



SERVICE EXIT AND TRANSITION POLICY AND PROCEDURE

Policy Code	CEP001.01
Person Responsible	Director
Status (Draft/Released)	Released
Date Last Reviewed	23 June 2022
Date Last Updated	16 January 2021

1.0 PURPOSE AND SCOPE

This policy and procedure describes the process for the exiting of participant's from AMPEY PTY LTD.

This policy and procedure applies to all potential and existing AMPEY PTY LTD participants, their family members and carers, and other relevant stakeholders.

2.0 POLICY

Participants have the right to terminate their service provision at any time, and this decision will not prejudice future access to the service.

AMPEY PTY LTD will collaborate with other services to enhance exit/transition planning to meet people's needs where appropriate.

Exit procedures will be fair, transparent, follow due process, uphold the rights of participants and protect the safety and integrity of AMPEY PTY LTD staff, participants, programs and services.

3.0 PROCEDURE

Risk Assessment

- AMPEY PTY LTD will assess risks to the participant associated with transitioning to or from the service, including:
 - the level and nature of support the participant needs;
 - the level and nature of support the participant will have available after transitioning.
- Staff will:
 - document communicate any identified risks;
 - respond to any identified risk; and
 - support the participant and supporters to manage identified risk, where possible.
- All participants shall be provided with appropriate:
 - Advice and support when exiting the service;
 - Referral to other services and links to the community (including those that

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- will assist the participant's recovery and wellbeing);
- Information relating to entering our services at a later date (this will also be provided to family members and other service providers involved in follow-up).
- Prior to the participant's exit from AMPEY PTY LTD, the Director (or delegate), with the participant and family members/carers (if nominated by the participant) will review the outcomes of the service and support, as well as inform the participant of ongoing follow-up arrangements (if any).
- All participants will be invited to complete a *Participant Exit Survey* upon exiting the service and will be offered the opportunity to have an informal interview with the Director (or delegate).
- With the consent of the participant, carers and family members will be involved in exit planning and follow-up arrangements to ensure continuity of care.

Review of Processes

The transition process will be regularly reviewed and developed, including:

- the risk assessment process
- advice and referrals provided
- re-entry of participants to service
- feedback provided
- observations and available data.

4.0 Transition Policy Statement:

This policy refers to supporting participants with their transition process with external service providers at exit to ensure Continuity of supports and is to be implemented in conjunction with the organisations Service Access and Equity Policies and procedures. The organisation will ensure that all participants exiting the service are provided all the relevant supports and acknowledge its duty of care towards each participant. Organisation and its staff acknowledge the right of each participant to choose to exit the services at any stage and participate in the Transition planning processes. Participants will also be supported to access independent advocates at each stage including at during transition into or to external services.

Guiding Principles and procedures:

- A transition plan will be developed for each participant for the transition process in consultation with the participant, representative, chosen advocate and the external provider.
- Participants cultural and linguistic background information will be documented and reflected in the Transition plan.
- The Transition process will be clearly communicated to the participant in simple language and access to interpreters, advocates will be provided.

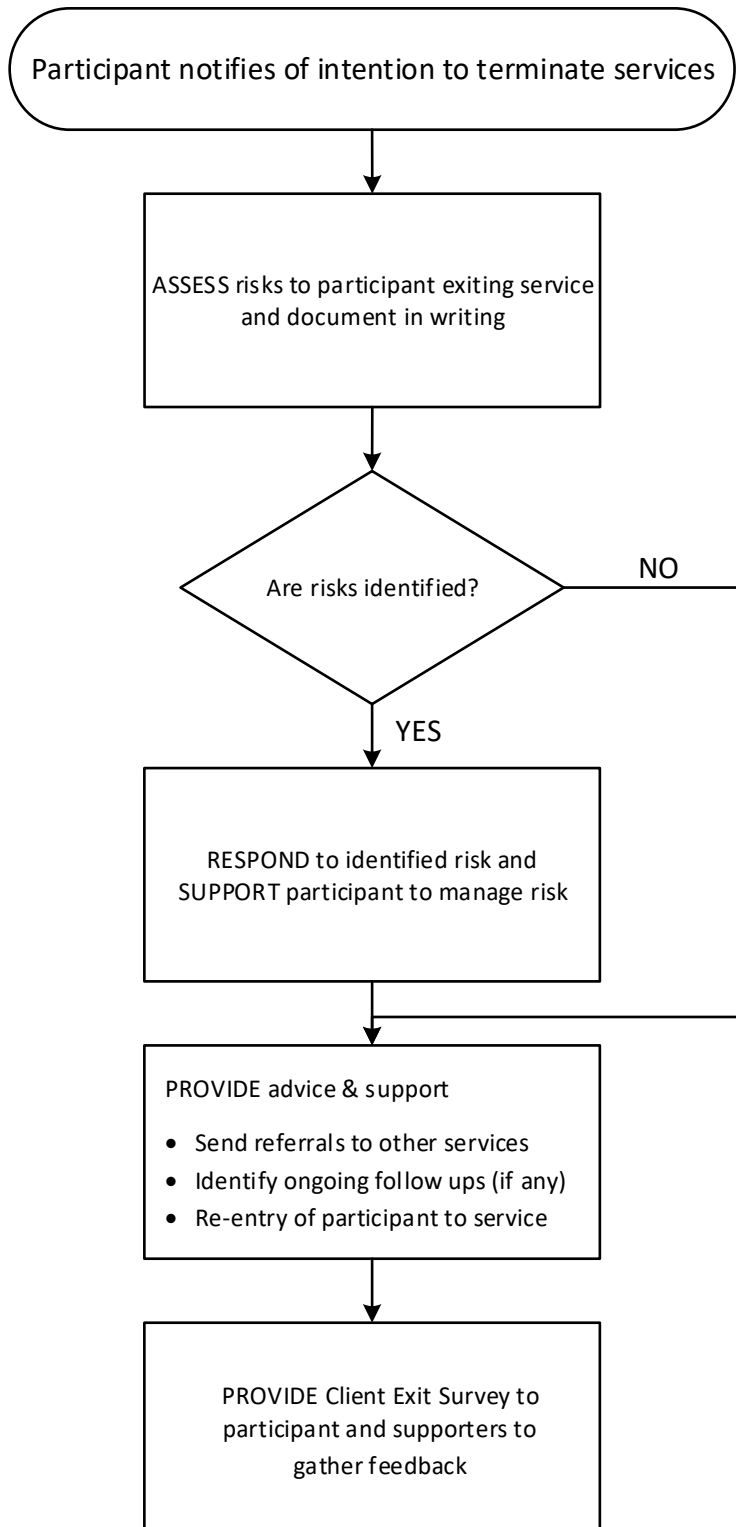


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- Consent to share information must be provided to the external provider during the transition process and communicated to participant.
- If required, Transition Plan meeting can be scheduled with participant, representative, chosen advocate and the external provider.
- Prior to scheduling the Transition Plan meeting, participant will be explained the purpose of the meeting, how it is going to be conducted, who will be present at the meeting, interpreter requirements to be accessed
- If possible, sending an email or explaining on phone some discussion points for the participant to think about before attending the Transition plan meeting.
- Participant **MUST** attend the Transition plan meeting, details of advocates or participant representative details will be documented
- The Transition Plan will be provided to participants and if agreed to be signed by both the participant and the staff and signed copy to be provided to participant and saved in participant files
- The Transition Plan may be shared with participants representative, advocate and other relevant external/internal stakeholders with the participant's consent. These details **MUST** be documented in the Transition plan. Consent to share information and support plan with participants representative, advocate and other relevant external/internal stakeholders must be documented.
- Any Complaints, Issues identified during the Transition process must be acted according to the *FEEDBACK, COMPLIMENTS AND COMPLAINTS POLICY AND PROCEDURE*



Service Exit Flowchart





DUTY OF CARE POLICY AND PROCEDURE

POLICY AMENDMENT RECORD		
DATE	BRIEF DESCRIPTION OF AMENDMENT	AUTHORISED

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