



SIL Properties Policy, Guidelines & Framework

Current Version

Service Area	Disability, Aged, Community	Version	1.2
Process Owner	Governance Lead CEO COO	Date of Issue	May 2023
Approved by	Chief Executive Officer	Review	May 2025


Modification History

Version	Date	Author	Approved by	Description of change
1.0	3/2020	Natashia Telfer	Employsure	New service, new framework
1.1	8/2021	Tahla Small	CEO	Review of schedule 8 process
1.2	5/2023	N.Telfer	CEO	Separation of policies and added link to SIL Emergency management

In conjunction with:

All National Policies and Frameworks

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NCC Induction to SIL Property

All employees commencing in a SIL property are required to go through a House Induction checklist prior to being authorised to work independently within the property.

Check list can be found here:

https://nationalhealthcareservices.sharepoint.com/:w:/g/EdgaNs_UODxQuEl-rC6elM8BisS6CkDqa2ERla0rxOFiCQ?e=qRF0RG

SIL Property Rules

Any SIL property an employee attends are required to implement “House Rules”. All persons entering the SIL property, under the NDIS are required to conduct themselves accordingly in line with the “House Rules”. Failure to do so, or breach of the rules can result in your shift being terminated early and disciplinary action may follow. Property House Rules may include, but are not limited to:

- Expectation and responsibilities of each party
- Guest visiting hours
- Provision of food
- Provision of laundry services
- Cooking / Cleaning responsibilities
- Shopping / Menu Planning
- TV / computer allocation time frames
- Storage of personal effects
- Other details as decided by the client/participants and the SIL Provider

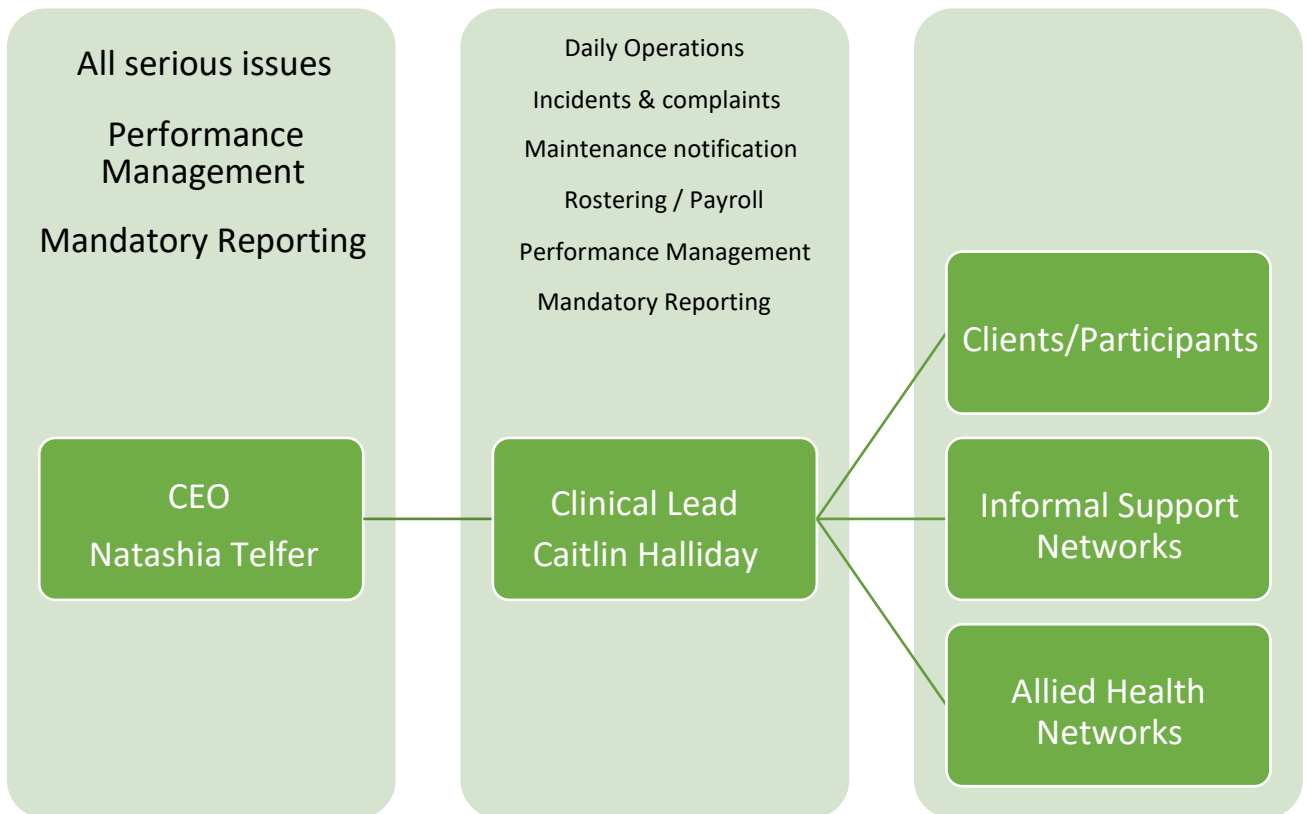
“Alex House Rules” - [Alex House Rules DRAFT v.4.docx](#)

It is the responsibility of National Community Care as a registered NDIS provider and identified SIL Provider to liaise with the client/participants to compile a *House Rules Book* and provide these to all entering persons and the SDA provider under our Heads of Agreement. This clause is provided for the purpose of alerting the client/participant to their right to be involved in the creation of the rules pertaining to the day-to-day running of the house and the process must be completed within three (3) months of the client/participant’s initial entry into the house. Amendments can be made as required and will be reviewed 6 monthly with client/participants and families.

SDA Rights and Responsibilities - [DHS Client Rights and Responsibilities Policy ACT.pdf](#)



NCC SIL Participants and Family Lines of Reporting



NCC SIL Property Roster

Rosters will be made available within the Property before each Monday of the new weekly roster.

Late to Shift

Please note, if you are running late to a shift at a SIL property, you are required to notify NCC as soon as possible. The previous employee will be required to stay until your arrival and timesheets should be reflective of this and managed by the RN on shift, approved by the Clinical Coordinator.

Do NOT send a text message, this will be considered a formal warning.

Request to swap assigned shift

Employees will be required to complete the request form available through your employee login under the documents tab. All shift swaps must be approved prior to the day of the shift. The swap must be likeness for likeness for example – if you are the designated driver for your original shift, you must ensure the person you are swapping with is able to drive to fulfill the required duties. Other examples could include PEG, trachy, or other specialised training requirements as well as client preference. In the event your shift can not be approved to be swapped, you will have the option to fulfill your rostered obligations OR reject the shift and National will look to replace the shift with a suitable employee or engage our sister company NNA for coverage.



SIL Handover Requirements

A handover is the transfer of responsibility and accountability for some or all aspects of care for a person or group of people, on a temporary or permanent basis. It entails appropriately transferring information to help deliver safe care. The information transferred depends on the clinical circumstances, and outstanding tasks which may include the:

- clinical condition
- status of investigations and treatments
- likely clinical course
- possible problems and consideration of strategies should problems arise
- responsibility for ongoing care
- outstanding tasks that require attention

Handover generally occurs toward the end of a shift with the purpose of relaying vital and/or outstanding information/tasks pertaining to client care needs. Carers are often required to provide their handover to the team leader who will relay this to the oncoming shift team leader. This process allows oncoming shift to prioritise outstanding tasks to ensure client needs can be met. Handover may also include handing over of physical items such as locker keys, facility keys, facility phones and pagers etc. All items are to be returned prior to leaving the shift. In the event, an employee removes property from the location, the employee will be required to return it immediately and unpaid.

SIL Property Handover Procedure

- RNs to utilise the daily task check list each shift to record all relevant information.
- Handover to occur within the 15-minute shift cross over and an RN drug check to be completed between the 2 RNs exchanging shifts.
- Handover should include client/participant handover, RN House Keys and House Phone.
- Handover should be comprehensive, factual and sequential in outstanding tasks for the on-coming shift to continue with.
- RN to ensure ANs have completed reflective entries for each of their designated client/participants.
- At handover period: a minimum of one carer from the current shift is required to stay on the floor to maintain airway monitoring. This is to rotate at the discretion of the CC and/or RN on shift and allows all on-coming staff to be present for handover.
- Sight check of all client/participants and security check of premises. Night shift to ensure all windows and doors are locked. (with exception of client/participant windows at their discretion)
- Sunday Night RN to scan in all completed charts/documentation into client/participant files accordingly.

SIL Property: RN SCHEDULE 8 Drug Check Procedure

- To occur with registered nursing staff only. Carers must not engage in checks and/or administration of Scheduled 8 drugs.



- THREE daily S8 checks will occur at the handover period between RN handing over and RN coming on. (0700-0715 / 1445-1500 / 2230-2245hrs)
- All S8 Drugs are to be counted by both RNs and co-signed in the count book.
- S8 Drug book will be kept in the office.
- When 2 RNs are present at any of the scheduled drug check time frames, this is best practice to proceed with.
- Any PRN S8 drugs required to be administered while on shift, the RN is to contact NCC to arrange an external RN to attend. In the event the drug is time sensitive, the Service Relations Manager can authorise face time drug check to ensure a timely outcome for the client/participant. The Service Relations Manager will be required to attend to co-sign the administration
- All S8 medications will be stored separately in a locked container behind a locked cabinet.
- All medication counts/checks to be documented correctly in RED pen.



SIL Property: AN Documentation

- Employee must document daily reflections for their assigned client/participant. This is to include a brief overview of the client/participants day, and general wellbeing and any social/emotional engagement that took place within the shift.
- Completing any formal documentation as required by the RN or CC. This may include but is not limited to bowel charts, food and fluid intake charts, observations, incident/accident reports
- Carers should NOT under any circumstances relay or handover any concerns to guests within the home. All concerns/feedback or questions should be directed to the RN on shift or CC if on site.
- All information to also be verbally handed over to the RN on shift prior to conclusion of shift.

SIL Property: RN / CC Documentation

- Documentation in the individual clinical record is dated, signed (with designation), shows the time of each intervention and is legible.
- Documentation is a comprehensive, factual and sequential record of the client/participant's clinical care and overall wellbeing.
- Utilise relevant service platform system for individual clinical records as required.
- Files to be audited regularly to ensure AN documentation is satisfactory.
- Request GP or other service providers document accordingly in client/participants notes section of care plans.
- Action concerns appropriately.
- Individual care plans to be kept up to date and in a tidy manner
- Upline accordingly RN > Clinical Coordinator: Caitlin Halliday > National Community Care: Natasha Telfer
- Maintain All Risk Register
- Understand and implement compulsory reporting as required.

[SIL WHS - Emergency Management - SIL Properties Framework.docx](#)



Bunbury Street Scanning Procedure

SCOPE

Relevant to all Registered Nurses of NCC

PURPOSE

Ensure appropriate, sequential scanning and uploading of all participant documentation from hard copy to electronic copy.

PROCEDURE

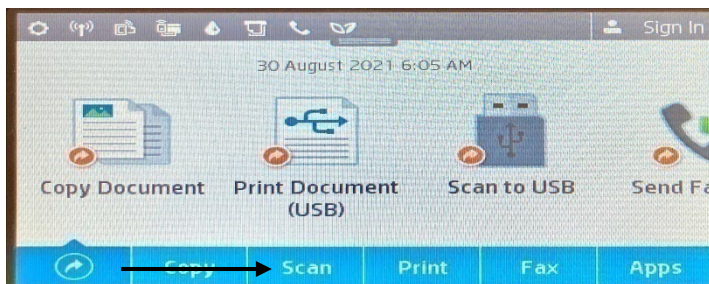
All participant non scanned documentation is filed in the office, within a locked filing cabinet in individual white folders. Scanning and uploading of participant documentation is to be completed every Sunday on night shift.

Process to scan documents to computer

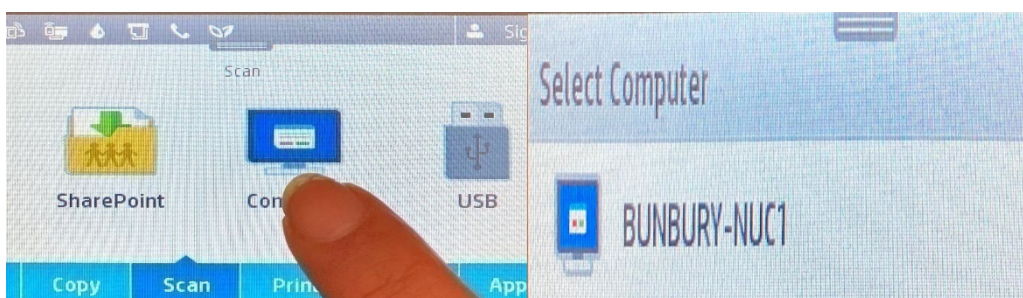
Step 1 - Load documents for scanning into top tray of printer.

Step 2 - Login to computer profile 'Bunbury' using password.

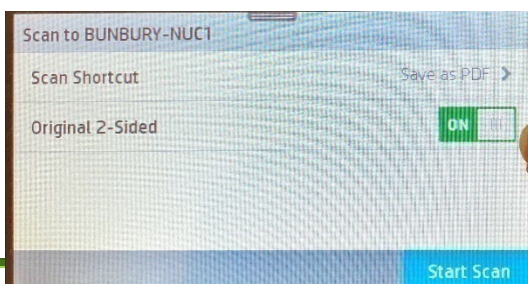
Step 3 – Go to printer home screen and click on the scan tab.



Step 4 – Click computer and select BUNBURY-NUC1



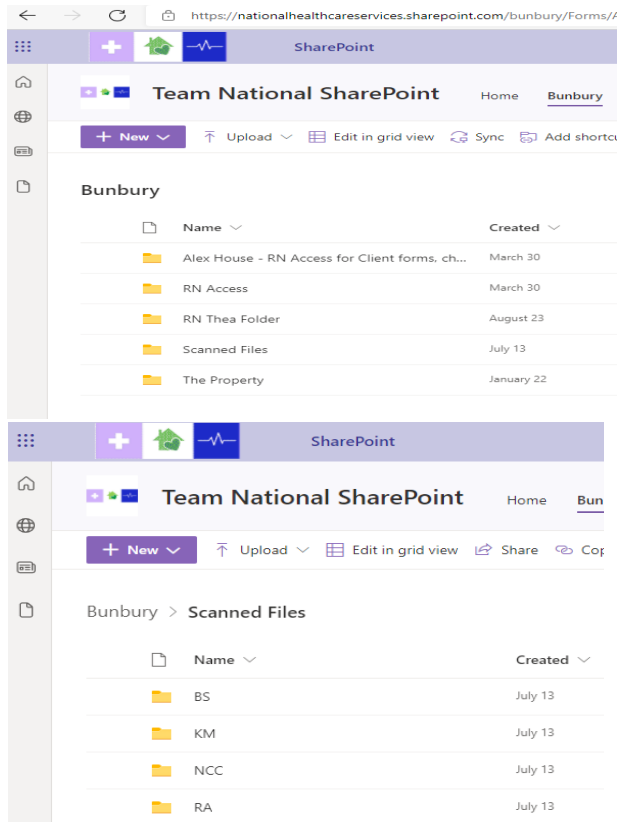
Step 5 – Select single- or double-sided scan. The scanned documents can be found in file explorer under recent files.





Step 6 - Once the documents have loaded, ensure to check that they have scanned correctly. Then you need to type in the file name. NCC use the following: yyyy-mm-dd and File name (Progress Notes, Suction, PEG, Fluid balance, EN regime, Incident forms, Historical care plan etc.)

Step 7 - Once you have added the yyyy-mm-dd /file name/ participant initials RA/BS/KM etc, check that the file type is saved as PDF. You will then open up sharepoint – Bunbury and select the participant which the documents are related too.





NCC SIL Participant Finances Policy

POLICY STATEMENT

National Community Care is committed to safeguarding participant money and property, ensuring that it is managed in a manner that protects the security of their money & property while facilitating each participant to use as they wish.

SCOPE

All National employees and associates.

POLICY

In circumstances where the participant or legal nominated representative has provided National Community Care with consent to access participants money or property, it is to be secured and handled in a clear and open manner.

SIL Properties

All cash, debt cards, gift cards, cheque books that are solely managed by National are to be secured either within the lockable cash tin on site, with the participants/ representative consent and authorization for such practice. Participant/representative will have access to their personal property. Within a SIL property cash, debt cards, gift cards and cheque books are secured onsite in a locked box within a filing cabinet, each shift the RNs conduct a check on all the items within the box, during handover, only the Registered Nurse, participant and Clinical Lead have access to this lock box. All participant cash managed by National is documented within a cash receipt book for recording keeping purposes within the property, any withdrawal or transaction is recorded within this book and receipts kept for proof of purchase. National Community Care has a responsibility to mandatory reporting requirements if it is alleged or proven true of financial abuse or if locking of participant belongs becomes a restrictive practice.

NCC Covered Expenses within SIL Property

- National will provide the property with grocery gift cards.
- The value will be recorded by the RN in the expenditures logbook and issued by the RN to the attending carer who will access Woolworths at Cooleman Court to purchase any shared expenses. This may be inclusive of cleaning products, toilet paper, staff milk, perishable items for the participants etc.
- All items must be returned to the property with the card and receipt of purchase.
- Quarterly, all dockets will be collected for invoicing all participant related expenses onto the participants. The Clinical Lead and/or community Team Leader are responsible for this process and all invoice templates are saved within the Bunbury SharePoint drive.
- These items are often shared between 2 and up to 5 parties. The invoice includes the item and date of purchase, the percentage the participant is responsible for and the total of that item.
- The invoice is then issued to the participants and/or their guardians/EPOA for payment.



- All copies of receipts are available for participants and families for view at any time upon request. (See **Consumable Expenditures**)

SIL Property Expenditures and Invoicing Policy

PURPOSE

Provide Community employees with an understanding of the process of purchasing items on behalf of a participant, and the documentation/reporting requirements.

SCOPE

Senior registered nurses & Clinical Lead– who gain consent to purchase items on behalf of client/participant.

PROCEDURE

National or its employees are unable to provide participants or their representatives with any form of financial advice or information other than that which would reasonably be required under the participants NDIS plan.

- National can support participants to access and spend their own money as they determine.
- National will support the participant with everyday purchases where they have elected National to manage their money.
- Consent from the participant / representative must be given to the clinical lead and or the senior registered nurse who will be purchasing an item on behalf of the participant.
- Clear documentation by both RNs is required within the clinical progress notes. A receipt is to be obtained after the transaction is completed, RN is to photocopy the receipt for National records and provide original to participant and or representative as proof of purchase.
- Where possible National would prefer the method of purchase was cashless due to the inherent risks associated, however National understand that this is not always possible, if cash is used it is to be documented within the cash handling record book.
- National Community Care also offer an alternative to cash, debt cards and gift cards. The RN can be requested to purchase consumables on behalf of the client/participant, and they will be invoiced by National at the end of the quarter payable via direct debt.
- All receipts of consumables purchased are retained by National and copied for each participant are placed within the participants financial record folder YTD.
- Quarterly, all dockets will be collected for invoicing all participant related expenses onto the participants. The Clinical Lead and/or community Team Leader are responsible for this process and all invoice templates are saved within the Bunbury SharePoint drive.
- These items are often shared between 2 and up to 5 parties. The invoice includes the item and date of purchase, the percentage the participant is responsible for and the total of that item.
- The invoice is then issued to the participants and/or their guardians/EPOA for payment.
- All copies of receipts are available for participants and families for view at any time upon request.



- National Community Care have a mandatory regulatory obligation to report all alleged and confirmed incidents involving theft, abuse of client/participant property or finances to ACT Policing and relevant agencies – Refer to mandatory reporting policy.

REFERENCES

<https://www.ndiscommission.gov.au/providers/incident-management-and-reportable-incidents>

SIL Property Individual Participant Expenditure & Consumable Procedure

PURPOSE

Provide Community employees with an understanding of the process of purchasing items on behalf of a participant, and the documentation/reporting requirements.

SCOPE

Senior registered nurses & clinical coordinator – who gain consent to purchase items on behalf of client/participant.

PROCEDURE

National or its employees are unable to provide participants or their representatives with any form of financial advice or information other than that which would reasonably be required under the participants NDIS plan.

SDA Expenditures

SDA invoice NCC directly through the online platform 'property me' individual link - <https://my.propertyme.com/portfolio?code=DISHOKGM>

Internet, electricity, and water are invoiced through this portal to NCC to divide by all participants and NCC evenly (by 5 parties = 20%).

Consumable Expenditures

All private consumable expenditures are invoiced quarterly, which is recorded on our online register.

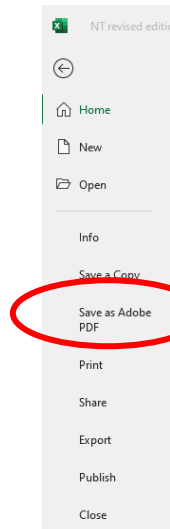
Shared point – Bunbury > House Manager – Alex House > Consumable invoicing > Participant invoices

- All copies of receipts and hard copy invoices can be accessible upon request by the participant and representative at any time.

NATIONAL COMMUNITY CARE 2023-2024 POLICIES, PROCEDURES & PROCESSES



- In the template the first tab is the DATA tab:
- Enter the date range of the invoice and the following chronological invoice number. This data will populate across all the participant invoices.
- The following tabs in the excel belong to each of the participants.
- Here you add in the purchase details: item, date of purchase, gross total, contribution percentage and the owing amount per item.
- Once the invoice period items are uploaded, go to File, Save as Adobe PDF. Select the single participant tab you wish to generate and follow the prompts to save the document. Save all invoices to SharePoint with title: *YYYY-MM-DD INVOICENUMBER*



- Once the invoice has been generated select the invoice and email to the NOK or participant responsible for financial management.
- The PDF invoice should also be saved in the consumables invoicing under the Bunbury Drive in SharePoint for historical referencing.

ENTER DATA HERE TO POPULATE INVOICES CORRECTLY

Date Range of Invoice: 1/01/2022-1/06/2022

Invoice Number: 18

SAVE AS PDF PER PARTICIPANT TO GENERATE INVOICE PDF

National Community Care Pty Ltd
3/85 Hoskins Street, Mitchell 2911 ACT
ABN 70 605 349 157 | ACN 605 349 157

Keely Marks
51 Bunbury Street, Stirling ACT

Invoice Number: **KMCONS-18**
Invoice Period: 1/01/2022-1/06/2022
Total Due: \$ **9.90**

Item	Date of purchase	Gross Total	Contribution Percentage	Owing Total
Dishwashing tablets 48 pack	01/01/2022	30.00	33%	\$ 9.90
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