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# **CLIENT SAFETY STATEMENT**



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### OTFC Group's Responsibility to Client Safety

At the OTFC Group, all staff prioritise client safety throughout the entire therapy process. This is done in recognition that clients engage with the service to achieve therapy goals and establish meaningful outcomes. The OTFC Group endeavours to negate all incidents from occurring within each engagement for clients through:

- ·Creating and promoting a space that reduces impact of potential incidents and ongoing risk management.
- ·Providing effective training and tools for staff to assess and manage risk throughout service delivery and monitoring this. This includes understanding and identifying Work Health and Safety considerations.
- Establishing processes to evaluate, monitor and improve client safety outcomes.

### **Incident Management Process**

Whilst client safety is of utmost importance, due to physical nature of our ASI® therapy framework and therapy spaces, there is the possibility that an incident, including injury/ies, may occur for a client when engaged in therapy at the OTFC Group. Potential incidents that may occur in the OTFC space include:

- Exercise induced physical stressors such as increased sweating and heart rate that may impact physical state of client.
- Physical injury including (but not limited to) fractures, lesions, bruises or strains/sprains, sore muscles.
- Behaviour related incidents including (but not limited to) client meltdowns, heightened anxiety related to increased sensory stimuli, clients who engage in behaviours of concern towards other clients or OTs (eg hitting, kicking, pushing, biting), swearing or absconding from space.

If an incident occurs, please note the OTFC Group will do the following:

- 1. Provide first aid and call for medical assistance (if required)
- 2. Complete an Incident form and Risk Assessment analysis.
- 3. Inform Clinical Management Team and external parties (if required)
- 4. Follow up with the family via phone call, text message and email
- 5. Review all Work Health and Safety Practices that relate to the incident, and if remediation is required, provide training and professional development for staff
- 6. If the incident in critical, the OTFC Group will request the following from you as caregiver: correspondence in regard to incident status, meeting to discuss incident outcomes and liaison with external stakeholders to inform the OTFC Group of professional recommendations (e.g. Doctor's clearance).



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### Caregiver / Client Rights and Responsibilities

It is also recommended that caregivers and clients are aware of their rights and responsibility in the therapy process including:

- 1. Acknowledgement of any relevant changes that may impact therapy with the treating Occupational Therapist (OT) (such as change in family dynamics, school incidents, medication, poor sleep etc)
- 2. Involvement in therapy sessions and capacity to query OT intent, activities, or clinical reasoning. At times you may see equipment used in different ways than expected if you require clarification, please ask your OT.
- 3. Consistent correspondence with OT and billable services that support this, such as phone calls, emails, reports, letters of recommendations and parent consults.
- 4. All clients and caregivers are encouraged to make direct decisions and choices within therapy that are supportive of their needs.

### Assessment of Safety and Duty of Care

OTFC Group staff have a duty of care to all clients, families, carers and the community. It is expected Occupational Therapists provide a standard of care appropriate to their position that aims to achieve the best outcome for each client, whilst respecting presenting needs. Each OT is expected to complete the following:

- Client preparation that involves non-face to face handover session before a block of therapy begins. This is
  used to carefully prepare for the client with assessment reports, past therapist handover. This preparation
  time also accounts for the OT to establish therapeutic activity ideas that support client outcomes, safety,
  and considerations towards the 'just right' challenge for the client to have balance between challenge and
  success.
- Risk assessment form to ensure risk mitigation can be adhered to. This occurs at the beginning of engagement but is monitored throughout, with reference to change in circumstances (medication etc)
- OT and Assessor handover for new clients will also occur in the event an Assessor deems further conversation to written report outcomes and recommendations is necessary.
- Consistent training and review of Work Health and Safety practices to support clients in the space. During therapy, OTs are expected to promote client safety awareness, so they are empowered to make decisions and strengthen their own risk assessing capacity.

Activities completed within therapy sessions are identified as being safe and deliverable under professional guidance from the occupational therapist. The OTFC Group is not responsible for activities replicated outside of the clinic that have not been provided to the client under direct recommendation from the therapist.



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### **NDIS, Behaviour Support and Restrictive Practice**

Activities completed within therapy sessions are identified as being safe and deliverable under professional guidance from the occupational therapist. The OTFC Group is not responsible for activities replicated outside of the clinic that have not been provided to the client under direct recommendation from the therapist.

The NDIS Commission have developed a practice guide to acknowledge that children and young people with disability require special considerations and safeguarding in order to protect them from harm whilst actively promoting their development and upholding their legal and human rights.

Given this directive we are required to have a acknowledge how we manage your child in our therapy space. Even though we are confident we can manage their behaviours and how we physically move them through the activities in the therapy space, there are times they might become dysregulated, and situations might arise where we have to intervene to keep them, others or ourselves safe in this space. In the instance where we need to physically move your child or intervene, without the implementation of a NDIS Approved Behaviour Support Plan, this will be deemed an unauthorised restrictive and OTFC Group will need to log this with the NDIS commission. This may have the Reportable incidents team suggest you get a Behaviour Support Plan that outlines how we as providers need to manage client behaviour in certain situations, abiding by NDIS regulation. If that's the case, the OTFC Group are happy to discuss the nest steps within this, however also encourage you to read all about behaviour support and restrictive practices here

# OTFC® GROUP



