KindCare
Individual Support
Policy and Procedure



Individual Support Policy and Procedure

Policy Statement

KindCare is committed to providing a high level of support and care to clients.

Service Delivery Model

KindCare uses two main service delivery models, for its two care service streams.

Aged Care Services

Aged care services include home and community care, assisted living and residential care. Aged care services are delivered under the ***Consumer Directed Care (CDC)*** model.

CDC is a service delivery model which allows care services to be customised to the individual's needs to create unique home care packages

CDC offers the following benefits to the client/person receiving care:

- The client is able to choose the care and services they access, how they are delivered and the service provider
- The client is involved in the planning process and can communicate their goals and needs
- The client is involved in the development of their own individual care plan
- The client can decide on their level of involvement in ongoing care management
- Care is provided under an individual budget and the client can receive updates on expenditure
- The service provider is responsible for ongoing monitoring and completing formal reviews of the package to ensure is continues to meet the client's needs

Staff are required to negotiate the following home care package features with clients:

- The amount of involvement the client wants to have in managing home care package
- The amount of money available to fund the client's care and services
- The costs of the client's care and services
- The fees and charges in relation to the care and services provided to the client

Disability Services

Disability services include home and community care, assisted living and residential care. Disability services are delivered under the ***National Disability Insurance Scheme (NDIS)***.

KindCare Individual Support Policy and Procedure

The NDIS is a service delivery model which allows clients with disabilities to access support services, which are provided taking a 'lifetime' view of the client's needs

The NDIS offers the following benefits to the client/person receiving care:

- The client is able to maintain their exiting informal support arrangements, such as receiving support and care from carers, family or friends
- The client is able to access general local community support services and supports, such as libraries, sports clubs, charities, or community groups.
- The client is able to access funding for support services
- The client is able to access mainstream support services from professionals such as doctors or teachers

Staff must with clients face to face to develop a plan for services and support, and provide a single point of contact for the client.

Providing Support

Support workers may provide a range of support to client. Support should be tailored to the client, based on their preferences and strengths.

Typically support will include a combination of the following tasks, as required by the client:

- **Bedroom**
  - Assist client with getting in/out of bed
  - Make client's bed
  - Change linen on client's bed
- **Bathroom**
  - Assist client with bathing
  - Assist client with toileting
  - Assist client with grooming
  - Clean sink, tub, toilet, and surfaces
- **Personal Care**
  - Assist client with dressing
  - Assist client with transferring
  - Assist client with walking
- **Meals**
  - Plan menus for/with client
  - Prepare and serve meals
  - Assist client with feeding
  - Wash, dry and store dishes and utensils
  - Clean sink, stove, counters, refrigerators
- **Household**
  - Empty and take out rubbish
  - Wash, dry and fold laundry
  - Clear, dust and tidy surfaces
  - Sweep or vacuum floors
  - Mop rooms in use
  - Complete outdoor/yard work
  - Run errands
- **Shopping**
  - Prepare shopping list
  - Buy groceries
  - Store/put away groceries
- **Transportation**
  - Assist client to access social activities
  - Assist client to access doctor's appointments
  - Assist client to access other activities (religious, etc.)
- **Social activities**
  - Read to client
  - Play games with client
  - Visit with client (conversation)

Assembling Equipment

Any equipment required for support, should be set up, ideally prior to the support being provided. All parts of the equipment should be physically sound and clean and be thoroughly checked before assembling.
Support workers should check that all parts are present and none are missing before commencing assembly.

Any defects or missing parts should be reported

Providing Translators

Clients who do not have fluent English skills, must be provided with a translator during any appointment or decision making process.

Reporting Concerns

Support workers should report concerns, such as variations in a person's physical condition, or wellbeing or indications that the person's physical situation is affecting their wellbeing to supervisors.

Support workers should also report possible indicators of abuse or neglect and report following the KindCare Work Health and Safety Policy and Procedure.

Working with Clients with Dementia

Adjusted communication and behaviour management strategies may be needed when working with clients with dementia. KindCare prides itself on maintain all client's human rights and dignity, and expects its staff to respond to clients with dementia patiently, sensitively and with respect.

Communication Strategies for Disoriented Clients

When clients with dementia become disorientated, the following strategies may be used.

Distraction

Distraction involves diverting the person's attention from their current situation to another task or activity

Allowing expressions of distress

Allowing expressions of distress involves applying patience and listening skills to provide the client with space to express their emotional state and communicate when they are distressed.

Empathy and Acknowledgment

Empathy and Acknowledgement involves recognising and responding sensitively to the client's emotional experience and needs.

Reassurance

Verbal Reassurance
Verbal reassurance involves using language and subject matter to express empathy and support to calm the client.

Physical Reassurance
Physical reassurance involves using touch and space to express support to calm the client.

Validation

Validation strategy involves the support worker not correcting the client when they believe they are in another time or using reality orientation but rather 'entering their reality' to provide support.

Reality orientation

Reality orientation involves re-orienting the person back to the present place and time to assist them to realise where they are and to understand that they are not under threat.

Reminiscence

Reminiscence involves speaking with the client about their past to calm them.

Responding to Behaviours of Concern

When clients demonstrate behaviours of concern such as verbal aggression, physical aggression, sexually inappropriate behaviour, social withdrawal, wandering, repetition, refusal to accept personal care services, or eating issues, support workers should respond immediately (when the client may harm others or themselves) or after observing the behaviour and considering the most appropriate respond.

De-escalation Strategies

A range of de-escalation strategies can be used when clients demonstrate behaviours of concern, such as (these strategies are further outlined in Communication Strategies for Disoriented Clients):

- Distraction
- Reality orientation
- Reassurance
- Validation
- Reminiscence

De-escalation Procedure

The following steps should be completed when responding to client behaviours of concern:

1. Keep calm
2. Call for help from security or a supervisor
3. Leave the client to calm down, if possible and safe
4. Remove others from the environment, if possible and safe
5. Use calming body language and tone of voice
6. Avoid harsh, aggressive or blunt statements such as "Don't", "Stop" or "You must"
7. Implement De-escalation Strategies such as, reminiscence, reassurance, reality orientation, and validation

Client Records

Support workers are required to keep accurate client records of the support provided to clients.

The following records are required:

- **Individual Care Plans**: Support workers are required to develop individual care plans, using the ***KindCare Individual Care Plan,*** in consultation with the client, their family/carer and supervisor/manager.
- **Personal Care Risk Assessments:** Support workers are required to complete Personal Care Risk Assessments, using the ***KindCare Personal Care Risk Assessment Form***:
    - When working with a new client
    - Every three (3) months when working with existing clients
    - Whenever there is a major change in the client's circumstances, needs, medical status or living arrangements
- **Personal Care Checklist:** Support workers are required to complete Personal Care Checklists during each support session, using ***the KindCare Personal Care Checklist***.
- **Client Case Notes:** Support workers are required to complete Client Case Notes following each support session, using ***the KindCare Client Case Notes***.
- **Support Worker Timesheet:** Support workers are required to complete Client Case Notes following each shift, using the ***KindCare Support Worker Timesheet***.
- **Referrals:** Support workers are required to document referral letters when required by clients.

All records should be named and stored as outlined in the ***KindCare Client Records Management Policy and Procedure.***

Case Notes

Case notes should be written using the ***KindCare Client Case Notes***
Clear and objective language that protects the client's privacy and confidentiality should be used. This will involve:

- Recording the date, time and your name
- Referring to the client as 'client', rather than by name

- Recording only factual information; rather than conclusions. Think about what you can see, hear, or smell to help you focus on factual information.
- Including key events, such as:
    - How the client presented (appearance, mood, referrals, handovers from other staff, etc.)?
    - What was said, by the client and worker
    - What actions were taken by the client and worker
    - What, if any, results or changes were observed

Referrals

Referrals may be provided verbally by calling the organisation the client is being referred to and provide a summary of their contact information and needs.

Support workers may also need to document written referrals to other services. Referrals should be written in the format required by the organisation being referred to; this may involve completing a form or writing a referral letter. When the organisation the client is being referred to does not have a set format, a referral letter will typically be used.

Referrals should include:

- KindCare's name and contact information
- The name and contact information of the organisation you are referring to
- The clients name and a summary of their key needs (as these relate to the new service)

Referrals should be written to clearly and objectively, and include only factual information; rather than conclusions.

Review Support and Care Plans

Client care plans should be reviewed regularly to identify changes to the client's needs and preferences, and areas where the plan is working well or needs to be improved.

Reviews should always be completed in consultation with clients and their family/carer.

Collecting Feedback from Clients

Support workers should collect feedback from clients, by asking a range of questions, such as:

- Are you satisfied with the support that I am providing?
- Are there any areas that could be improved?
- Is there any additional support you require?
- Are there activities that you are currently doing that you would like to do more/less of?
- Are there any activities that you are currently not doing that you would like to do?
- Are there any activities that you would like to do more independently?
- Are there some activities that you are doing now that you require more assistance with?

Collecting Feedback from Family/Carers

Support workers should collect feedback from clients, by asking a range of questions, such as:

- Are you satisfied with the support that I am providing?
- Are there any areas that could be improved?
- Is there any additional support you require?

Infection Control

Infection control is a critical responsibility of support workers. Support workers use the hand washing process regularly and apply other infection control processes during all activities in which they are exposed to bodily fluids, food, or personal items which could spread disease.

Hand Washing

Support workers must wash their hands routinely when providing care. In particular, hands must be washed immediately after:

- Coughing, sneezing or blowing the nose
- Eating or drinking
- Touching hair, scalp or any wound
- Using the toilet
- Handling urine or faeces
- Handling raw food
- Handling dirty clothes
- Smoking

Food Preparation

Support workers may be required to prepare food for clients. Food surfaces should be cleaned before and after use, and all perishable food products should be stored in a refrigerator.

Hand Washing Process

The following steps should be completed when washing hands:

1. Wet hands
2. Apply and lather soap
3. Scrub hands for (approx.) 20 seconds, including
    - Backs of hands
    - Between fingers
    - Under your nails
    - Wrists
4. Rinse hands using warm, clean, running water
5. Turn off tap
6. Dry hand using:
    - Single use towels

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- Other means of effectively drying hands that are not likely to transfer pathogenic microorganisms to the hands (e.g. hand drier)

Food Preparation Surface Cleaning Process

The following steps should be completed when cleaning food preparation surfaces:

1. Wipe surfaces with clean cloths which are not contaminated with human waste or other contaminates
2. Remove scraps and dispose of them in correct way
3. Use different colour coded chopping boards for different food items and tasks
4. Sanitise surfaces to remove chemical contamination
5. Wash utensils between tasks