

**People with Disabilities**

**Western Australia Inc.**

# Policy manual

Part 1 : General and Human Resources

Status:Current

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| --- | --- |
| Endorsed By: | Committee of Management President: Lisa Burnette |
| Year Endorsed: | 2018 |
| Next Review: | 2020 |
| Associated Documents: | Disability Service Standards (DSS) National Standards for Disability Services(NSDS) |

People with disabilities (WA) has the right to review and, if necessary, change the contents of this Policy Manual.

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# General

This section includes:

Policy and procedure management policy

Conflict of Interest Policy and Procedure

Financial Management Policy and Procedure

Insurance and indemnity

Occupational health and safety

Motor vehicles

Asset management

Document control

# Policy and Procedure Management Policy

**1) Policy Title**

Policy and Procedure Management Policy

**2) Policy Statement**

**Purpose:**

To establish clear guidelines for employees and management on the process for authorising and implementing Policies and Procedures within People with disabilities (WA).

**Aims:**

* This policy will outline how policies and procedures will be managed by People with disabilities (WA):
* To ensure that policies and procedures will be timely, transparent, accurate and actively maintained by the organisation.
* To ensure that policies and procedures are available in accessible formats
* To ensure that once a policy is adopted that all employees and members of People with disabilities (WA) will abide by and promote that policy.
* To ensure that all policies are in accordance with the United Nations Convention on the Rights of Persons with Disabilities.

**3) SCOPE**

This policy is for all Committee of Management Members, employees and volunteers.

**4) Related Documents**

* Policy Template
* Register of Policies
* Quality Management policy

**5) Procedure**

1. Policies and procedures will be reviewed by the Executive Director (ED) and or Committee of Management on a two yearly basis. However if at any time the legislative, policy or funding parameters change, then the relevant policy will be updated as soon as possible.
2. Policies relating to corporate governance will be drafted by the Committee of Management then submitted to the Committee of Management for their approval and sign off by the President.
3. Policies relating to operational issues will be drafted by the relevant staff and then submitted to the Management team and ED for his/her approval and sign off.
4. Once a policy has been agreed by either the ED or Committee of Management, the ED will then sign the Policy. This Policy replaces any previous versions.
5. Procedures are an operational matter and therefore fall under the supervision of the ED and senior managers.
6. All policies and procedures will be available on the website for employees and to permit public access. All policies and procedures will be available in accessible formats These copies become uncontrolled when printed and so employees should always refer to the policies and procedures on People with disabilities (WA) website first to ensure that they are referencing correct information.
7. All policies will be developed in line with the United Nations Convention on the Rights of Persons with Disabilities, Disability Service Standards, National Standards for Disability Services (NSDS) and People with disabilities (WA)’s funding guidelines from both the Disability Services Commission (DSC) and the Department of Social Services (DSS).
8. People with disabilities (WA)acknowledges the use of the following reference material:
9. National Disability Advocacy Program (NDAP) Toolkit
10. Community Door Policy Bank
11. Disability Commission Policy and Procedures Template

# Conflict of Interest Policy and Procedure

**1) POLICY TITLE**

Conflict of Interest Policy

**WHAT IS A CONFLICT OF INTEREST?**

A conflict of interest arises when a reviewed People With disabilities WA Inc Committee member, employee or volunteer's duty to the organisation clashes with their other duties, obligations or interests. These include other business or workplace interests or personal interests involving family and friends.

**2) POLICY STATEMENT**

**Purpose:**

To establish a set of policies and procedures to ensure that, where possible, any conflict of interest or perceived conflict of interest is avoided and dealt with transparently.

**Aims:**

* To equip Committee members, employees and volunteers with the skills to identify, manage and resolve any conflict of interest or perceived conflict of interest.
* To set out the procedures necessary to ensure that any conflict of interest or perceived conflict of interest is dealt with transparently.

**3) SCOPE**

This policy is for all committee members, employees and volunteers.

**4) PRINCIPLES**

National Disability Advocacy Standards - Standard 2: Individual Needs

Key Performance Indicator 2.4: In meeting the needs of a person with disability, the advocacy agency avoids, where possible, any conflict of interest or the perception of any conflict of interest in relation to the conduct of its advocacy work, and deals with any conflict or perceived conflict transparently.

**5) RELATED DOCUMENTS**

* Conflict of Interest Guidelines and Examples (Committee).
* Conflict of Interest Guidelines and Examples (Individual Advocacy).
* Conflict of Interest Guidelines and Examples (Staff & Volunteers).
* Conflict of Interest Guidelines and Examples (Systemic Advocacy).
* Conflict of Interest Procedures.
* Conflict of Interest Record.
* Register of Conflicts of Interest, Actions and Outcomes.

**6) LINKS**

* [Community Door](http://www.communitydoor.org.au/node/14).
* [National Disability Advocacy Standards.](http://www.fahcsia.gov.au/our-responsibilities/disability-and-carers/program-services/for-service-providers/quality-assurance-for-the-national-disability-advocacy-program)
* [Our Community.](http://www.ourcommunity.com.au/)

**Conflict of Interest Procedures**

**7) WHAT IS A CONFLICT OF INTEREST?**

A conflict of interest arises when a People With disabilities WA Inc Committee member, employee or volunteer's duty to the organisation clashes with their other duties, obligations or interests. These include other business or workplace interests or personal interests involving family and friends.

**8) IDENTIFYING A CONFLICT OF INTEREST**

The following questions can help identify a conflict of interest:

* Can I or my family, friends or business associates benefit directly from this situation?
* Would a fair and reasonable person in the same position make the same decision?
* Have I considered all options on an equal basis?
* Would my actions withstand public scrutiny?
* What is my duty as a public official?

**9) WHAT TO DO WHEN YOU HAVE A CONFLICT OF INTEREST**

Despite your best intentions you may find yourself exposed to a conflict of interest. The following checklist outlines the steps you can take to protect yourself, the organisation and stakeholders.

**STEP 1:** As soon as you encounter a possible conflict of interest, notify your Manager or the Committee President if you are a Committee member.

**STEP 2:** You will be asked to fill out a 'Conflict of Interest Record'.

**STEP 3:** You and your Manager / Committee President will discuss the conflict and jointly agree on an appropriate action.

**STEP 4:** The conflict of interest, agreed actions and outcomes will be recorded in the 'Register of Conflicts of Interest, Actions and Outcomes'. This register will be made publically available. Your name will not be included in the register.

**10) CONFLICTS OF INTERESTS MAY INCLUDE:**

* accepting bribes, gifts or favours for services performed as part of official duties
* improper use of official information
* giving favours to friends or relatives
* outside employment or activities that interfere with your ability to perform your duties in a professional manner
* membership of an organisation or political activity that interferes with you professionally performing your duties
* pecuniary (money-related) or non-pecuniary conflict.

**11) REAL (OR ACTUAL) CONFLICT OF INTEREST**  
A real (or actual) conflict of interest exists when a Committee member, employee or volunteer's private interests have interfered with their duties or are likely to do so.

[Example](javascript:accordionNew(this,'panel1');)**:** Phil is the person responsible for purchasing stationery items for his service. He decides to use an office supply business which is owned by his father.

**12) APPARENT CONFLICT OF INTEREST**  
An apparent conflict of interest exists where it appears that a Committee member, employee or volunteer's duties may be affected by personal interest, even though this may not be the case.

[Example](javascript:accordionNew(this,'panel2');)**:** Maria is on a selection panel and one of the applicants is her best friend. Even if she has no intention of being biased in favour of her friend, there may be a strong perception by other applicants that she would give her friend preferential treatment.

# Financial Management Policy and Procedure

**1) POLICY TITLE**

Financial Management policy

**2) POLICY STATEMENT**

**Purpose:**

To establish policies and procedures that ensures strong financial probity for People with disability WA.

**Aims:**

* To provide systems and processes that ensures the overall financial, effectiveness and accountability of People with disabilities (WA).
* To maintain procedures and processes to ensure People with disabilities (WA) can monitor financial risk to the organisation
* To formulate, review and approve the annual budget to ensure effective financial management of the organisation.

**3) Scope**

This policy is intended for the Committee of Management, Executive Director, Senior Staff and Administration staff.

**4) Related Documents**

* Policy template
* Risk Management Policy
* Expenditure delegations policy
* Employee Induction Package

**5) Procedure**

1. A budget is produced each financial year that must be approved by the Committee of Management prior to June 30.
2. The Executive Director, Treasurer, and President are responsible for developing the budget
3. The budget must include all relevant information on expected income and expenditure of the following year and be based on realistic expenditure from the prior year, and include all indexation to salaries and wages.
4. Formulas in the budget should be checked by Administration and Accounting services.
5. All payments must be authorised by the Executive Director or a delegated senior member of staff and checked by the Administration officer.
6. All payments must have the funding source and the line-item for budget allocation marked on the original document and copies kept for legally required time frames in a secure cabinet, as well as scanned copies kept electronically. All electronic copies are password protected.
7. All payments made using online banking must have two separate staff members to approve each payment with at least one staff member being the Executive Director or a delegated senior member of staff.
8. Credit cards are held by the Executive Director and delegated senior member of staff. Receipts are provided to administration for scrutiny against card statement. All receipts to be provided to administration by end of month for end of month reconciliation.
9. All Petty cash is kept in a secure location, with up to $300 kept in petty cash. All purchases require a receipt and all cheques require 2 authorised signatures. All receipts to be provided to administration by end of month for end of month reconciliation.
10. Monthly financial reports are provided to the committee of Management to review the budget against expenditure.
11. All accounting and financial reports will meet the Australian standards.
12. Fortnightly timesheets from all staff must be authorised by the Executive Director or a senior member of staff and checked by the administration officer.
13. At the end of the financial year all funding must be acquitted and audited by an external auditor.

**Insurance and Indemnity Policy and Procedure**

**1) Policy Title**

Insurance and Indemnity Policy

**2) Policy Statement**

**Purpose:**

To establish policies and procedures in relation to insurance and indemnity maintained by People with disabilities (WA).

**Aims:**

* To ensure that People with disabilities (WA), Committee of Management members, employees, volunteers and other unpaid persons involved in organisation business are appropriately insured and indemnified.

**3) Scope**

This policy is intended for all Committee of Management members, employees, volunteers and unpaid employees involved in People with disabilities (WA) business.

**4) Related Documents**

* Administration Induction Package
* Injury Management and Workers Compensation policy
* Motor Vehicles

**5) Procedures**

People with disabilities (WA) will maintain and undertake the following:

1. Public and Products liability insurance
2. Workers Compensation
3. Business motor insurance for all organisation vehicles
4. Journey Accidents insurance
5. Management liability insurance
6. Voluntary Workers insurance

# Occupational Health and Safety Policy and Procedure

**1) Policy Title**

Occupational Health and Safety Policy

**2) Policy Statement**

**Purpose:**

The purpose of this policy is to:

* Establish a set of policies and procedures which outline the Occupational Health and Safety requirements of the organisation, committee members, employees and volunteers.
* Show the commitment of People with disabilities (WA)’s management and employees to health and safety.

**Aims:**

* To identify and reduce the potential risks and hazards to the health, safety and welfare of all employees, volunteers and visitors, and anyone else that may be affected by People with disabilities (WA) business operations.
* To inform committee members, employees and volunteers of ways of reducing Occupation Health and Safety risks in order to reduce the potential for injury or accidents and ensure all work activities are carried out safely.
* To ensure appropriate documentation of the above is maintained by the organisation.

**Obligations:**

People with disabilities (WA) will ensure the *Work Health and Safety Act 2012;* the *Work Health and Safety Regulations 2012* and the Australian Standardsare complied with.

**3) Scope**

This policy is for committee members, employees and volunteers. It applies to all business operations and functions, including those where employees are required to work out of the office.

**4) Related Documents:**

* Employee Induction Package
* Employee Performance Management Policy
* Risk Management policy
* Risk Assessment
* Incident Report Book
* Injury Management and Workers Compensation policy

**5) Responsibilities**

**Management:**

Will provide and maintain as much as possible:

* A safe working environment
* Safe systems of work
* A commitment to consult and cooperate with employees in all matters relating to health and safety in the workplace.
* All agency employees with appropriate information about, and training in, relevant occupational health and safety standards and practices
* Workers compensation insurance for all employees.
* Reasonable steps to assess the safety of the locations where organisation employees provide support to people with disabilities.
* Where appropriate, a safe and reliable means of transportation between the office and work sites.
* Insurance for all employees, volunteers and other unpaid persons involved in organisation business and management committee members, both at work and travelling to and from work.
* Proper documentation of all work related accidents, injuries and illnesses
* Investigations into all work related accidents, injuries and illnesses, and identify and take appropriate action to minimise future occurrences.
* Line managers will investigate and document any employee grievance regarding occupational health and safety matters within a week of occurrence.
* An action plan is developed to implement action to minimise reoccurrence within a month of any work related incidents.
* A rehabilitation plan to assist the employee to return to work as soon as practicable.(Where applicable)

**Employees and Volunteers:**

Each employee has an obligation to:

* Comply with safe work practices, with the intent to avoiding injury to themselves and others
* Take reasonable care of the health and safety of themselves and others
* Comply with any direction given by management for health and safety
* Not misuse anything provided for health and safety
* Report all accidents and incidents on the job immediately, no matter how trivial
* Report all known or observed hazards to their supervisor or manager as soon as identified.

# Motor Vehicle Policy and Procedure

**1) Policy Title**

Motor Vehicle Policy

**2) Policy Statement**

**Purpose:**

To establish a set of policies and procedures which provides guidance to employees and volunteers on the use of both organisation owned or private vehicles for work related purposes.

**Aims:**

* To ensure employees and volunteers are aware of the arrangements when using an organisation vehicle or organisation hired vehicle.
* To define the requirements when employees or volunteers may be required to use their private vehicle during the course of employment.
* To ensure the importance of Occupational Health and Safety is reflected in the policy.

**3) Scope**

This policy is for all people driving on People with disabilities (WA) business and employees provided with a vehicle as part of their remuneration.

**4) Related Documents:**

* Driver Declaration Form
* Kilometre Usage Form
* Employee Induction Package
* Insurance and Indemnity policy

**5) Procedure for Company Cars**

**General**

* People with disabilities (WA) provides motor vehicles to specific employees for use within the ordinary course of their employment. These vehicles (pool cars) are also made available for other employees or volunteers to utilise within business hours.
* If an employee requires the use of a pool car they are to complete the following:

1. Check the Outlook diary to ensure the car is not already booked out.
2. Verbally request the use of the pool car with their line manager and explain the intended use.
3. If agreed, booking should be entered on the office calendar, indicate the colour of the car being used and the time period required.

* The following is provided and maintained in pool cars: Sunscreen, First Aid Kit, Satellite Navigation and a Map Book.

**Conditions for use**

* All drivers of organisation vehicles must hold a current motor vehicle driver’s licence. In the event that the driver is newly arrived in WA they must adhere to the Western Australian requirements relating to securing a West Australian Driver’s Licence or follow protocol regarding using their current overseas license.
* All drivers must complete a Drivers Declaration form detailing the above. This must be redone annually. If there are any traffic infringements they must be reported to the Executive Director as soon as possible.
* Employees may not attempt to repair a vehicle or make any modifications. All repairs are to be done by licenced mechanics. When a vehicle requires repair, it must be discussed with line manager. If employees require road side assistance, details are in the glove compartment of the car.
* People with disabilities (WA) employees are not to transport clients in either the People with disabilities (WA) vehicle or their own car. Special circumstance must be discussed with the line manager. A Risk Assessment is required before consent to transport is considered.
* Where an organisation motor vehicle is involved in an accident the following procedures are to be followed:
  1. Where a person(s) are injured in the accident, call the Police and/or ambulance as soon as possible and as far as practical, provide assistance to any injured person.
  2. Collect and write down the following information:
     1. Name and address and driver’s licence number (sight the driver’s licence or other documentation)
     2. Occupation and employer details
     3. Contact telephone at home and work
     4. Registration number of the other vehicle
     5. Name of the other party’s insurance company and their policy number.
     6. Witness details.
  3. Report the accident to the line manager as soon as possible.

**Legal matters**

* The employee is responsible for paying all traffic and parking infringements incurred while they are driving organisation or private vehicles for work use.
* In the circumstance of an organisation motor vehicle being determined, by the police, to have been driven under the influence of any drugs or blood alcohol level exceeding the legal limit and subsequently damaged or caused damage to other property, the organisation reserves the right to undertake legal action to recover all costs associated with the incident from the individual responsible for the damage. Drivers must not drive an organisation vehicle if affected by drugs or alcohol (beyond the legal limit) which may affect their driving competency. Employees are not to drive any vehicle if they are taking medication that cautions against driving.

**Private Motor Vehicles**

* If the line manager has previously agreed then the employee can use their own car and can claim the kilometre allowance from People with disabilities (WA).
* Private motor vehicles that are to be used for work related travel must have, at a minimum, third party insurance. The driver’s insurers must be aware of possible business use. Evidence of this documentation is required at time of employment.
* Private motor vehicles that are to be used for work related travel must be in roadworthy condition.
* The driver of the private vehicle is responsible for paying all vehicle infringements incurred in the course of work related travel, including speeding fines and parking tickets.
* If an employee chooses to claim mileage against their tax return it is their responsibility to comply with any requirements such as log books. Employees are also to inform their personal insurance company of them using their vehicle for work purposes.
* All drivers must complete a Drivers Declaration form detailing their current license details and conditions. This must be redone annually. If there are any traffic infringements they must be reported to the Executive Director as soon as possible.

# Asset Management Policy and Procedure

**1) Policy Title**

Asset Management Policy

**2) Policy Statement**

**Purpose:**

To ensure People with disabilities (WA) makes responsible asset purchases, accounts for its assets and retains control over assets.

**Aims:**

* To ensure that all employees have the necessary and suitable equipment to perform their duties and to ensure that copyright and licensing regulations are observed.
* To ensure that cost of asset acquisition, maintenance and replacement is kept to a minimum.
* To inform all employees, volunteers and committee members so they are aware of the correct procedures surrounding the acquisition, maintenance and replacement of any assets.

**3) Scope**

This policy is for committee members, employees and volunteers.

**4) Related Documents:**

* Asset Register Template
* Motor Vehicle Policy
* Administration Induction Package
* Expenditure Delegations Policy

**5) Procedure**

1. An asset is a tangible item of economic value. For this policy it refers to physical items such as machinery, equipment or building.
2. The following levels of management have different delegations:
   1. Management are responsible for preliminary planning and budgeting of asset acquisition and maintenance. They are responsible for monitoring the asset register.
   2. Employees are to advise management of the need for hardware and software upgrades and renewal. The Administration Officer is responsible for documenting items into the asset register. They are also responsible for the coordination of the disposal of assets as per instruction from management or the Executive Director. The Administration Officer can purchase any assets approved by the Executive Director or Committee of Management.
3. All assets are to be appropriately insured and recorded on the Asset Register.
4. Asset Acquisition is to be based on consideration of whether the asset:
   1. will provide significant, direct and tangible benefit to the organisation
   2. does not exist or could not be upgraded or adapted to meet the same purpose
   3. is appropriate and cost effective over its life
   4. is compatible with existing equipment and will not lead to unwarranted additional expenditure
   5. can be accommodated in existing space and facilities
   6. is the most suitable and appropriate type, brand, and model.
5. An asset register of all capital purchases is maintained by the organisation.
6. Assets will be used by authorised personnel for the purposes for which they were acquired.
7. Assets will be maintained through actions recommended in manufacturer's manuals.
8. Asset disposal may occur through auction, tender, private sale, destruction, donation and transfers to other organisations.
9. This policy acknowledges that Motor Vehicles are assets, for further information refer to Motor Vehicle Policy.
10. Loss or damage to mobile equipment is to be reported to the manager as soon as identified.
11. People with disabilities (WA) retains the ownership of assets provided to committee members, employees and volunteers. They are then responsible for exercising reasonable diligence to protect assets from theft or damage.

# Document Control Policy and Procedure

**1) Policy Title**

Document Control Policy

**2) Policy Statement**

**Purpose:**

To establish a set of policies and procedures which outline process for the creation and management of all official records and documents.

**Aims:**

* To ensure that People with disabilities (WA) has the appropriate structure and resources in place to manage records and documents in a manner that is planned, controlled, monitored, recorded and audited using an authorised system.
* To ensure adequate recordkeeping and document management is maintained throughout People with disabilities (WA) and that the business requirements for evidence, accountability and information about advocacy activities are met.

**3) Scope**

This policy is for committee members, employees and volunteers.

**4) Related Documents:**

* Policy and Procedure Management Policy
* Performance Management Policy
* Employee Induction Package
* Privacy, Dignity and Confidentiality policy

**5) Procedure**

1. Records and documents created, or used by People with disabilities (WA) staff in the normal course of business are the property of People with disabilities (WA) unless otherwise agreed.
2. Records are to be managed in a consistent and structured manner, stored in a secure location and disposed of or permanently archived appropriately.
3. All employees are responsible for their own clients’ associated documents and these should all be stored on the approved database. Newly created documents are to be version controlled. This means that the author of the document will ensure the date the document is created or revised is identified on the first page and, when possible, is incorporated into the header or footer of the document and appears on every succeeding page.
4. All documents are to be clearly identifiable with an appropriate name and stored on the system in line with the internal guidelines.
5. Confidential and client documents are not to be taken from the office unless it is for the direct purpose of advocacy. While out of the office documents should be stored securely and returned as soon as possible.

# Human Resources

This section includes:

Employee Recruitment

Police Clearance

Performance Management

Injury Management and Workers Compensation

Grievances

Employee Exit

Volunteers

# Employee Recruitment Policy and Procedure

**1) Policy Title**

Employee Recruitment Policy

**2) Policy Statement**

**Purpose:**

To establish a set of policies and procedures which give clear guidelines to employees on the process for employee recruitment, employment and selection.

**Aims:**

* To ensure that the most appropriate people are recruited into the organisation through a fair, open and merit based system that assesses prospective employees against appropriate selection criteria.
* To endeavour to recruit people with disabilities who have the relevant skills and experience for the vacancy and encourage people with disabilities to apply for vacancies.

**3) Scope**

This policy is for all employment recruitment processes.

**4) Related Documents**

* Police Clearance Policy
* Employee Performance Management Policy

**5) Procedure**

People with disabilities (WA) will:

1. Maintain job descriptions for all positions.
2. Senior Managers are responsible for identifying areas of need and affordability in relation to employment levels.
3. People with disabilities (WA) will advertise positions using various media and networks to maximize the exposure of the employment opportunity.
4. The Executive Director may, at his/her discretion appoint a current employee to a position vacancy under the following circumstances:
   1. Following an interview with the agreement of the COM
5. The interview panel will consist of not less than two people, one of them being a manager, the other being another manager or a Committee of Management representative.
6. The interview will be standard and have consistent questions related to the advertised position. The interview panel will be responsible for taking summary notes of the interviewees’ answers.
7. An appointment will be made based on the interview, evidence of the person’s experience, qualifications and references check.
8. If an employee is successful in their interview they may be given a formal job offer subject to the provision of a satisfactory police clearance in line with People with disabilities (WA)’s Police Clearance Policy.

# Police Clearance Policy and Procedure

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**1) Policy Title**

Police Clearance Policy

**2) Policy Statement**

**Purpose:**

To establish a set of policies and procedures which protect People with disabilities (WA) from recruiting a committee of management member, employee or volunteer who has been convicted of criminal offences that may present increased risks to the organisation. The risk includes a range of factors including possible fraud or the person’s suitability to provide services to people with disabilities.

**Aims:**

* To ensure that all committee of management members, employees and volunteers have a current police clearance.

**3) Scope**

This policy is for Committee of Management members, employees and volunteers.

**4) Related Documents:**

* Employee Induction Package.
* Employee Induction checklist
* Police Clearance
* Employee Reimbursement form
* Committee of Management Induction Package
* Volunteers Policy

**5) Procedure**

The organisation will:

1. Require potential Committee of Management members to obtain a satisfactory criminal records check prior to appointment.
2. Inform all prospective employees and volunteers that they will be required to provide criminal records check less than six months old prior to commencing duty.
3. Require any prospective Committee of Management member, employee or volunteer who has any outstanding chargers, to disclose these during the recruitment process. Failure to do so may result in dismissal at a later date.
4. Require short-listed applicants (employees or volunteers) to provide documentary proof of identity, such as a passport or driver’s licence, when attending the selection interview.
5. Require the recommended applicants (employees or volunteers) to obtain a satisfactory criminal records check prior to commencing duty.
6. If any recorded criminal convictions are identified, refer the matter to the Executive Director for a determination as to whether the specified conviction would be likely to place the clients of the organisation at any risk or breach the organisation’s duty of care obligations.
7. Base its determination on whether the conviction has been for an offence which directly relates to the duties, whether the position being sought would offer unsupervised opportunities for a similar offence to take place, whether the offence has occurred recently, whether there are single or multiple convictions and whether the conviction(s) reflect generally on the suitability of the person to become an employee or volunteer with the organisation.
8. Update all criminal records checks every five years for all Committee of Management members, employees and volunteers.
9. During the course of employment, should an employee receive a criminal conviction they will notify their line manager to determine appropriate action.

# Performance Management Policy and Procedure

**1) Policy Title**

Performance Management Policy

**2) Policy Statement**

**Purpose:**

To establish a set of policies and procedures which outline the process for performance management of employees.

**Aims:**

* To clarify that sub-standard performance is defined as inability or unwillingness to utilise appropriate skills to carry out tasks associated with a particular position competently and in a manner which meets the reasonable expectations and service needs of People with disabilities (WA).
* To outline the process that is initiated once sub-standard performance has been identified.

**3) Scope**

This policy is for committee members, employees and volunteers.

**4) Related Documents:**

* Employee Induction Package.
* Performance Appraisal
* Supervision form
* Code of Conduct Employee and Volunteers policy

**5) Procedure**

1. People with disabilities (WA) will ensure that all employees are aware of the existence of the Policy on Managing Sub-Standard Employee Performance and have access to a current copy of the policy.
2. Resolution of sub-standard performance should be seen by the organisation and its employees as tool for effective human resources management, rather than a punitive action.
3. Any attempt to resolve sub-standard performance must be based on timely and accurate identification of the nature and the cause of the problem. It will not proceed to a satisfactory conclusion until the employee recognises that there is a problem and is committed to making necessary improvements.
4. Resolution of sub-standard performance must be built on the principles of natural justice and current industrial practice which includes informing the employee of the exact nature of the sub-standard performance, providing the employee with opportunities to provide explanations or alternative views, making decisions that are unbiased and seen to be unbiased, and implementing fair and mutually agreed remedial actions.

People with disabilities (WA) will:

1. Recognise that the cause of the problem could be organisational (i.e., unclear duty statement or performance expectations, lack of needed skills or knowledge on the part of the employee, poor job design, counter-productive work environment or negative team environment).
2. Bring any perceived deficiencies to the employee’s attention promptly and arrange a formal meeting to discuss the matter. The meeting must be held within two weeks of the employee being advised of the sub-standard performance and the content and outcomes of the meetings must then be provided to the employee within two weeks of the meeting.
3. At the formal meeting, presided over by the employee’s line manager, identify the actual nature of the sub-standard performance and specify any examples. Allegations should always be documented.
4. Elicit the employee’s own views on the existence, nature and cause of any problem, with a view to coming to a mutual agreement that a problem does actually exist and needs to be remedied.
5. Jointly formulate a written action plan to resolve the sub-standard performance issue including in it the names of all parties involved in the construction of the action plan, its date of effect, specific areas of sub-standard performance, required standards of performance, time-lines for resolution, agreed actions and the names of those responsible for carrying out the actions. The maximum time frame for remediation is six months.
6. During the period of remediation monitor the employee’s work performance regularly and provide written feedback on progress towards achieving desired outcomes. Monitoring meetings are to be held at least monthly for the duration of the action plan and all feedback is to be held on record.
7. Undertake a formal re-assessment of the employee’s performance at the end of the remediation period established in the action plan.
8. Provide the employee with a written copy of the re-assessment and invite the employee to provide a written response to both the process and the outcome.
9. If the sub-standard performance has not been resolved to the satisfaction of the organisation, consider the implementation of disciplinary procedures in accordance with the organisation’s contract of employment with the employee.
10. Advise the employee of his or her rights to lodge a grievance in accordance with the Policy on employee Grievances. Similarly advise the employee of their right to a neutral advocate to be present with them in any such grievance meetings.

# Injury Management and Workers Compensation Policy and Procedure

**1) Policy Title**

Injury Management and Workers Compensation Policy

**2) Policy Statement**

**Purpose:**

To establish a set of policies and procedures which outline the workers compensation process return to work program and ensures employees are supported through the process.

**Aims:**

* To assist injured employees to return to work as soon as appropriate, within medical guidelines.
* To establish effective return to work programs that will allow injured employees to make a smooth transition back into the workplace after suffering an injury or illness.
* To ensure that all actions are in line with the Workers’ Compensation and Injury Management Act 1981.

**3) SCOPE**

This policy is for committee members, employees and volunteers.

**4) Related Documents:**

* Employee Induction Package.
* Occupational Safety and health policy
* Incident Report
* Insurance and Indemnity policy
* Risk Management policy

**5) Procedure**

1. If a workers compensation claim is initiated the following procedure is to be adhered to:
   1. Employees who are injured while at work are to seek appropriate medical attention. Where an employee requires support to attend a medical appointment, the manager is to either accompany the employee or arrange for a person the employee requests to be present at the appointment.
   2. Employees are to inform the doctor that the issue is related to a workers compensation claim.
   3. Following treatment the employee will need to complete an incident report outlining what occurred leading up to the injury.
   4. The employee’s medical practitioner may deem the employee unfit for work and so will provide a medical certificate stating this. After some treatment the employee may be eligible to return to work on light duties.
   5. Management to supply job description if required as to assist the medical practitioner to outline any limitations.
   6. Once any applicable limitations are outlined, the manager will work on a return to work program which will be implemented in consultation with the employee and their medical practitioner.
   7. If an employee has full capacity to return to work, they will not require a return to work program.
   8. If the employee has minor restrictions that do not have an impact on their work then the return to work program shall still consist of that advice as documented on the letter/medical certificate until the restriction is removed.
   9. It is a legal requirement that where practicable People with disabilities (WA) returns the employee to the position they held prior to their injuries or a position comparable in pay and status. This applies for a 12 month period from the day the employee becomes entitled to receive weekly payments.
   10. If People with disabilities (WA) is unable to take all or part of the actions required in a return to work program, then a vocational rehabilitation provider approved by WorkCover WA shall be sourced.
   11. Actions to be taken to assist employees may include but are not limited to the following:
       1. Modifying the workstation or physical environment.
       2. Reducing work hours.
       3. Alternative modified or restricted duties.
       4. Medical appointments/assessments by employee’s medical practitioner.
   12. In the event that the employee does not agree with the return to work program, their manager shall meet with the employee (and if necessary their medical practitioner) to discuss the situation and attempt to resolve the matter. If no agreement is reached, an arbitrator may be appointed. The arbitrator will examine the matter from a legal standpoint and make a final decision.
   13. Once the return to work program has been agreed upon and fully documented, all required actions shall be taken until the goal of the program has been reached, or the employee returns to work in their pre-injury position.
   14. People with disabilities (WA) shall monitor the Return to work program until it has been fully completed.

# Grievance Policy and Procedure

**1) POLICY TITLE**

Employee Grievance Policy

**2) Policy Statement**

**Purpose:**

To establish a set of policies and procedures which outline the process for employees or volunteers who may wish to lodge a complaint or grievance.

**Aims:**

* To ensure that all Committee of Management members employees and volunteers are free to lodge a grievance or complaint.
* To ensure that any grievance or complaint is dealt with promptly, fairly and non-threateningly by the organisation and to have any issues resolved in a satisfactory manner if possible.
* To ensure appropriate documentation of the above is maintained by the organisation.

**3) Scope**

This policy is for committee members, employees and volunteers.

**4) Related Documents:**

* Employee Induction Package.
* Employee Performance Management Policy
* Volunteer Policy
* Governance Policy

**5) Procedure**

1. All new Committee of Management members, employees and volunteers will be provided with a copy of the organisations Policy on Grievances.
2. People with disabilities (WA) will ensure that all employees and volunteers are aware of their right to lodge a grievance and to have that grievance heard. Employees will also be reassured that lodging a grievance will not affect their ongoing employment.
3. Employees and volunteers will be encouraged to first discuss the matter with the involved party prior to lodging a formal grievance or complaint.
4. If the matter is not resolved, employees will have the opportunity to meet formally with their immediate supervisor within five working days and complete a Grievance Report.
5. People with disabilities (WA) will endeavour to ensure that the hearing of any grievance will conform to the principles of natural justice.
6. If the matter has not been resolved at the supervisor level, employees will have the opportunity within five further working days, to meet with the Executive Director. The Executive Director will have reviewed the Grievance Report and any actions taken prior to attempting to resolve the grievance.
7. The Executive Director may determine that the grievance is not able to be resolved to the satisfaction of either party and will develop an action plan that will provide a way in which the parties in dispute can best work together. Or if relevant, the Executive Director may determine that the grievance is justified and request an action plan be implemented to resolve an employee’s behaviour as outlined in the Performance Management Policy. The Executive Director may exercise the option to appoint an external mediator in certain cases.
8. Ensure that the Committee of Management is informed of any grievances that are lodged, the actions taken by the organisation in resolving those grievances and the final outcome at the next COM Meeting...

# Employee Exit Policy and Procedure

**1) POLICY TITLE**

Employee Exit Policy

**2) POLICY STATEMENT**

**Purpose:**

To establish a set of policies and procedures which give clear guidelines to all parties on the process for an employee exiting the organisation.

**Aims:**

* To ensure that all employee exit the organisation in a standard fashion and to seek feedback about the employees experience to improve People with disabilities (WA)’s practice.

**3) Scope**

This policy is for all employees.

**4) Related Documents**

* Employee Contract
* Exit Interview Document
* Employee Exit Checklist

**5) Procedure**

1. All permanent or fixed term contract employees are required to give written notice to their manager that they intend to leave People with disabilities (WA). It must detail their planned end date and accord with the conditions of their contract.
2. Probationary or casual employees may give as little as one day’s notice prior to resigning. The more notice employees are able to provide the more able People with disabilities (WA) is able to manage the effect on clients.
3. Managers are responsible for informing stakeholders of employee’s resignation.
4. Exit interviews will be conducted by the employee’s line manager requested by the employee and are normally undertaken by a member of the manager’s team.
5. An employee’s exit checklist needs to be completed on the day of exit and all provided items should be returned to People with disabilities (WA) on the day of exit
6. A Statement of Employment may be provided upon request.
7. All exit documentation must be placed on the employees personnel file and archived as per the document control policy.

**Volunteers Policy and Procedures**

**1) Policy Title**

Volunteers Policy

**2) Policy Statement**

**Purpose:**

To establish policies and procedures in relation to recruitment, support and guidance to volunteers.

**Aims:**

* To outline the conditions under which volunteers are recruited; the volunteers’ responsibilities to People with disabilities (WA) and its clients and the organisation’s obligations to volunteers.

**3) Scope**

This policy is intended for all People with disabilities (WA) programs and activities.

**4) Related Documents**

* Employee induction package.
* Code of Conduct employees and volunteers policy
* Supervision form
* Employee reimbursement form

**5) Procedures**

People with disabilities (WA) will:

1. Use volunteers to enhance, not replace, the services usually provided by paid employees.
2. Assign duties to volunteers on the basis of skill, interests and availability.
3. Develop duty statements and selection criteria for each volunteer position.
4. Recruit volunteers by the most appropriate means according to the current needs of the organisation.
5. Follow the organisation’s recruitment policy to fill volunteer vacancies.
6. Establish a formal induction process and organise necessary basic training for all volunteers.
7. Establish formal supervision procedures for volunteers, ensure that all volunteers are allocated a supervisor and receive regular supervision in a manner and at a frequency that is appropriate to their tasks and responsibilities.
8. Reimburse volunteers for pre-approved out-of pocket expenses.
9. Endeavour to recruit volunteers who are people with disabilities to support their workforce development skills and enhance future employment opportunities.

# Register of policies and procedures

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| --- | --- | --- | --- |
| **Policy** | **Date Reviewed** | **Name, Position Signature** | **Next Review Date** |
| Policy And Procedure Management Policy | March 2018 | Samantha Jenkinson, Executive Director | March 2020 |
| Conflict of Interest Policy and Procedure | March 2018 | Samantha Jenkinson, Executive Director | March 2020 |
| Financial Management Policy and Procedures | March 2018 | Samantha Jenkinson, Executive Director | March 2020 |
| Insurance And Indemnity | March 2018 | Samantha Jenkinson, Executive Director | March 2020 |
| Occupational Health And Safety | March 2018 | Samantha Jenkinson, Executive Director | March 2020 |
| Motor Vehicles | March 2018 | Samantha Jenkinson, Executive Director | March 2020 |
| Asset Management | March 2018 | Samantha Jenkinson, Executive Director | March 2020 |
| Document Control | March 2018 | Samantha Jenkinson, Executive Director | March 2020 |

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| --- | --- | --- | --- |
| **Policy** | **Date Reviewed** | **Name, Position Signature** | **Next Review Date** |
| Employee Recruitment | March 2018 | Samantha Jenkinson, Executive Director | June 2020 |
| Police Clearance | March 2018 | Samantha Jenkinson, Executive Director | June 2020 |
| Performance Management | March 2018 | Samantha Jenkinson, Executive Director | June 2020 |
| Injury Management And Workers Compensation | March 2018 | Samantha Jenkinson, Executive Director | June 2020 |
| Grievances | March 2018 | Samantha Jenkinson, Executive Director | June 2020 |
| Employee Exit | March 2018 | Samantha Jenkinson, Executive Director | June 2020 |
| Volunteers | March 2018 | Samantha Jenkinson, Executive Director | June 2020 |