



Saint John of God Community Services Limited

Values in Practice

03

This policy remains in force until such time as it is reviewed and approved by the Board of Community Services CLG.

Policy on Values in Practice

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Introduction

This revised edition of the policy document Values in Practice (2009) encompasses all policies that relate to the provision of services and to people with intellectual disability by Saint John of God Community Services Limited.

The Saint John of God Values of Hospitality Compassion, Respect, Justice and Excellence underpin all activities related to service provision and individual support. The policies promote the philosophy of empowerment, capacity building and the realisation of individual rights and place each individual in the context of their family life, their natural support network and their community.

Values in Practice supports the Vision of the Hospitaller Order of Saint John of God and the key objectives as outlined in the Corporate Strategic Plan 2008-2013. It also takes account of existing national legislation and publications including the Disability Act 2005, the Education of Persons with Special Needs Act 2002, HIQA Standards for Residential Services for People with Disabilities (2009) the Convention on the Rights of People with Disabilities (2006), the Mental Capacity Bill (2008) and Quality Measures (2005).

As with all policies, their implementation is paramount and the dissemination, education of staff and subsequent validation through internal audit, external accreditation by CQL (Council on Quality and Leadership) and HIQA (Health Information and Quality Authority) is vital.

The Board of Saint John of God Community Services Limited has approved this suite of policies and consequently their application across all Intellectual Disability services is a requirement. It is intended that these policies will be reviewed at least every 2 years to reflect audit and accreditation findings, changes in legislation and national developments.

Andy Heffernan
Chief Executive
December 2010

Our Vision Statement

Driven by hospitality, we will be the leaders in the development and delivery of specialist services to people in the areas of Intellectual Disability, Mental Health and Elderly Care (Corporate Strategic Plan, Hospitaller Order of Saint John of God, 2007).

Our Mission Statement

Springing from the Christian values and holistic approach advocated and practiced by our founder, Saint John of God Community Services Limited is dedicated to the provision of social, education, welfare and health services. It has a mission to ensure that persons availing of its services receive the highest quality care, education, training, treatment or support in accordance to their needs.

Our Philosophy and Guiding Principles

The philosophy of Saint John of God Community Services Limited is that people are the creation of God, with intrinsic value and inherent dignity. This philosophy is based on the beliefs and values of the Saint John of God Community Services Limited founder, Saint John of God. The Guiding Principles are as follows:

- The focus of attention is the person who is served.
- The rights of the person must be upheld and defended.
- Each person has the right to be involved in their own care and treatment and to be kept informed of matters concerning them at all times.
- Saint John of God Community Services Limited respects the freedom of conscience of every person and acts without racial, social, financial or religious discrimination.

Our Values which underpin service provision

Person-centred services represent the context within which services are provided. Person-centred values incorporate the values of human rights. These values respect the inherent **dignity and autonomy** of each individual and their **rights** to self determination, choice, relationships, equality and engagement in all aspects of life in the community.

In accordance with the philosophy and guiding principles of our founder Saint John of God, we practice the values of Hospitality, Compassion, Respect, and Justice in our pursuit of Excellence.

We practice **Hospitality** by spending time with each person, learning and listening to their vision of where they are and where they want to be in the world, identifying and anticipating their needs and supporting them to belong to and actively participate in and contribute to their community.

We practice **Compassion** by recognising the gifts that each person brings with them, understanding their experiences and where they are at, and by individualising supports to fit their needs and wishes at any given time.

We show **Respect** by valuing the person for who they are, enhancing their self-esteem by providing them with learning opportunities to increase their competencies, being sensitive to their privacy and dignity, providing positive approaches and solutions to problems they may be experiencing, and respecting their desire for confidentiality.

We practice **Justice** by creating a balanced and fair relationship with each individual, affording them with the right to be heard, to be informed and to give consent. We ensure due process in the facilitation of individual rights. We ensure that individuals' concerns are heard and provide the mechanisms for complaints to be processed. We facilitate individuals to take reasonable, informed risk, in exercising their right to self-determination.

We achieve **Excellence**, by providing the optimum standard of care and support, within the scope of available resources. We play a strong advocacy role in seeking the necessary resources to continuously and strategically improve service delivery. We engage external accreditation bodies to ensure the delivery of high standard person-led services and supports.

We engage all stakeholders in the planning the delivery, development and change management of services.

We promote creativity and innovation to enhance quality in all aspects of our work.

The Aim of Saint John of God Community Services Limited

The aim of Saint John of God Community Services Limited is to enable and empower individuals with intellectual disability to access, in accordance with their wishes and abilities, the spiritual, social, educational, training and employment opportunities that are available to all citizens.

To this end we endeavour to provide each individual with the necessary support and opportunities to develop attitudes, knowledge and skills that will enable them to achieve a quality of life of his/her personal choice. Each individual is provided with the opportunity to define their desired quality of life using Personal Outcome Measures.

Saint John of God Community Services Limited achieves its mission through the following strategies:

Person-centred Approach

A person-centred approach through person-centred planning is used to assist in the identification of each individual's desired outcomes and supports. The process focuses on the unique identity of each individual, on their life experiences, where they work, live and socialise, belong to or connect with, and on how they wish their life to be. Support to achieve identified outcomes is provided by a network of people from within the individual's social circle and professional support group, and co-ordinated by the support service. Each individual's communication requirements are supported to assist understanding, decision-making, participation and inclusion.

Community Focus

It is recognised that each individual is part of the larger community. Individuals are encouraged to achieve their personal outcomes supported by a natural network of trusting friends and family. Their natural network is recognised, nurtured and developed, recognising that it is these networks which provide individuals with a sense of belonging and confidence to participate in activities of their choice in the community.

Strategic Focus

Strategic thinking, planning and resource allocation is directed by knowledge, information and data from people served, employees, and community. This involves all elements of the service structures working together towards the common aim of supporting outcomes. The information and data is used to improve services and supports from the individual and organisational perspectives and ensures that quality improvement is an ongoing and continuous process.

Accountability Focus

Policies, procedures and practices are in place to direct good governance and commitment in all areas of service provision.

Partnership Focus

Partnerships and strategic alliances are developed with community organisations to enable individuals to access housing, education, employment, and social and leisure activities that are available to all citizens within their community.

Partnerships are developed with voluntary and statutory agencies to promote research in best practice and to advocate for the best use of resources in the promotion of person-centred services.

1. Purpose and Function

Policy Statement

Each Service has a written statement of purpose and function that accurately describes the range of services and supports that is provided and the manner in which they are provided.

Indicators

- 1.1** The statement of purpose and function relates to each area of service provision and sets out:
- The aims, objectives and mission of the service;
 - Location;
 - The number of individuals and the level of need which can be supported;
 - The range of supports available;
 - Day to day operation of the service;
 - The key policies which inform practice.
- 1.2** The statement listing the key policies which are in place is provided in an accessible format to the individual and their family/advocate.
- 1.3** The day-to-day functioning of the service is reflected in the statement of purpose and function.

2. Person-centred Approach

Policy Statement

The individuality and uniqueness of each person availing of services and supports is respected, valued and supported through a person-centred planning process.

Indicators

- 2.1** A person-centred planning process defines what is important to the individual in their life, determines the supports they require to achieve maximum independence and integration, and outlines the action required to achieve personal outcomes and meet priority needs.
- 2.2** The Personal Plan is an integrated plan which takes account of each individual's immediate and long term wishes and assessed needs, developmental changes, transition planning and may include plans relating to

personal finance, intimate care, positive behaviour support, health and safety and risk management, as appropriate.

- 2.3** Assessments are updated as required and any new information pertaining to the achievement of outcomes or causing a reprioritisation of actions is considered in the review process.
- 2.4** Each individual is listened to in a respectful manner and responded to in a meaningful way, reflecting concern for their opinions, feelings, abilities preferences and support for their stated choice of lifestyle.
- 2.5** Support is provided for self advocacy or the support of an advocate to assist individuals with decision-making.
- 2.6** Each individual has a recognised circle of support to include professional supports, family, friends, peers, and community members, as required.
- 2.7** Where an individual is unable to participate in the planning process, their needs and wishes are ascertained, recorded and planned for in consultation with their professional supports and circle of support.
- 2.8** The individual planning process for a young person is carried out in partnership with the young person and their family/advocate.
- 2.9** The individual has an assigned keyworker who has responsibility for the co-ordination of the implementation of their person-centred plan in a manner that ensures maximum participation of the individual.
- 2.10** The individual's plan is reviewed at least monthly by the keyworker and annually by the team.
- 2.11** The individual's plan is modified as required to reflect change of need or personal outcomes in consultation with the individual and their circle of support. Parents/guardians are involved in the review process for young persons.
- 2.12** Key Professionals participate in the planning process as required, or as requested by the individual. The findings and recommendations of specialist professionals are included in the individual's/young person's plan.
- 2.13** Each individual is supported to be actively involved in choosing their personal goals.
- 2.14** Individuals have the support they need to experience a variety of options to make choices about their future.
- 2.15** Individuals have the support, training and experiences that will facilitate the realisation of their personal goals.

- 2.16** All activities made available to the individual promote a positive self-image and a fostering of abilities, are age appropriate and culturally normative.
- 2.17** Each individual is enabled to access environments used and valued by all.
- 2.18** Communication aids are available to assist those who require them with any aspect of their life.
- 2.19** Individuals availing of residential services are facilitated to:
- Have the opportunity to choose where and with whom to live;
 - Pursue active citizenship;
 - Have a bedroom to him/herself unless he/she has expressed a wish to share;
 - Participate in decisions regarding their residence, to include staff selection, new admissions and the use of their residence for administrative functions;
 - State their preferences regarding the routines of shared living;
 - Take control of and manage their finances in accordance with policy;
 - Have full access to information with regard to their entitlements and benefits;
 - Have access to news and information in an accessible format through a variety of media;
 - Exercise their choice in relation to occasions of personal, cultural, religious and ethnic significance;
 - Pursue individual activities;
 - Be involved in all aspects of their diet, nutrition and meal-making;
 - Plan for holidays and short breaks;
 - Entertain visitors;
 - Celebrate special occasions;
 - Keep pets, taking into account safety, hygiene and the wishes of other individuals;
 - Have opportunities for lifelong learning, training and employment and leisure according to their individual needs and outcomes.

3. Connectedness, Supporting Daily Living and Lifelong Learning in the Community

Policy Statement

Each individual is informed, supported and facilitated to connect with and live in their community in a way that meets their choices, preferences and desires.

Indicators

- 3.1** Each individual has access to information about their community through a variety of media.
- 3.2** Each individual learns about the range of living options available.
- 3.3** Each individual is assisted to make decisions with regard to their living arrangements.
- 3.4** Each individual's preferences are known, planned for and facilitated.
- 3.5** Each individual's preferences for work, the type of job and location, are known and facilitated through the provision of opportunities to sample the employment market and make their decisions.
- 3.6** Each individual who chooses not to work is encouraged and facilitated to engage in alternative, meaningful and productive activities in their community.
- 3.7** Each individual is encouraged to pursue training and/or education to enhance their competencies and confidence in accessing their environment to their level of satisfaction.
- 3.8** Opportunities are afforded to each individual to access occupational, educational, leisure, and social activities in their community, which are person-centred, appropriate and meaningful.
- 3.9** Each individual is provided with opportunities for meaningful interaction with members of the community, supported to enhance their personal relationships, expand social roles and deepen their involvement in community activities to the extent they desire.
- 3.10** Each individual is provided with opportunities, information, and skill development to assist them to play a variety of active social roles of their choice in their community.
- 3.11** Each individual is supported to access generic community resources for routine health, leisure, and daily living activities.

- 3.12 Each individual is encouraged to avail of opportunities to travel within and outside the country as they desire.
- 3.13 Services are connected to and understand the needs of the community.

4. Rights Protection and Promotion

Policy Statement

Individuals' rights as equal citizens, as enshrined in international human rights instruments and Irish Law, are respected, affirmed, promoted and protected.

Indicators

- 4.1 Each individual is supported to know, understand and exercise their rights, and to understand the consequences and responsibilities that result from the choices they make.
- 4.2 Staff are trained to understand the meaning of individual rights and responsibilities, informed consent and due process and apply the principles of a Human Rights Based Approach in all their interactions with individuals in accordance with Saint John of God Community Services Limited Policy on Rights Protection and Promotion (2010).
- 4.3 Staff are supported to advocate for the rights of those who cannot advocate for themselves.
- 4.4 Each individual is enabled and facilitated to avail of advocacy services, both internal and external, when requested or required.
- 4.5 Each individual is encouraged and supported to maintain and develop a support network external to the service, including family, friends, advocate and others as they may choose, as a member of their circle of support. Parents/guardians are regarded as principal advocates for young people.
- 4.6 Each individual's wishes and choices relating to their current circumstances and future plans are respected and implemented. Young people and their parents/guardians are actively consulted about decisions that affect their lives.
- 4.7 Each individual is supported to be actively involved in all decisions which affect their lives and to build on their capacity to consent and to gain the competencies they require to realize their rights.
- 4.8 Each individual is presumed to have the capacity to make informed decisions. Where an individual's capacity is in doubt, an assessment of capacity by a suitable qualified professional is carried out.

- 4.9** A functional approach to assessing a person's capacity to making choices is adopted where capacity is determined following an *issue-specific* and *time-specific* assessment of the person's ability to make a particular decision at the time it is to be made.
- 4.10** Informed consent is obtained from an individual, where possible, prior to any medical treatment or intervention, participation in research projects or the provision of personalised information. To obtain informed consent the individual must:
- Understand and believe what the treatment/intervention/issue is;
 - Understand why the treatment is proposed;
 - Understand the nature of the proposed treatment;
 - Understand and believe the benefits and risks of having or not having the treatment;
 - Understand other treatment options available;
 - Balance the information and arrive at a decision.
- 4.11** Where an individual is deemed to lack the capacity to give or withhold consent, account is taken of his/her past wishes, needs and preferences, in consultation with their circle of support.
- 4.12** In the case of a young person, informed consent from the parents/guardians is obtained with regard to medical treatment, participation in research, use of photographic images for promotional or other purposes and the provision of personalised information for official purposes.
- 4.13** Each individual is supported to access the complaints procedure. Young people and their families/guardian are supported in expressing concerns or making a complaint in accordance with policy.
- 4.14** Staff develop alternative responses to individual's complaints with a view to reinstating individual rights. When all measures are exhausted to provide an acceptable response to the individual, referral to the Rights Review Committee is supported.
- 4.15** Rights are not limited without due process. Due process ensures that:
- The rights restricted have been identified;
 - Due consideration has been given to the reasons for the restrictions;
 - The restriction is time limited;

- Consent of the individual/advocate has been obtained, where possible;
 - The restriction has been authorised;
 - A plan is in place to reinstate the restricted right;
 - The restricted right is monitored regularly to ensure the need for continuation;
 - All staff are trained on the restriction and related support prior to the implementation of the restriction;
 - The extent of due process has matched the importance of the right;
 - The review mechanism adequately protects the individual.
- 4.16** A Rights Review Committee is appointed by the Director of Service to ensure the maximisation of rights, that right's restrictions are temporary in nature and that they occur in very specifically defined situations.
- 4.17** The function of the Rights Review Committee is to:
- Consider if due process was followed in imposing a rights restriction on an individual;
 - Review the type of restriction, assuring maximisation of rights;
 - Ensure the temporary nature of restrictions and that they occur in specifically defined situations;
 - Ensure informed consent was obtained, where possible;
 - Ensure that a review mechanism is in place;
 - Make recommendations which promote and protect the rights of the individual.
- 4.18** A Rights Review Committee reviews:
- All restrictive practices prescribed for the purpose of managing challenging behaviour;
 - All restrictions imposed by the prescribing of psychotropic medication to control behaviour;
 - All cases where clinical interventions for medical purposes may restrict an individual's rights are referred to the Rights Review committee;
 - Informal restrictive practices which come to its attention.

- 4.19** A referral process is in place to facilitate any individual who wishes to represent or have represented a grievance with regard to rights restrictions/limitations.
- 4.20** Following receipt of a referral, arrangements are made to meet the individual and relevant others to gather the information required to inform the process.
- 4.21** The Rights Review Committee reviews referrals on a monthly basis.
- 4.22** Based on the review, the Rights Review Committee may recommend one of the following actions:
- Endorsement of implementation of the strategy;
 - Endorsement of implementation of the strategy contingent upon specified modifications by the relevant team;
 - Recommendation for total review of the strategy.
- 4.23** The Rights Review Committee undertakes to process the recommendations of the Committee directly to the individual and to the Director of Service.

5. Friendships, Personal Relationships and Social Networks

Policy Statement

Each individual is supported to define and fulfil their need for friendships and personal relationships in accordance with their needs and wishes.

Indicators

- 5.1** Each Individual is encouraged and supported to develop, maintain and renew contact and relationships with family and friends.
- 5.2** Each individual is encouraged to recognise and celebrate significant events in the lives of family and friends. Each individual is supported in forming and maintaining friendships with peers, co-workers and neighbours.
- 5.3** Each individual in conjunction with the people concerned determine the extent and frequency of contact with their natural support network.
- 5.4** Personal development programmes focus on developing the individual's capacity to understand and develop friendship. Support is provided to assist each individual in making choices, and in arranging and accessing opportunities for enhancing their friendships.

- 5.5** Opportunities for children to participate in inclusive environments is encouraged and supported.
- 5.6** Each individual is supported to develop an intimate relationship in accordance with their needs and wishes.
- 5.7** Education is provided so that each individual is fully informed about the nature of close relationships and intimacy.
- 5.8** Each individual is supported to understand their rights and the rights of others as they relate to intimate relationships.
- 5.9** Each individual is supported to engage in safe, healthy and legal expressions of their sexuality, to understand their behaviour in the context of others, to understand consenting relationships and to be able to protect themselves.
- 5.10** Individuals' links with volunteers are supported in accordance with their needs and wishes and in accordance with Saint John of God Community Services Limited policy.

6. Personal information

Policy Statement

Each individual is supported by appropriate record keeping. Individuals are supported to understand how their personal information is managed, have access to personal information and are involved in decisions with regard to the use of, and access to, that information.

Indicators

- 6.1** All reasonable action necessary is taken to maintain the confidentiality, integrity and security of information in relation to each individual.
- 6.2** All staff members have responsibility for maintaining the confidentiality of individuals and information relating to them, their care, support and treatment in accordance with Saint John of God Community Services Limited Policy.
- 6.3** Information is shared with staff members who have a direct responsibility for the provision of support and services to the individual. This information is shared with the consent of each individual.
- 6.4** Volunteers and students on summer job schemes are not permitted access to files.

- 6.5 Agency staff and professional trainees on placement as part of a recognised course are allowed access to information on a 'need to know' basis.
- 6.6 Information will only be shared with people outside of those with responsibility for direct support on a 'need to know basis' and in the best interest of the individual.
- 6.7 Individuals and their families/advocates know that their personal information is handled appropriately and that their personal confidences are respected.
- 6.8 The right to confidentiality may be withdrawn in circumstances where there is alleged incidence of abuse or where there is serious risk of significant harm.
- 6.9 Access to records for the purpose of research must be endorsed by the Order's Provincial Ethics Committee, and is subject to an individual's confidentiality and consent.
- 6.10 An integrated set of security measures is in place to protect the safety and integrity of all electronic data in its information systems.

6.11 Consent

- 6.11.1 The individual is provided with an information protocol at initial assessment or prior to their Personal Planning meeting. The protocol identifies:
 - a. The type of information collected and stored;
 - b. How this information is used;
 - c. Who would use this information to support the individual?
 - d. How information stored on record is shared with each individual;
 - e. How information might be shared with other organisations and under what circumstances.
- 6.11.2 The individual/advocate confirms their understanding of the protocol by signing the information sharing form.
- 6.11.3 The individual/advocate confirms their agreement to sharing of their information by signing the consent form.
- 6.11.4 There is an opportunity for the individual/advocate to indicate particular confidentiality issues which they wish the Service to take into account. Where an individual seeks to restrict consent in this way, the implications for their care/support is discussed and noted on file.
- 6.11.5 Where consent is granted, staff must respect the individual's confidentiality and only provide information on a need to know basis.

6.11.6 The individual may wish to change their mind about giving or withholding consent at a later date. In such circumstances, their revised views are noted using the consent form and filed accordingly.

6.12 Restricted or withheld consent

6.12.1 Where an individual/advocate has refused consent or has indicated certain restrictions which they wish to be placed on information sharing, this should be respected where possible. The individual is clearly informed of the implications of withholding or restriction.

6.12.2 In situations where individual's wishes for non-disclosure of information cannot be respected for legal reasons or because of concerns related to professional ethics, the reasons are explained to them.

6.13 Establishing capacity to obtain consent

6.13.1 The capacity to give consent can be assessed by considering whether the person:

- a. Has the capacity to make this particular decision;
- b. Has the capacity to understand and retain the information relevant to the decision;
- c. Is able to understand the reasonably foreseeable consequences of their decision;
- d. Has the capacity to communicate the decision he or she has come to.

6.13.2 An advocate/family member/staff represents individuals that do not have the capacity to give informed consent.

6.13.3 Every effort is made to help an individual understand the specific situation around which their consent is required using all means of communication available.

6.14 Recording Information Sharing in Service-User Records

A consent form is signed by each individual/advocate outlining his/her agreement to the sharing of information.

6.15 Sharing of information at meetings

- 6.15.1 Personal details of individuals are not shared at meetings attended by personnel who are not directly involved with the individual unless agreed with the individual.
- 6.15.2 Personal details with regard to individual planning are shared with staff across service areas and the individual's circle of support, as appropriate.

6.16 Children and Families

- 6.16.1 Young people are given access to information about themselves and services available in accordance with their age and level of experience.
- 6.16.2 Young people have access to information about their rights under the United Nations Convention on the Rights of the Child and the Freedom of Information Act, 1997.
- 6.16.3 Young people are given information on their right to access their records and information recorded about them, and they are guided in how to exercise this right.
- 6.16.4 In the case of young people/children who have not yet reached the age at which they may legally give consent, information about the records system will be given to the child's parents/guardians so that they may give consent on the child's behalf.

7. Privacy and Dignity

Policy Statement

Each individual's right to privacy and dignity is respected and promoted. Individuals are protected from unwanted intrusions in their life.

Indicators

- 7.1 The privacy and dignity of each individual is respected by staff members by the manner in which they relate to and honour the uniqueness of each individual.
- 7.2 An individual's preference as to personal appearance and dress is respected.
- 7.3 Each individual has space and opportunity to speak in private with others in person or on the telephone.

- 7.4** An individual's privacy, when being supported in their personal and intimate care, is sensitively respected.
- 7.5** In shared situations, an individual's desire for some personal time/space to themselves is facilitated in creative ways.
- 7.6** An individual's right to dignity and privacy in personal relationships is respected.
- 7.7** Each individual is supported to understand their rights and respect the rights of others to privacy and dignity.
- 7.8** The privacy, dignity and preferences of each individual are respected during times of illness, and prior to and at the time of death.
- 7.9** The privacy and confidentiality of communications between the individual and his/her family, friends, advocate or professional contact is respected.
- 7.10** Each individual's personal documents and reports are kept secure and confidential at all times in accordance with Saint John of God Community Services Limited Policy.
- 7.11** Consideration for the individual's safety may, in some circumstances, override the individual's right to privacy. In such instances, due process is assured.

8. Best Possible Health

Policy Statement

Health care interventions are personalised and effective in facilitating best possible health as defined by the individual's unique characteristics and requirements.

Indicators

- 8.1** Each individual is encouraged and supported to maintain their health status to the optimum level by adopting a responsible and proactive approach to healthy living.
- 8.2** Each individual is assisted to access health care services of the same variety and quality available to others in order to address their physical health, sexual health and mental health needs.
- 8.3** Each individual's medical, dental and other health needs are assessed comprehensively at least annually or more frequently in accordance with their needs and wishes.
- 8.4** Each individual is facilitated to attend the General Practitioner of their choice.

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- 8.5** Each individual receives the education and support they need to be active participants in the management of their own healthcare.
- 8.6** Each individual is informed about and assisted in accordance with their wishes in a confidential manner to access preventative screenings and evaluations that are consistent with their age and risk factors.
- 8.7** When significant health issues occur, each individual/their advocate is informed of their medical health condition and treatment options including risks, side effects and possible outcomes. Where information is withheld, due process is followed.
- 8.8** Current and relevant health care assessments and screenings are documented in each individual's records.
- 8.9** Any specialized supports, including adaptive, therapeutic, corrective, as required, are put in place for the individual.
- 8.10** Each individual presenting with challenging behaviour is provided with individualised assessment and intervention according to their need and in compliance with the Saint John of God Community Services Limited Policy on Behaviours that Challenge.
- 8.11** Informed consent is obtained prior to medical treatment and procedures.
- 8.12** In the case of young persons, parental/guardian's consent is obtained in writing for all medical interventions, both emergency and non-emergency.
- 8.13** Each individual's person-centred plan contains a health plan tailored to their specific needs.
- 8.14** All medication is monitored and subject to review in accordance with policy.

9. Safety

Policy Statement

Due diligence is exercised to ensure that environments that people live, work and socialise in meet with all the necessary applicable standards related to safety.

Indicators

- 9.1** Systems and structures are designed in a manner that promotes the individual's personal safety and complies with health and safety legislation, to include risk management, fire prevention, individual transport safety, infection control and food hygiene, where applicable.

- 9.2** Policies, strategies and individualised supports are in place to support safe and hazard free environments.
- 9.3** Each individual is supported to identify their concerns and requirements in regard to personal safety and to manage situations that involve an element of risk.
- 9.4** Each individual is trained to anticipate, recognize and respond to personal safety issues.
- 9.5** Each individual is provided with learning opportunities to assist them to make progressively more complex decisions, in a safe and responsible manner.
- 9.6** Staff are trained to identify and deal appropriately with a range of possible hazards including healthcare-associated infections.
- 9.7** Individuals and families are encouraged and supported to identify risks and hazards in the home.
- 9.8** A written plan is in place in each service which outlines the process to be undertaken if a person goes missing.

10. Safeguarding and Protection

Policy Statement

Individuals are protected from fear, abuse, neglect, mistreatment and exploitation.

Indicators

- 10.1** Systems, structures and practices are designed in a manner that ensures individual's personal safety.
- 10.2** Safe care practices are in place in the provision of personal and intimate care to each individual.
- 10.3** Present or past concerns for the safety of an individual are reported immediately by staff.
- 10.4** Each individual has access to an advocate or advocacy service.
- 10.5** The Saint John of God Community Services Limited Policy and Procedures on Adverse Incidents (2007) are applied in all situations where individuals go missing or harm themselves.
- 10.6** An anti-bullying strategy is applied to ensure that individuals are protected from any form of abuse.

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- 10.7** An individual person-centred plan is designed in consultation with the individual in order to identify areas of vulnerability and to plan supports which address the safeguards required.
- 10.8** Each individual is supported to recognise and address the effects of alleged incidents of abuse, neglect, mistreatment or exploitation.
- 10.9** Procedures for the investigation and management of alleged incidents of Non-accidental Injury and Abuse are adhered to in accordance with Saint John of God Hospitaller Services (2010) Policy & procedures for managing allegations of abuse against staff
- 10.10** An incident management system is in place to maintain data, review and analyse trends and potential risks, and to determine corrective actions or other interventions as required.
- 10.11** Measures taken to support an individual with behavioural challenges are at all times in accordance with Saint John of God Community Services Limited Policy on Behaviours that Challenge (2010).

11. Continuity and Security

Policy Statement

Administrative, financial, human resource and support functions promote personal outcomes in an integrated way in order to provide a comprehensive range of services which meets the immediate and long-term needs of each individual.

Indicators

- 11.1** Support and services are provided in a manner which minimizes the disruption to individual's lives.
- 11.2** Each individual is supported to have sufficient financial means to cover basic requirements and to achieve their goals.
- 11.3** Each individual where possible has input on the type and amount of change that occurs in their lives.
- 11.4** Every effort is made to keep each individual informed of changes in the day-to-day running of the service which affect them directly.
- 11.5** Stability is maintained to the greatest degree possible in their place of work and residence unless the change is made to enhance the individual's life.
- 11.6** Each individual's privacy is maintained by ensuring that they are aware of, and have access to, all information that is kept on them, and give consent to disclosure of such information.

12. Religious Freedom and Expression

Policy Statement

Each individual's fundamental right to express and practice their own religious beliefs is acknowledged and supported.

Indicators

- 12.1** Each individual and family is supported in meeting their religious and spiritual needs, as appropriate.
- 12.2** Each individual is supported to play an active and fulfilling part in their religious community/group.
- 12.3** Opportunities are provided for each individual to participate in and express their religious beliefs.
- 12.4** The right of each individual to belong and their freedom to participate in the wider faith community is advocated through networking with individuals and other agencies.
- 12.5** Policies and practices reflect the individual's right to choose whether to participate or not in religious activities.
- 12.6** Education is provided to enable staff to understand what religion and faith mean to individuals.
- 12.7** Each individual is supported at times of bereavement and loss.

13. Quality

Policy Statement

Quality Systems are in place, which promote an integrated person-centred approach to Quality of Life.

Indicators

- 13.1** An individual planning system is in place which addresses each individual's wishes and needs from a Personal Outcomes-based approach.
- 13.2** The individual planning system addresses Shared Values around People, in the Community and of the Organisation.

- 13.3** The aggregated data from the planning process informs service delivery and strategic direction.
- 13.4** An integrated approach is taken to the achievement of Quality Standards through the establishment of structures, systems and processes across functions to support and achieve outcomes.
- 13.5** A data management system is in place which supports and informs planning and development.
- 13.6** A Quality Steering Committee is established to:
- Provide leadership in the co-ordination and implementation of the Quality Systems;
 - Oversee the development, implementation, monitoring and review of the Quality Enhancement Plan for each service;
 - Identify and advise on Policy, procedures and training issues arising;
 - Inform, educate and involve individuals and their families;
 - Develop methods of communicating achievements and challenges;
 - Engage with all stakeholders in the integration of the goals and actions into the service strategic plan.
- 13.7** External monitoring and evaluation is carried out by recognised accreditation bodies.

14. Accessible Communication

Policy Statement

Every individual has the right to communicate in accordance with their needs and wishes.

Indicators

- 14.1** Each individual is given the opportunity and time to communicate.
- 14.2** Each individual is listened to in a respectful manner and responded to in a meaningful way.
- 14.3** Every member of an individual's circle of support understands how the individual communicates.

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- 14.4** Each individual will be supported to access appropriate professional expertise and services in order to support their ability to communicate.
- 14.5** Information is provided in a manner which is accessible to the individual in accordance with Saint John of God Community Services Limited Policy on Accessible Communications 'I Want to Understand', (2009).
- 14.6** Each individual will be supported to access alternative and augmentative means of communication if required.
- 14.7** Each individual's alternative preferred and/or appropriate method of communication is identified and advised to all staff members and volunteers.
- 14.7** The manner in which an individual communicates is documented in their records.
- 14.8** Communication takes place in an environment that is supportive and open, and barriers to communication are identified and controlled or removed.
- 14.9** Opportunities are afforded to each individual to access information with regard to their community in an accessible manner.
- 14.10** Each individual is supported to understand their rights in a manner which they can understand.
- 14.11** Individuals are support to access advocates to facilitate their communication if required or needed.
- 14.12** Staff are trained to support each individual to communicate according to their needs and wishes.

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