

Building capability and safeguarding policy - Lifetime Schemes

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Building Capability and Safeguarding Policy - Lifetime Schemes

1. Overview

Safeguarding is about protecting people from harm and helping them to build capability to navigate and enable risk with appropriate support. Lifetime Schemes comprises Lifetime Care, Workers Care, Dust Diseases Care and CTP Care. Each scheme supports people (referred to herein as 'participants') with different injuries and capabilities who require lifelong support. While service models differ across each scheme, our approach to safeguarding is consistent - safeguarding is a way of working, planning and interacting that prioritises the safety and well-being of everyone, primarily participants, but also staff, family members, providers, other members of participants' support teams and the broader community. Safeguarding in Lifetime Schemes also seeks to promote participant choice and control and strengthen participants' natural supports and their own safeguarding knowledge and skills.

2. Context

Lifetime Schemes applies a person-centred approach to supporting each participant by:

- upholding their human rights
- supporting decision-making driven by their will and preferences
- promoting choice and control
- facilitating safety and well-being
- empowering them to be active and engaged citizens, able to reach their potential and maximise their quality of life.

A participant's self-protective and self-empowering behaviours may be compromised by factors that can include decreased cognitive capacity; physical dependency on others; communication difficulties and differences; physical or psychological ill- health; trauma; lack of cultural safety; social and/or geographical isolation; access to services; low expectations of informal and formal supports and other social factors.

Participants may be vulnerable to experiencing abuse, harm and neglect due to some or all of these factors. Because of these risks and because our approach includes developing participants' capability, skills, abilities and resilience, safeguarding is a critical focus of the support Lifetime Schemes provides.

3. Purpose

The purpose of this policy is to enable participants to make informed choices and support them to take reasonable risks to achieve their goals, re-engage with roles meaningful to them, and build on existing knowledge and skills that strengthen their own safeguarding abilities.

The Policy encourages Lifetime Schemes staff and service providers to practice risk enablement. This includes balancing appropriate protections and responses to meet duty of care while upholding the rights of participants to make choices and take reasonable risks, (including support to experience the dignity that taking reasonable risks can bring).

This Policy helps us to be clear with ourselves and others about what building capability and safeguarding looks like in Lifetime Schemes. It ensures reasonable safeguards are in place for participants supported through the schemes in keeping with the United Nations Convention on the Rights of Persons with Disabilities.

The Policy:

- outlines our approach to safeguarding and managing risk, including positive risk-taking
- states our safeguarding purpose and principles
- describes the structures that support our safeguarding practice
- underpins our policies and operational guides, as part of clinical governance
- informs practice.

4. Scope

This policy applies to:

- Participants of - Lifetime Care, Workers Care, Dust Diseases Care and CTP Care.
- Lifetime Schemes staff and service providers funded by Lifetime Schemes, who are supporting participants with their injury-related needs.

To accommodate differences in the nature of each scheme and its participants, safeguarding processes and mechanisms will vary.

5. Safeguarding Statement

In this Policy, 'Safeguarding' is the act of protecting and upholding the safety, well-being and rights of those supported by Lifetime Schemes.

We strive for a culture of risk enablement by strengthening the person and promote safeguarding as an important component of practice. Safeguarding extends across Lifetime Schemes in which our stakeholders – including participants, family members, staff and service providers – feel safe, valued, supported and protected in their day-to-day interactions and part of a supportive network that will act collaboratively in the event of an incident that impacts someone's safety or well-being.

We safeguard through prevention of potentially abusive practices or incidents, by:

- practising person-centred support, recognising and building on peoples strengths and prioritising participants' quality of life
- actively upholding a zero-tolerance approach to exploitation, violence and abuse of participants including taking appropriate action to prevent further harm and hold those who may have caused harm to account
- promoting positive interactions between participants, staff and service providers – which means taking action, appropriate to our position, to prevent harm and hold those who may have caused harm to account

Incidents or practices that contravene our Safeguarding Policy are managed by clear processes that:

- respond swiftly to incidents or complaints that involve someone's safety and well-being
- change practices, policies or systems, where this will help prevent contravention of the Policy in future - whether at a staff, team or scheme level
- evaluate the impact of changes.

6. Policy principles

6.1 Rights

Each participant's rights under the UN Convention on the Rights of Persons with Disabilities are protected. Each participant has the right to freedom from exploitation, violence and abuse and there is a zero-tolerance policy on abusive behaviour of any kind.

Each participant has the right to take risks and be fully involved when making decisions about their safety and well-being, to the extent of their supported capacity and of Lifetime Schemes' lawful ability to support the risks they choose to take.

6.2 Capacity

Decision making capacity is decision and time specific and contextual factors can impact a person's ability to make decisions. It is assumed that each participant has the capacity to make decisions and exercise choice, regardless of their disability, unless determined otherwise for a specific decision.

6.3 Person-centred

Each participant will have access to the individualised support they need to make decisions and exercise choice, in line with their will, preferences and decision-making capacity. Safeguards and support for decision-making will be flexible to enable change over time as individual circumstances change.

6.4 Quality of Life

Safeguarding will support a participant's right to fully participate in everyday aspects of life and to contribute to their community where they choose to. It also takes account of their cultural preferences and priorities.

6.5 Continuous Improvement

Safeguarding policies and practices are regularly reviewed towards currency and continuous improvement. Complaints and matters pursued by participants through the Lifetime Schemes complaint and dispute resolution process inform this review cycle, as they provide opportunities to improve practice and systems. Complaints can be brought forward by participants or family members without fear of recrimination and independent support will be offered to facilitate complaints processes as required.

7. Safeguarding in Lifetime Schemes

Lifetime Schemes works in a person-centred way to identify key points in a participant's journey where risks may arise and need to be managed. We use screening tools to assess risk and develop action plans with clearly defined escalation pathways and review mechanisms to promote accountability and continuous improvement.

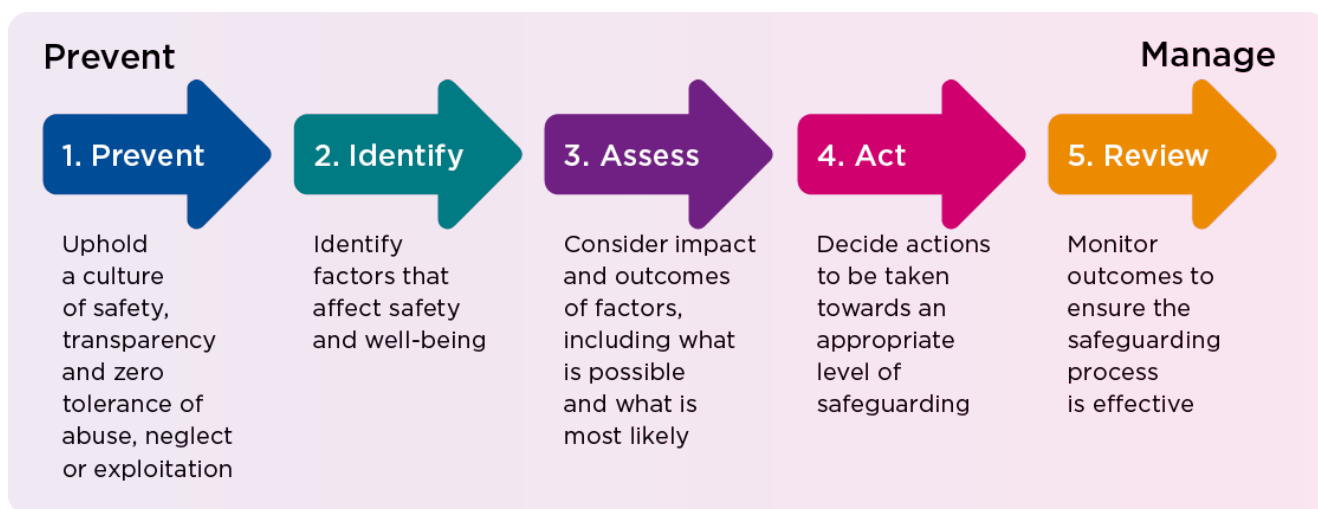
7.1 Safeguarding Process Overview

There are five key elements of Lifetime Scheme's safeguarding process (Figure 1):

- I. prevent or manage harm including identification of person strengths, will and preference
- II. identify risks to the well-being of a participant and/or those around them

- III. assess the nature of the risk, and how it relates to other risk and protective factors
- IV. take action to manage the risk
- V. review outcomes of decisions at a participant, policy and program level.

Figure 1 - Five key elements of Lifetime Scheme's safeguarding process



7.2 Safeguarding prevention and early intervention

Lifetime Schemes has adopted a strengths-based approach to support participants to identify their own priorities, strategies and abilities around keeping themselves safe.

Prevention and early intervention means building on these strengths and delivering a safe and supportive service, to minimise the potential for harm as much as possible. It includes being alert for possible causes of direct harm (such as abuse or violence) or indirect harm (such as a participant ‘falling through the cracks’ of multiple systems) and taking steps to manage these risks.

At a program level, the most important elements of prevention and early intervention are:

- having a ‘zero tolerance’ approach to violence, abuse, neglect and exploitation of people with disability and/or health conditions that may impact independence and autonomy
- delivering person-centred support including good communication and joint risk management, which builds a person’s own capability and trust in those they work with
- respecting and enabling participants’ right to self-advocacy and managing complaints and dispute resolution as part of continuous improvement
- screening for risk and taking steps to mitigate the risks we foresee before harm occurs.

Lifetime Schemes works with participants and their supports to look out for potential risks to their safety and well-being and to manage those risks in a way that honours participants’ right to dignity of risk.

When participants speak up about their safety and well-being, their concerns are managed in line with Lifetime Schemes policy and procedures, collaboratively with the participant where possible and appropriate. When others speak up on the participant’s behalf in relation to safeguarding, the participant’s will and preferences guide us. Note: In CTP Care, communication may be directly with another party where there is current written

authority from the participant and it is appropriate in the circumstance.

7.3 Service providers

Lifetime Schemes has high benchmarks of service quality and safety for its service delivery partners, including approved providers and providers not subject to approval.

All providers working with Lifetime Schemes participants are accountable for service standards and standards of practice in line with legislative, professional and industry body requirements. Approved providers for Lifetime Care, Workers Care and Dust Diseases Care are also subject to periodic risk-based review and other quality governance conditions as specified in their service agreements with icare.

8. Safeguarding governance

Safeguarding governance is led by the Lifetime Schemes Leadership Team, with support from various teams across the business area.

8.1 Safeguarding Practice Leadership Group (SPLG)

Lifetime Schemes convenes a quarterly Safeguarding Practice Leadership Group (SPLG) to drive quality and continuous improvement in safeguarding practice and to support clinical governance of safeguarding matters. It does this by:

- ensuring that teams respond to safeguarding matters in an integrated and consistent way, by leading cross-unit problem solving and disseminating safeguarding practice guidance
- using meetings to discuss, resolve and report on safeguarding matters and make recommendations for systemic change where necessary.
- bringing together senior staff from all relevant teams across Lifetime Schemes to discuss, resolve and report on safeguarding matters.

The core functions of the SPLG are to:

- create a safe, pragmatic space for teams and individuals to share and learn from experience, and contribute to innovation and collaboration
- facilitate collaborative service responses
- workshop cases across different teams to learn from complex experiences and innovative responses, develop solutions and share safeguarding ways of working
- convene ethical review panels
- provide culture and practice leadership to enable joined-up service delivery
- refer recommendations for policy or systemic practice changes to the Lifetime Schemes Leadership Team.
- monitor and report on safeguarding issues and trends including communication back to frontline staff.

In carrying out these functions, the SPLG prioritises the voices of participants so that they are heard whether in individual case reviews or broader practice reforms. The SPLG also honours the safeguarding principles outlined in this policy, including the principle of person-centred support.

8.2 Ethical Review Panels

Lifetime Schemes also convenes Ethical Review Panels for cases that require exceptionally complex ethical

decision-making. The purpose of these panels is to provide advice to senior decision-makers facing an ethical dilemma in the delivery of services in Lifetime Schemes. Panels are an opportunity to workshop ethical dilemmas with people who can offer ethical insights from disciplines or perspectives relevant to the case being presented. They offer an additional layer of external engagement for governance and accountability, for circumstances where Lifetime Schemes staff are faced with difficult choices that have serious ethical implications.

Panels are convened only in exceptional circumstances.

Appendix 1: Glossary of terms

Term	Definition
Approved service providers	icare has contracts with service providers who are approved to deliver particular service types in particular schemes. These include: <ul style="list-style-type: none"> • Attendant Care • Care Needs Assessors • Case Managers
Capacity	A person has capacity to consent if they are able to demonstrate an understanding of the general nature and effect of a particular decision or action and can communicate an intention to consent (or to refuse consent) to the decision or action. A person's capacity to make a particular decision should be doubted only where there is a factual basis to doubt it. It should not be assumed that a person lacks capacity just because he or she has a particular disability, severe injury or another health condition. A person may have the capacity to exercise privacy rights even if they lack the capacity to make other important life decisions.
Clinical governance	Clinical governance is an integrated set of leadership behaviours, policies, procedures, responsibilities, relationships, planning, monitoring and improvement mechanisms that are implemented to support safe, quality clinical care and good clinical outcomes for each person.
Dignity of risk	The right of all people with disability to make choices and take reasonable risks to achieve their goals and re-engage with roles meaningful to them.
Lifetime Schemes	icare's Lifetime Schemes comprises Lifetime Care, Workers Care, Dust Diseases Care and CTP Care. Each scheme supports people who require lifelong support as a result of their injury or illness. Each of the schemes operate under separate legislation.
Person-centred support	A service provision that places the person at the centre and, to the extent that they are able, in charge of the planning, design and implementation of the supports they need.
Positive risk-taking	Positive risk taking is a process which starts with the identification of potential benefit or harm. The desired outcome is to encourage and support people in positive risk taking to achieve personal change or growth. Positive risk taking recognises that in addition to potentially negative characteristics, risk taking can have positive benefits for individuals, enabling them to do things which most people take for granted.
Providers not subject to approval	Providers of treatment, rehabilitation or care services for Lifetime Schemes participants who are not subject to a contract or service agreement with icare. Typically, this includes providers such as Physiotherapists, Occupational Therapist, Rehabilitation Physicians, etc.

Safeguarding	A way of working, planning and interacting that prioritises the safety and well-being of everyone – primarily the person with disability – but also including staff, family members, service providers, other members of the person’s support team and the broader community.
Risk enablement	An approach to support people with fluctuating decision making abilities, to make choices and be involved in activities that may involve risk while minimising potential harm to themselves or others. A risk enablement approach promotes empowering support that enables people to live an engaged and meaningful life.