the process.
4. What are your nightmares? Try and list at least three and how they make you feel
5. Brainstorm at least three words that describe you. These are characteristics that you like about yourself and make you, YOU!
6. What are your gifts, strengths and talents?
7. What support do you need? List out activities, people or experiences that might help you move towards your dream and away from the nightmare
8. What steps can we take, and who will take them? This is your Action Plan. It could be looking for other activities in the community such as social clubs, getting help crossing the road, getting help around relaxing etc

Ongoing feedback/assessments

We encourage you to provide regular feedback at all times. If you've hit your first year with What Ability, check out the forms below you can easily fill out and send back to our team!

Year 1 with What Ability

Today's date:

Rate the following questions on a scale of 1 (Not good) to 10 (Amazing)

1. Level of satisfaction with the service:
2. Different types of activities available:
3. Level of confidence in support worker training:

List your top three moments with What Ability this year?

- 1.
- 2.
- 3.

Was there a stand out What Ability employee we should know about? (This can be a support squad member or support worker)

Are our systems and technology working for you? Is there something that would be better for you?

Are there areas What Ability can improve?

Is there a policy you would like us to review? Please reach out directly if you would like to provide additional feedback on this policy over the phone.

Do you have ideas on how we can increase community participation and inclusion?

All done? Please snap a photo of this and send to info@whatability.com.au

Year 2 with What Ability

Today's date:

Rate the following questions on a scale of 1 (Not good) to 10 (Amazing)

4. Level of satisfaction with the service:
5. Different types of activities available:
6. Level of confidence in support worker training:

List your top three moments with What Ability this year?

- 4.
- 5.
- 6.

Was there a stand out What Ability employee we should know about? (This can be a support squad member or support worker)

Are our systems and technology working for you? Is there something that would be better for you?

Are there areas What Ability can improve?

Is there a policy you would like us to review? Please reach out directly if you would like to provide additional feedback on this policy over the phone.

Do you have ideas on how we can increase community participation and inclusion?

All done? Please snap a photo of this and send to info@whatability.com.au

Appendix: if you are having any difficulties with our online forms you can view the forms below for reference

Complaint Report - <https://whatability.com.au/complaint-form/>

Part A – About you

Fill in this box if you if you are making a complaint

Name of person *

Name of nominee if applicable

Street Address

City

State

Mobile

Email

Date complaint lodged

Fill in this box if someone is assisting you with the complaint – for example a family member, your nominee or representative.

Name of representative

Organisation

Street Address

City

State


Contact Numbers

Business

Mobile

Email

My preferred contact is

Business 

Part B – Your complaint

What is your complaint about?

Provide some details to help us understand your concerns. You can include what happened, time and date, where it happened and who was involved.

Part C – Who is your complaint about?

Who or what does your complaint relate to

Name/organisation *

What is this person's/organisation's relationship to you? *

What outcomes are you seeking?

Supporting information such as witness names, photos and correspondence or emails etc

Participant, Family or Carer Feedback Sheet

Date *

dd/mm/yyyy

Thank you for taking the time to complete this feedback sheet. We will use your comments to improve our services. This is a confidential document and names are not required. If you would like to you can provide your name and contact number at the end of the form.

Please tick the relevant box to record your answers to the following questions:

Do the services we offer meet your needs?

- ☐ Yes
☐ No
☐ Some

If your needs are not being met, what areas do we need to improve?

- ☐ Quality of service delivery
☐ Overall management and operations
☐ Meeting cultural needs
☐ Handling complaints/grievances
☐ Facilities/environment
☐ Safety and well-being
☐ Community participation
☐ General enquires and information

What do you think we can do to improve in these areas? Please list the specific area/s and your suggestions.

Feel free to tell us more about your experience with our staff

In what areas could staff improve to meet your needs?

- ☐ Job expertise/level of skills
- ☐ Cultural knowledge and skills
- ☐ Communication and listening skills
- ☐ Providing access to information
- ☐ Maintaining privacy and confidentiality
- ☐ Behaviour and attitudes
- ☐ Efficiency (things done on time)
- ☐ Providing Feedback
- ☐ Understanding your individual needs

Is there something else you would like to provide feedback to us on? (Please feel free to attach a sheet if you require more room)

Have you found this form difficult to complete and would like to provide feedback to us in another way? If so please contact us on 0423004307

Thank you for your time and effort. We value your feedback and we will use your comments and ratings to continually improve the services we deliver.

Your Team @ What Ability

Participant/Carer name (optional)

What Ability – Incident Report

Back up - Incident Form

Date of incident

mm/dd/yyyy



Time of incident

HH : MM AM

Short description of incident / near miss *

Area where incident / near miss occurred *

Name of injured person (if relevant)

Injury sustained (if relevant)

Name of person who reported incident *

Date of report *

mm/dd/yyyy



Name of person completing this form *

First

Last

Telephone number

Witness Name and Contact Number *

What preventative action could have been taken? Why was this action not taken?

How much experience did the employee have in the task/s that was being performed when the accident / incident occurred? What training has been provided?

What is the chance of the accident / incident occurring again?

Briefly describe what happened including the sequence of events, investigate scene of incident or near miss; conditions present at time of incident; what was involved, what activity (if any) was taking place prior and at time of incident. What hazards was the worker exposed to? What hazards may have contributed to the incident occurring? (Attach photos below if available)

Conflict of Interest Declaration

PERSONAL DETAILS

Name: _____

Position: (Please Circle)

- ☐ Employee
- ☐ Board Member
- ☐ Volunteer
- ☐ Other

Specific Role in Organisation: _____

Has the conflict occurred? Yes / No If yes, date occurred: _____

If not, when is it possible or likely to occur? _____

List potential, perceived or real conflict of interest
List identified persons conflict of interests involves
Describe how the matter was dealt with
List any follow up actions required

Name: _____

Signature: _____ Date: _____

What Ability Medication Information

Participant Name:

Participant DOB:

Medication	What is it for?	Possible Side Effects
Eg Risperidone	Eg Behaviour support / seizure management	Eg heart attack, drowsiness, shallow breath,

If the participant's medication is not listed above, you must contact, document and seek assistance urgently before administering.

In case of emergencies you can contact;

- **Emergency Services - 000**
- **NSW Poisons Information Centre (Poison Hotline) - 13 11 26**

I understand:

☐ I give What Ability Support Workers permission to administer medication

Participant or guardian	
Signature	
Date (DD/MM/YYYY)	
Support Squad Signature	