



Vita Felix Group T/A Allora Options
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Trading Name: Allora Options
Entity Name: Vita Felix Group Pty Ltd
ABN: 81 656 727 534
ACN: 656 727 534

NDIS Registration Groups:

- Behaviour Support - 0110
- Development of life skills – 0117
- Early childhood intervention – 0118
- Therapeutic Supports – 0128

Date of plan: 21.09.2023
Period: 2023 – 2024
Review date: January 2025 (if objectives have been met, review will be conducted earlier)

Reason for updated plan:

A comprehensive strategic direction was completed on the 19/01/2023, which encompassed the goals of what we wanted to achieve as an organisation as well as a clear plan on how to achieve these goals. On reviewing the previous plan, it was confirmed that all goals had been achieved within 6-months of the 12-month plan. This new strategic direction has been completed with input of all key staff members including:

1. The Managing Director
2. Business Advisor
3. All Managers
4. Clinical Leads
5. All Business Support team members

**About Allora Options:
 Current Personnel:**

Current Policies and Procedures

- Allora Options Utilizes Centro Assist for all Policies and Procedures.

Budgets & Costings:

Organisational	Business Support
Budget	Marketing Recruitment Budget Estimate 20232024.xlsx

Organisational Alignment with the National Standards for Disability Services:

Allora Options is committed to uphold the National Standards for Disability Services. Allora recognises these standards, and our strategic direction and business plan has been developed to align with the six National Standards.

1. **Rights:** The service promotes individual rights to freedom of expression, self-determination and decision-making and actively prevents abuse, harm, neglect, and violence.
2. **Participation and Inclusion:** The service works with individuals and families, friends, and carers to promote opportunities for meaningful participation and active inclusion in society.
3. **Individual Outcomes:** Services and supports are assessed, planned, delivered, and reviewed to build on individual strengths and enable individuals to reach their goals.
4. **Feedback and Complaints:** Regular feedback is sought and used to inform individual and organisation-wide service reviews and improvement.
5. **Service Access:** The service manages access, commencement and leaving, a service in a transparent, fair, equal, and responsive way.
6. **Service Management:** The service has effective and accountable service management and leadership to maximise outcomes for individuals.

Rights:

The intent of this standard is to promote ethical, respectful, and safe service delivery which meets, if not exceeds, legislative requirements and achieves positive outcomes for people with disability. The Human Rights principles are relevant across all the standards and each standard supports the achievement of basic rights. This standard has a focus on rights such as self-determination, choice, privacy and freedom from discrimination.

The standard recognises people's inherent right to freedom of expression and the right to make decisions about and exercise control over their own lives. It reinforces the fundamental right of people with disability to have respect and dignity. This includes the dignity of risk - the right to choose to take some risks in life.

The standard acknowledges the risks of harm, neglect, abuse, or violence which some people with disability may face when using services or supports. The standard highlights the roles for services and supports, families, friends, carers, and advocates in reducing these risks. The standard promotes individual rights and individual and service responsibility.

Allora Options implements this service standards across their Policies, Procedures, and organisation by doing the following:

- Allora Options, personnel treat individuals with dignity and respect.
- Allora Options, personnel recognise and promote individual freedom of expression.
- Allora Options supports active decision-making and individual choice including the timely provision of information in appropriate formats to support individuals, families, friends, and carers to make informed decisions and understand their rights and responsibilities.
- Allora Options provides support strategies that are based on the minimal restrictive options and are contemporary, evidence-based, transparent, and capable of review.
- Allora Options has preventative measures in place to ensure that individuals are free from discrimination, exploitation, abuse, harm, neglect, and violence.
- Allora Options addresses any breach of rights promptly and systemically to ensure opportunities for improvement are captured.
- Allora Options supports individuals with information and, if needed, access to legal advice and/or advocacy.
- Allora Options recognises the role of families, friends, carers, and advocates in safeguarding and upholding the rights of people with disabilities.
- Allora Options keeps personal information confidential and private.

Participation and Inclusion:

The intent of this standard is to promote the connection of people with disability with their families, friends and chosen communities. It also requires that services work together with individuals to enable their genuine participation and inclusion.

This standard recognises the role that services can play in enabling the contribution and inclusion of people with disability and their valued participation in the community including work and learning. In meeting this standard, Allora Options will actively support and encourage individuals to connect with family and friends and to feel included in their chosen communities. This should be based on an individual's interests, identity, heritage and aspirations. Importantly, the focus on 'valued role' needs to be one of the individual's choosing. Allora Options will also work with the wider community to promote participation and inclusion.

Allora Options will implement this service standards across their Policies, Procedures and organisation by doing the following:

- Allora Options actively promotes a valued role for people with disability in public and private life.
- Allora Options works together with individuals to connect to family, friends and their chosen communities.
- Allora Options personnel understand, respect and facilitate individual interests and preferences, in relation to work, learning, social activities and community connection over time.
- Where appropriate, Allora Options service works with an individual's family, friends, carer or advocate to promote community connection, inclusion and participation.
- with other organisations and community members to support individuals to actively participate in their community.
- Allora Options uses strategies that promote community and cultural connection for Aboriginal and Torres Strait Islander people.

Individual Outcomes:

The intent of this standard is to promote person-centred approaches to service delivery whereby individuals lead and direct their services and supports. Allora Options services which are used by people with disability are flexible and tailored to each individual's strengths and needs and deliver positive outcomes. This includes an individual's disability as well as the need for service providers to competently recognise and respond to issues related to age, gender, culture, heritage, language, faith, sexual identity, relationship status and other relevant factors.

Achieving individual outcomes requires collaboration between the individual and Allora to ensure active choice and decision-making. This means joint effort based on mutual respect rather than the service making all the decisions. A focus on individual outcomes includes individuals and Allora working together to review progress against planned and measurable outcomes.

The standard also recognises the potential role, with the individual's consent, of families, friends, carers and advocates in planning, delivery and review. It encourages active dialogue between an individual, their family, friends, carers and/or advocates and a service regarding the nature of the service or supports provided while a focussing on the minimal restrictive options.

Allora Options will implement this service standards across their Policies, Procedures, and organisation by doing the following:

- Allora Options works together with an individual and, with consent, their family, friends, carer or advocate to identify their strengths, needs and life goals.
- Service planning, provision and review is based on individual choice and is undertaken together with an individual and, with consent, their family, friends, carer or advocate.
- Allora Options plans, delivers and regularly reviews services or supports against measurable life outcomes.
- Service planning and delivery is responsive to diversity including disability, age, gender, culture, heritage, language, faith, sexual identity, relationship status, and other relevant factors.
- Allora Options collaborates with other service providers in planning service delivery and to support internal capacity to respond to diverse needs.

Feedback and Complaints:

The intent of this standard is to ensure that both positive and negative feedback, complaints and disputes are effectively handled and seen as opportunities for improvement. To meet this standard, service providers are required to have clearly communicated and effective systems in place to address and resolve issues raised by individuals, families, friends, carers and advocates.

This standard recognises that robust and timely feedback, including compliments and complaints, is a key driver for continuous improvement. Services should have a range of opportunities to seek feedback from individuals ranging from day-to-day feedback, formal consultation & engagement, regular satisfaction surveys or consumer groups.

In addition, this standard recognises that people need to feel safe to make a complaint or provide negative feedback. This includes being able to access independent mechanisms for complaints, appeals or disputes without fear of adverse consequences or loss of service. The standard also includes being able to have access to advocates and independent information, support, advice and representation.

Allora Options will implement this service standards across their Policies, Procedures and organisation by doing the following:

- Individuals, families, friends, carers and advocates are actively supported to provide feedback, make a complaint or resolve a dispute without fear of adverse consequences.
- Feedback mechanisms including complaints resolution, and how to access independent support, advice & representation are clearly communicated to individuals, families, friends, carers and advocates.

- Complaints are resolved together with the individual, family, friends, carer or advocate in a proactive and timely manner.
- Allora Options seeks and, in conjunction with individuals, families, friends, carers and advocates, reviews feedback on service provision and supports on a regular basis as part of continuous improvement.
- Allora Options develops a culture of continuous improvement using compliments, feedback and complaints to plan, deliver and review services for individuals and the community.
- Allora Options effectively manages disputes.

Service Access:

The intent of this standard is to ensure that access to services and supports is fair, equal, and transparent so that, individuals are supported when services are not available and barriers to access are identified and removed. The standard applies across service entry or commencement, service use and, where relevant, exit or leaving a service.

Access to services and supports is dependent on a range of factors, including location; an individual's identified needs; and the resource capacity of a service.

This standard recognises that individuals should be supported to understand criteria and processes regarding access to, and use of, a service. This also includes clear explanations when a service is not available to an individual and referral to alternative service options.

Allora Options will implement this service standards across their Policies, Procedures and organisation by doing the following:

- Allora Options systematically seeks and uses input from people with disability, their families, friends, and carers to ensure access is fair and equal and transparent.
- Allora Options provides accessible information in a range of formats about the types and quality of services available.
- Allora Options develops, applies, reviews and communicates commencement and leaving a service.
- Allora Options develops, applies and reviews policies and practices related to eligibility criteria, priority of access and waiting lists.
- Allora Options monitors and addresses potential barriers to access.
- Allora Options provides clear explanations when a service is not available along with information and referral support for alternative access.

- Allora Options collaborates with other relevant organisations and community members to establish and maintain a referral network.
- Allora Options is actively looking at ways to increase access to service provision and attract industrial talent through various recruitment campaigns.

Service Management:

The intent of this standard is to ensure that services are managed effectively and efficiently. It requires services to be person-centred and to ensure flexibility to respond to individual strengths and needs. It also requires services to promote a culture of continuous improvement as a basis for quality service delivery.

A range of systems and processes are required to support quality service provision and these are reflected in the standard. The standard refers to the active involvement of people with disability, families, friends, carers and advocates in service and support planning, delivery and review. Support for organisational learning and skills development is considered integral to a culture of quality service delivery and continuous improvement. This includes support and training for staff and volunteers. Additionally, service delivery that is reflective in practice and based on contemporary evidence will support the best possible outcomes for individuals.

Adherence to workplace related legislative and regulatory frameworks is an expectation within the standard. This will support accountability through sound governance and enable services to be delivered in a safe environment by appropriately qualified and supervised personnel.

Allora Options will implement this service standards across their Policies, Procedures, and organisation by doing the following:

- Frontline staff, management and governing bodies are suitably qualified, skilled, and supported.
- Practice is based on evidence and minimal restrictive options and complies with legislative, regulatory, and contractual requirements.
- Allora Options documents, monitors, and effectively uses management systems including Work Health Safety, human resource management and financial management.
- Allora Options has monitoring feedback, learning and reflection processes which support continuous improvement.
- Allora Options has a clearly communicated organisational vision, mission and values which are consistent with contemporary practice.

- Allora Options has systems to strengthen and maintain organisational capabilities to directly support the achievement of individual goals and outcomes.
- Allora Options uses person-centered approaches including the active involvement of people with disability, families, friends, carers, and advocates to review policies, practices, procedures, and service provision.

Market analysis:

Barriers to entry:

Therapeutic Support / Behaviour support (Clinical Team):

- Personnel require to be registered.
- Must have an exceptional knowledge of the applicable legislation, both national and state jurisdiction.
- Must be willing to take on professional and personal risk due to scrutiny from the NDIS Commission.
- Cost of becoming NDIS registered.
- Lack of work force currently, able to deliver services.

Competition:

Therapeutic Support / Behaviour support (Clinical Team):

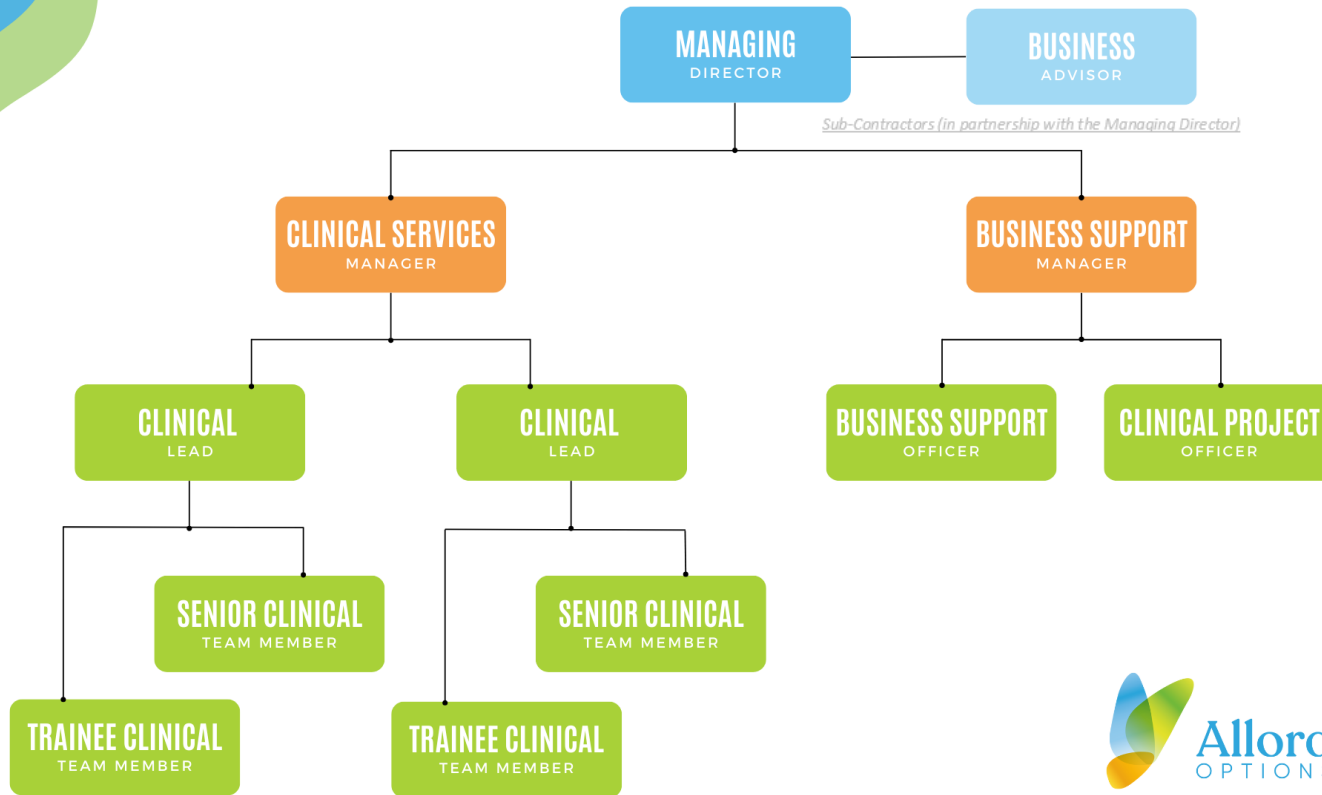
- Specialised organisations (like Allora) who deliver Allied Health supports.

Allora's competitive edge:

- Currently there are nil organisations who specialise in working with forensic disability and mental health cases regarding Allied Health supports. There are over 600 NDIS participants who have a forensic background, that are unable to be serviced due to many of the larger organisations not wanting to take on the organisational risk + scrutiny from the NDIS commission from servicing these participants.
- Due to Allora's experience and specific skillset and willingness to service the most complex individuals regardless of governmental scrutiny, Allora's Allied Health (clinical) Team, receives referrals from the NDIA/NDIS, DCP, ENU, SA-Health, and the department of corrections.
- Allora must focus heavily on staff retention, training, pay and culture to ensure sustainability.



COMPANY ORGANISATIONAL CHART





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SWOT Informed Strategic Direction / Business Plan:

Item	Actions	Who	Status
1. <i>Human Resources</i>	Immediate (0-3 months):		
	<ul style="list-style-type: none"> Sending out Exit feedback form 	MD	Complete
	<ul style="list-style-type: none"> Management culture shift to ensure they are willing to performance manage staff who are not meeting job description requirements. Updated handbook for each role, explaining the expectations for each role in relation to conditions of employment. Managers to have a handbook which explains their responsibilities in ensuring staff uphold the minimum expectations. 	MD	Complete
	<ul style="list-style-type: none"> Employment contracts and Job Descriptions have been updated and signed by all staff to ensure they meet current requirements 	MD	Complete
	<ul style="list-style-type: none"> Updated meeting agendas and meeting schedule 	MD / Senior Team	
	<ul style="list-style-type: none"> Organisational change instructions / process map + delegation of authority. Preventing rapid organisational change without consultation of team members, 	MD	Complete
	Medium term (3-6 months):		
	<ul style="list-style-type: none"> Flexible working arrangements articulated in handbook: <ul style="list-style-type: none"> 4-day working week (10-hour days – 4 x p/week). Flexible start times. 	MD Senior Team	Complete
	Long term (12 months):		
	<ul style="list-style-type: none"> Employ a qualified and an experienced HR Manager or outsource HR in the next 12 months. 	MD	
	Ongoing:		
	<ul style="list-style-type: none"> Utilisation of recruitment budget over the next 12 months as well as budget plan outlined above. 	Senior Team	
<ul style="list-style-type: none"> Keep utilising Employment Hero's functions for training, staff management, clinical supervision, and document tracking. 	All		

	<ul style="list-style-type: none"> Regular supervision for all personnel – minimum bi-monthly 	All	
	<ul style="list-style-type: none"> External supervision for proficient practitioners and above. 	CSM	
	<ul style="list-style-type: none"> Grow clinical team organically, don't cap growth if we have the potential to employ proficient practitioners. However, limit the amount of new core practitioners employed. 	Senior Team	
	<ul style="list-style-type: none"> Bonus structure for KPI achievement (ongoing) 	All	Complete
	<ul style="list-style-type: none"> Quarterly work functions. 	Senior Team	
2. Participant Service Provision	Immediate (0-3 months):		
	<ul style="list-style-type: none"> Send out feedback form to all stakeholders who have left our service 	MD	Complete
	<ul style="list-style-type: none"> Recruit PBS Practitioners to get waiting list down so that our service rapport is maintained. There must be a monthly recruitment campaign for senior clinicians ongoingly. No cap on how many people we can employ if they are suitable. 	BSM	
	<ul style="list-style-type: none"> Focus on quality PBS through ongoing training and supervision. This is paramount prior to any further expansion. 	CSM	Complete
	<ul style="list-style-type: none"> Implement Exit Feedback for all participants who leave our service to start collecting raw data for direct improvement. 	BSM	Complete
	<ul style="list-style-type: none"> New service agreement Terms and Conditions 	MD / BSM	Complete
	Medium term (3-6 months):		
	<ul style="list-style-type: none"> Allocating participants that are more suited to practitioners and vice versa, so that clients are receiving more in-depth knowledge and service. <ul style="list-style-type: none"> Staff to write a profile of their preferred clientele that they would like to work with and clients that they do not feel comfortable working with Possible risk rating system which determines quantitative risk. E.g., violence means 8 out of 10. No allocations above 6 should be allocated to new practitioners. 	BSM Senior Team	
	<ul style="list-style-type: none"> Monthly or Bi-Monthly Newsletters to clients and stakeholders as a way to advertise changes / actions from feedback to show that we are constantly improving service provision. 	BSM	
	Long term (12 months):		

	<ul style="list-style-type: none"> Review client management system within the next 12 months to ensure it is still aligning with business growth. 	Senior Team	
	<ul style="list-style-type: none"> Outsource some transition planning training for all clinicians (Outside of hospital & Correctional transitions). This will support participants in moving from one life stage to another (e.g., school to adulthood or one SIL to another). Smooth transitions can reduce stress and improve outcomes which is imperative for Service Provision 	MD / CSM	
	Ongoing:		
	<ul style="list-style-type: none"> Liaison with Government entities 	All	
	<ul style="list-style-type: none"> Training sessions for all staff to ensure we are acting on feedback received. 	Senior Team	
	<ul style="list-style-type: none"> Ensuring that participant retention is paramount. 	All	
	<ul style="list-style-type: none"> Continue to minimize RPs endorsed. 	MD / CSM	
	<ul style="list-style-type: none"> Involve participants and their families in the development of behavior support plans. Collaboration fosters trust and helps create more effective interventions. 	All	
<ul style="list-style-type: none"> Continue to embrace a person-centered approach to all supports. Understand each participant's unique needs, preferences, and goals. Customise interventions and support plans accordingly to ensure that services are individualised and meaningful. 	All		
3. Financial Management / Sustainability	Immediate (0-3 months):		
	<ul style="list-style-type: none"> Implement a clear performance management strategy for the team to ensure KPIs are met. This will include stating the roles and responsibilities for Clinical Leads and the Clinical Services Manger in relation to their delegation in ensuring financial sustainability. 		Complete
	<ul style="list-style-type: none"> Implement a comprehensive monthly budget for the business to abide by to increase profit turnover for the next financial year. Share this with senior team to roll out throughout departments. 	MD	Complete
	<ul style="list-style-type: none"> Ensure all outstanding invoices for clients with no funding are followed up with either the client, Plan Manager or NDIA to seek remuneration. 	BSM	In Progress
<ul style="list-style-type: none"> Develop a contingency plan (e.g., Disaster Management Plan) for unexpected financial challenges or emergencies. Having a plan in place will assist with a quick and effective response if unforeseen circumstances arise. 	MD / Kat	Complete	

	<ul style="list-style-type: none"> Develop Technology Request Forms for staff so that we reduce spending on unnecessary hardware and software, or items of poor quality. This ensures that the business is paying for what we need to sustain our staff, and not overspending on low quality items. 	BSM	Complete
	Medium term (3-6 months):		
	<ul style="list-style-type: none"> Develop a clear set of leave processes so that company KPI's can still be met while staff are on leave. Look at capping the number of staff members who can take leave at once to ensure continuation of supports. 	Senior Team	
	<ul style="list-style-type: none"> Plan for long-term sustainability by possibly diversifying funding sources. Explore grants, partnerships, or social impact investments to support behaviour support initiatives. 	Senior Team	
	<ul style="list-style-type: none"> Regularly review expenses and identify areas where cost reduction is possible without compromising the quality of services. Negotiate better deals with suppliers and vendors such as insurances, outsourced contractors etc. 	MD	
	Long term (12 months):		
	<ul style="list-style-type: none"> Review current outsourcing of staff e.g., payroll and IT to ensure this is still more sustainable than employing internally 	MD	
	<ul style="list-style-type: none"> Review KPI and bonus structure to ensure still in line with company growth and sustainability plan. 	MD	
	Ongoing:		
	<ul style="list-style-type: none"> All departments achieve their respective KPI's 	All	
	<ul style="list-style-type: none"> Maintain all current insurance policies so that we are covered for all unforeseen disasters / changes. 	MD	
	<ul style="list-style-type: none"> Focus on client retention and referrals to increase income flow. Happy clients can become your biggest community advocates. 	All	
	<ul style="list-style-type: none"> Involve all of senior team in financial decision making if applicable, as it provides a well-rounded set of opinions and facts that can contribute to a more informed decision. Team to do cost analysis together. 	Senior Team	
	4. Continuous Improvement	Immediate (0-3 months):	
<ul style="list-style-type: none"> Streamline our Developmental Programming / Clinical Resources Folders for PBS 		Senior Team	
<ul style="list-style-type: none"> Streamline and review complaints / compliments register to be solely on Centro Assist 		Senior Team	
<ul style="list-style-type: none"> Recruit PBS Practitioners to get waiting list down so that our service rapport is maintained. 		BSM	

	<ul style="list-style-type: none"> Update our internal auditing plan and put in controls within the delegation of authority register and staff handbook to ensure everyone understands their role and responsibilities for auditing. 	MD	Complete
	<ul style="list-style-type: none"> Simplify business model 	All	Complete
	<ul style="list-style-type: none"> Implement Exit Feedback to start collecting raw data for direct improvement. 	BSM	Complete
	Medium term (3-6 months):		
	<ul style="list-style-type: none"> Saving Conventions and new SharePoint process to be finalized and implemented after audit (not a major priority – however this needs to be focused on in 2024). 	All	In Progress
	<ul style="list-style-type: none"> Host another Feedback Consumer Forum to ensure continuous service provision improvement. 	BSM	
	<ul style="list-style-type: none"> Implement “Peer Supervision” for all staff to give an opportunity for everyone to learn from each other. Look into those with specialisations to create and run “Info Sessions” so we can all get the best from one another. 	Senior Team	
	<ul style="list-style-type: none"> Monthly or Bi-Monthly Newsletters to clients and stakeholders as a way to advertise changes / actions from feedback to show that we are constantly improving service provision. 	BSM	
	<ul style="list-style-type: none"> Collect data from staff showcasing ideal training for them to formulate a training plan for all staff, ensuring the training aligns with job roles and business mission. 	BSM	
	<ul style="list-style-type: none"> Undertake a diversity project in 2024 to put a focus on cultural awareness and neurodiversity advocacy. 	BSM / Kat	
	Long term (12 months):		
	<ul style="list-style-type: none"> Review client management system within the next 12 months to ensure it is still aligning with business growth. 	MD	
	<ul style="list-style-type: none"> Explore more options for expansion out to Eyre Peninsula as there is a service gap for both PBS and SC there and is in line with our current intrastate service model. 	MD	
	<ul style="list-style-type: none"> Look at having a formal “<i>Mental Health First Aider</i>” instead of a casual idea of who we can speak to within the building. ST has expired MH First Aid Certificate so can no longer be self-named person in building to speak to. 	MD	
	<ul style="list-style-type: none"> Develop a Reconciliation Action Plan before expansion to remote areas / travelling on Country. This showcases an understanding and appreciation for our multicultural nation 	Senior Team	
Ongoing:			

	<ul style="list-style-type: none"> Get waitlist down and improve wait times. 	Senior Team	
	<ul style="list-style-type: none"> Look at how we can utilise current systems to do more, so that we are working with what we have before outsourcing and making processes convoluted. 	All	
	<ul style="list-style-type: none"> Performance management and culture surveys for all staff, as improvement starts within the inside of a business. Look at showcasing this data to staff to show we are listening through a “Pulse Presentation”. 	Senior Team	
5. <i>Disaster Management & business continuity</i>	12-month plan:		
	<ul style="list-style-type: none"> Please current business Disaster Management and business continuity Plan; update every 12 months. 	MD / Kat	In Progress
6. <i>Recruitment Strategy (PBS)</i>	Immediate (0-3 months):		
	<ul style="list-style-type: none"> Run a rolling job advertisement for proficient > PBS Practitioners from September until April (excluding Holiday period) 	BSM	In Progress
	<ul style="list-style-type: none"> Increase relationships with universities in Adelaide to target graduates for early recruitment. 	BSM	In Progress
	Medium term (3-6 months):		
	<ul style="list-style-type: none"> Potential to explore the Eyre Peninsula, and the riverland, in mid-2024. This would be targeted for recruitment also. 	MD / CSM / BSM	
	<ul style="list-style-type: none"> Increase engagement and following on social media for word of mouth recruiting throughout 2024. 	BSM	
	<ul style="list-style-type: none"> Look at an Allora Options video or testimonial showing “<i>what we do and who we are</i>” to increase interest in applying for roles. 	Senior Team	
	<ul style="list-style-type: none"> Continue to run waitlist down by making contact monthly to ensure the clients still need to be on the waitlist so we can recruit accurately for hours on list. 	BSM	In Progress
	<ul style="list-style-type: none"> Undertake a diversity project in 2024 to put a focus on cultural awareness and neurodiversity advocacy. 	BSM / Kat	
	Long term (12 months):		
	<ul style="list-style-type: none"> Employ a qualified and an experienced HR Manager in the next 12 months and send key members of Allora’s personnel to obtain a short course qualification in HR Management https://www.aim.com.au/human-resources/courses/hr-essentials 	MD	

	<ul style="list-style-type: none"> Look at Implementing an employee referral program to encourage current staff to recommend qualified candidates. Offer incentives to employees whose referrals lead to successful hires? Not limit our recruitment capacity for proficient practitioners. Look at working from home arrangements for personnel. Recruit up to x 5 clinical team members in the next 12-months, who are core or below (depending on the development of senior practitioners). No cap of proficient practitioners 	MD	
	Ongoing:		
	<ul style="list-style-type: none"> Continue to define and streamline company mission, value, and culture to create a compelling and comprehensive brand. 	Senior Team	
	<ul style="list-style-type: none"> Continue to develop succession plan and clear development for advancement so that we are attractive to ambitious candidates. 	Senior Team	
7. Marketing Strategy	Immediate (0-3 months):		
	<ul style="list-style-type: none"> Host networking event in the Riverland to mark our place as a service provider AND recruiters. 	BSM	In Progress
	<ul style="list-style-type: none"> Install front of house signage so street walkers know who is in the building. Creates organic marketing – Adelaide and Barmera. 	BSM	In Progress
	<ul style="list-style-type: none"> Hold on PBS marketing until waitlist goes down / recruitment has commenced and maintain a focus on SC marketing. Tailor advertisements to Support Coordination. 	BSM	In Progress
	<ul style="list-style-type: none"> Finalise website inclusive of staff information so that we are marketing our skilled set of multidisciplinary team members. 	BSM	In Progress
	Medium term (3-6 months):		
	<ul style="list-style-type: none"> Look at an Allora Options video or testimonial showing “<i>what we do and who we are</i>” to increase engagement and attention to business. 	Senior Team	
	<ul style="list-style-type: none"> Increase engagement and following on social media for word-of-mouth advertising throughout 2024. 	BSM	
	<ul style="list-style-type: none"> Monthly or Bi-Monthly Newsletters to clients and stakeholders as a way to advertise changes / actions from feedback to show that we are constantly improving service provision. 	BSM	
	<ul style="list-style-type: none"> Finish Therapy Room to advertise as a competitive edge for both PBS and SC. 	BSM / Kat	
<ul style="list-style-type: none"> Continue to define and streamline company mission, value, and culture to create a compelling and comprehensive brand. 			

	Long term (12 months):		
	<ul style="list-style-type: none"> Look at market analysis to identify areas within the state that are under serviced, or the market is not flooded so we can look to expand there. This would ensure a good % of market belonged to Allora. Travel to and communicate with these areas. 	BSM	
	<ul style="list-style-type: none"> Develop a Reconciliation Action Plan before expansion to remote areas / travelling on Country. This showcases an understanding and appreciation for our multicultural nation which in turn is good market strategy. 		
	Ongoing:		
	<ul style="list-style-type: none"> Maintain relationships with government bodies as this is organic marketing within these spaces. Maintain positive rapport by providing quality and ethical services. 	All	
	<ul style="list-style-type: none"> Continue to advertise and deliver Allora products with QR code attached to market ourselves and provide mindfulness toys. 	BSM	
	<ul style="list-style-type: none"> Have an inviting and accessible office with clear office hours for clients and stakeholders to drop in. This shows an “open door” mentality with a safe space for clients to come to. 	All	
8. IT (Computers & Software)	Immediate (0-3 months):		
	<ul style="list-style-type: none"> Enable 2 factor authentication to SPLOSE for ALL team members to ensure data security. 	Senior Team	
	<ul style="list-style-type: none"> Have a back-up Hard Drive stored in a safe space offsite for all client and clinical data. 	MD	Complete
	<ul style="list-style-type: none"> Look at how we can utilise current systems to do more, so that we are working with what we have before outsourcing and making processes convoluted. 	Senior Team	
	<ul style="list-style-type: none"> Streamline and review complaints / compliments register to be solely on Centro Assist 	Senior Team	In Progress
	<ul style="list-style-type: none"> Develop Technology Request Forms for staff so that we reduce spending on unnecessary hardware and software, or items of poor quality. This ensures that the business is paying for what we need to sustain our staff, and not overspending on low quality items. 	BSM	Complete
	Medium term (3-6 months):		
	<ul style="list-style-type: none"> Review current outsourcing of staff e.g., IT to ensure this is still more sustainable than employing internally. 	MD	
	Long term (12 months):		
	<ul style="list-style-type: none"> Review client management system within the next 12 months to ensure it is still aligning with business growth. 	MD	
	Ongoing:		

	<ul style="list-style-type: none"> Continue to use new saving conventions so new SharePoint does not slow down / stop working. 	All	
	<ul style="list-style-type: none"> Up to date training for all staff on systems quarterly. 	All	
9. Executive Overall Plan	12-month plan:		
	<ul style="list-style-type: none"> Diversify income: <ul style="list-style-type: none"> Supervisions Training packages Strategical profit investments 	MD	In Progress

This Business Plan has been created and actioned against the current NDIS Practice Standards (located [here](#)) in which Allora Options' policies and procedures are structured by.

The relevant business actions and goals have been determined from the below:

10. NDIS Compliance Strategy – Our <u>Goal Outcomes</u>:	CORE Module:		
	<ul style="list-style-type: none"> Each participant's legal and human rights are understood and incorporated into everyday practice. 	All	
	<ul style="list-style-type: none"> Communication with each participant about the provision of supports and confidentiality policies is responsive to their needs and is provided in the language, mode of communication and terms that the participant is most likely to understand. 	All	
	<ul style="list-style-type: none"> Each participant's right to practice their culture, values and beliefs while accessing supports is supported. 	All	
	<ul style="list-style-type: none"> Consistent processes and practices are in place that respect and protect the personal privacy and dignity of each participant. 	All	
	<ul style="list-style-type: none"> Each participant's right to access an advocate (including an independent advocate) of their choosing is supported, as is their right to have the advocate present. 	All	
	<ul style="list-style-type: none"> Allegations and incidents of violence, abuse, neglect, exploitation or discrimination, are acted upon, each participant affected is supported and assisted, records are made of any details and outcomes of reviews and investigations (where applicable) and action is taken to prevent similar incidents occurring again. 	All	

Provider Governance & Operational Management:			
	<ul style="list-style-type: none"> Each participant’s support is overseen by robust governance and operational management systems relevant (proportionate) to the size, and scale of the provider and the scope and complexity of supports delivered. 	All	
	<ul style="list-style-type: none"> The skills and knowledge required for the business to provide supports effectively are identified, and relevant training is undertaken by members of the business to address any gaps. 	All	
	<ul style="list-style-type: none"> Ensure strategic and business planning considers legislative requirements, organisational risks, other requirements related to operating under the NDIS (for example Agency requirements and guidance), participants’ and workers’ needs and the wider organisational environment. 	All	
	<ul style="list-style-type: none"> The performance of management, including responses to individual issues, is monitored by the governing body to drive continuous improvement in management practices. 	All	
	<ul style="list-style-type: none"> The provider is managed by a suitably qualified person with clearly defined responsibility, authority, and accountability for the provision of supports and there is a documented system of delegated responsibility and authority to another suitable person in the absence of the manager. 	All	
	<ul style="list-style-type: none"> Risks to the organisation, including risks to participants, financial and work health and safety risks, and risks associated with provision of supports are identified, analysed, prioritised, and treated. 	All	
	<ul style="list-style-type: none"> Where relevant, the risk management system includes measures for the prevention and control of infections and outbreaks and supports are provided in a way that is consistent with the risk management policy and system. 	All	
	<ul style="list-style-type: none"> Our quality management system supports continuous improvement, using outcomes, risk related data, evidence-informed practice and feedback from participants and workers. 	All	
	<ul style="list-style-type: none"> Each participant has knowledge of and access to the our complaints management and resolution system. Complaints and other feedback made by all parties are welcomed, acknowledged, respected and well-managed. 	All	
	<ul style="list-style-type: none"> Each participant’s support needs are met by workers who are competent in relation to their role, hold relevant qualifications, and who have relevant expertise and experience to provide person-centered support. 	All	
Provision of Supports and Environment:			

	<ul style="list-style-type: none"> Each participant has access to timely and appropriate support without interruption. 	All	
	<ul style="list-style-type: none"> Each participant accesses the most appropriate supports that meet their needs, goals, and preferences. 	All	
	<ul style="list-style-type: none"> Each participant is actively involved in the development of their support plans. Support plans reflect participant needs, requirements, preferences, strengths, and goals, and are regularly reviewed. 	All	
	<ul style="list-style-type: none"> Each participant has a clear understanding of the supports they have chosen and how they will be provided. 	All	
	<ul style="list-style-type: none"> Each participant accesses responsive, timely, competent, and appropriate supports to meet their needs, desired outcomes, and goals. 	All	
	<ul style="list-style-type: none"> Each participant experiences a planned and coordinated transition to or from the provider. 	All	
	<ul style="list-style-type: none"> Each participant accesses supports in a safe environment that is appropriate to their needs. 	All	
	Specialist Behaviour Supports Module:		
	<ul style="list-style-type: none"> Each participant accesses behaviour support that is appropriate to their needs which incorporates evidence-informed practice and complies with relevant legislation and policy frameworks. 	All	
	<ul style="list-style-type: none"> Each participant is only subject to a restrictive practice that meets any state and territory authorisation (however described) requirements and the relevant requirements and safeguards outlined in Commonwealth legislation and policy. 	All	
	<ul style="list-style-type: none"> Each participant's quality of life is maintained and improved by tailored, evidence-informed behaviour support plans that are responsive to their needs. 	All	
	<ul style="list-style-type: none"> Each participant's behaviour support plan is implemented effectively to meet the participant's behaviour support needs. 	All	
	<ul style="list-style-type: none"> Each participant has a current behaviour support plan that reflects their needs, improves their quality of life, and supports their progress towards positive change. The plan progresses towards the reduction and elimination of restrictive practices, where these are in place for the participant. 	All	
<ul style="list-style-type: none"> Each participant that is subject to an emergency or unauthorised use of a restrictive practice has the use of that practice reported and reviewed. 	All		

	<ul style="list-style-type: none"> Each participant with an immediate need for a behaviour support plan receives an interim behaviour support plan which minimises the risk to the participant and others. 	All	
	Early Childhood Supports Module:		
	<ul style="list-style-type: none"> Each child participant accesses supports that promote and respect their legal and human rights, support their development of functional skills, and enable them to participate meaningfully and be included in everyday activities with their peers. 	All	
	<ul style="list-style-type: none"> Each family receives family-centred supports that are culturally inclusive, responsive, and focus on their strengths. 	All	
	<ul style="list-style-type: none"> Each participant accesses supports that engage their natural environments and enable inclusive and meaningful participation in their family and community life. 	All	
	<ul style="list-style-type: none"> Each participant receives coordinated supports from a collaborative team comprising their family, the provider, and other relevant providers, to facilitate their development and address the family's needs and priorities. 	All	
	<ul style="list-style-type: none"> Each participant receives supports that are outcome-based and goal-focused. 	All	
	Specialist Support Coordination Module:		
	<ul style="list-style-type: none"> Each participant receiving specialised support coordination receives tailored support to implement, monitor and review their support plans and reduce the risk and complexity of their situation. 	All	
	<ul style="list-style-type: none"> Each participant exercises meaningful choice and control over their supports and maximises the value for money they receive from their supports. 	All	
<ul style="list-style-type: none"> Each participant receives transparent, factual advice about their support options which promotes choice and control. 	All		

Position Delegation of Authority Register

Position: Managing Director

Authorisation approved by: Managing Director

Date of authorisation: 21/09/2023

Review date of authorisation: As required.

- Strategic planning for organisation.
- Organisational budget, design, and implementation.
- All business operations.
- Approving payroll.
- Overall policy development.
- Developing strategic partnerships to diversify income.
- Terminating staff who are outside of their probationary period.
- Leading organisational change.
- Seizing services with participants.
- Making rapid organisational changes in the event of a compliance and/or unforeseen circumstances (i.e., systems malfunctions/change of legislation).
- Overseeing all compliance investigations where there is a risk to QSC enforcement actions and/or reputational risks with key stakeholders.
- Approving services to be completed outside of funding.
- Approving BAS and key financial decisions (i.e., Tax).
- Approving all purchases over \$100.
- Approving all provider payment requests.
- Overseeing all aspects of the organisation, including overall authority in the below delegations.

Not in scope:

- Making major organisational changes without consultation when there is minimal risk to business continuity / compliance concerns.

Position: Business Advisor

Authorisation approved by: Managing Director

Date of authorisation: 21/09/2023

Review date of authorisation: As required.

- Attending quarterly accounting meetings and advising in relation to accounting and business needs (i.e., budgets/strategical direction/new markets/diversification of income/strategic investments).
- Approving payroll and bonuses if the managing director is unable to.
- Approving of services to be conducted outside of funding if managing director is unable to.

- Approving purchases if managing director is unable to.
- Approving BAS and key financial decisions if the managing director is unable to.
- Approving all provider payment requests if managing director is unable to.
- Approval of termination of staff outside of their probationary period in collaboration with the department managers.
- Approving and making rapid organisational change in collaboration with the department managers in the event the managing director is unable to fulfill their responsibility.
- Appointing a new Company Director in collaboration with the department managers if the managing director is unable to fulfill their responsibilities. However, the final decision on who will be appointed as the company director will be with the business advisor.
- The business advisor has been appointed to ensure overall continuity and business operations in the event the managing director is unable to fulfill their responsibility.

Not in scope:

- If the Managing Director can fulfill their responsibilities the Business advisor will not be required for any formal decision making in the day-to-day operations.
- Managing day-to-day operations in the event the managing director can fulfill their judicial responsibilities.
- Managing overall day-to-day operations or overseeing the service provision of NDIS participants without the involvement of department managers, even in the event of the managing director unable to fulfill their responsibility. This responsibility will lay with the 2IC of the organisation.

Position: Clinical Services Manager

Authorisation approved by: Managing Director

Date of authorisation: 21/09/2023

Review date of authorisation: As required.

- 2IC of the organisation
- Reviewing and updating the clinical team policies and processes as needed (no oversight required from the managing director).
- Ensuring all aspects of the Behaviour Support and Restrictive Practices (2018), practice standards and other relevant legislation are always met.
- Delegating tasks to Clinical Leads and Team members within their department.
- Overall oversight and management of PBS Due dates.
- Clinical supervision of Clinical Leads.
- Succession planning + signing off practitioner's capability assessments, in collaboration with the team leaders and managing director.
- Approval of hiring clinical team department personnel with a salary of up to \$85,000. Can negotiate accordingly with practitioners who are under this salary, up to a maximum of \$85,000 p/annum, this does not include student or new graduate practitioners.
- Approving policy and process updates from the support coordination department, in consultation with the department manager.
- Reviewing and updating organisational policies and processes for the organisation (outside of their scope) when delegated to do so or if required.

- Calculating organisational KPIs alongside the business manager or managing director.
- Leading and overseeing all organisational investigations including (Reportable Incidents, Complaints, Incidents and WH&S Incidents) and delegating investigations to team members as required.
- Overseeing and submitting (or delegating a submission) of all reportable incidents (relevant to the org - and 3rd party).
- Overseeing all Internal audits.
- Can authorise instant dismissal of all team members in the event of a serious breach or misconduct against the NDIS code of conduct or employment contract (i.e., fraud/abuse).
- Approving purchases (\$100 monthly allowance - maximum) for the following items (clinical assessment resources which are being immediately used; therapeutic equipment which will be used; stationary/paper/basic computer equipment).
- Running Clinical Lead Meetings.
- Can reschedule supervisions.
- Maintaining own case notes and ensuring department case notes are adequately completed.
- Approve timesheets and leave.
- Ensuring clinical supervisions are completed.
- Other relevant or non-relevant task / ad hoc requirement which may be directed by the managing director.
- Delegations of all positions other than the managing director and business advisor.

Not in scope:

- Cannot approve any services to be completed outside of funding under any circumstances.
- Approving payroll.
- Approving key financial decisions i.e., BAS/Tax.
- Changing employment contract terms without approval of the managing director.
- Negotiating key strategic partnerships.
- Authorising new system changes.
- Seizing services
- Terminating employment contracts after probationary periods - unless it is for a serious breach or misconduct of their employment contract and/or NDIS code of conduct.
- Working outside the relevant rules and legislation.
- Making organisational financial decisions.
- Approving the payment of bonuses.

- Updating payment terms.

Position: Business Support Manager

Authorisation approved by: Managing Director

Date of authorisation: 21/09/2023

Review date of authorisation: As required.

- Referral management.
- Managing all aspects of accounts receivable and sent (i.e., processing invoices and ensuring payments have been received)
- Managing receipt uploads to Xero.
- Complaints management (2IC).
- Investigations 2IC for Complaints, Incidents and WH&S Incidents.
- Managing all marketing and recruitment campaigns.
- Administration and file management.
- Assisting with strategic and operational planning (including disaster and business planning).
- Spending recruitment and marketing budget, accordingly, ensuring outcomes are delivered.
- Internal auditing when delegated or in the scope of the business support team (i.e., participant files / staff documentation).
- Performance Management of staff + terminating staff who are on their probationary period, with one of the relevant managers' signature or managing director.
- Onboarding and inducting new team members + processing/checking documentation.
- Onboarding new participants + service agreements + compliance documents + PRODA Service Bookings
- Office maintenance
- Telecommunications/Internet + IT set ups.
- Scheduling organisational Training.
- Organising events + attending expos.
- Other relevant or non-relevant task / ad hoc requirement which may be directed by the managing director.
- Calculating organisational KPIs
- Approving ad hoc purchases up to a maximum \$100 p/month for stationery and/or IT equipment for the organisation.
- Delegating tasks to team members as required.
- Other relevant or non-relevant task / ad hoc requirement which may be directed by the managing director.
- Approve timesheets and leave.
- Delegation of authority for the Business Support Officer.

Not in scope:

- Other roles and responsibilities.
- Clinical Services Manager – not in scope description.
- Leading investigations if not delegated.
- Changing strategic direction plans if not delegated to.
- Negotiating employment terms with team members.

Position: Clinical Team Project Officer

Authorisation approved by: Managing Director & Business Manager

Date of authorisation: 21/09/2023

Review date of authorisation: As required.

- Reviewing behaviour support plans and signing off on RPs.
- Ability to step into a clinical lead position and/or proficient practitioners' position when applicable.
- Developing & implementing projects which are delegated.
- Developing and implementing strategic plans and other plans which are delegated.
- Developing and implementing policy and procedural changes which are delegated.
- Complaints management when required.
- Overseeing reportable Incidents when required.
- Conducting investigations when required
- Reportable incident 2IC.
- Proposing policy and process updates as needed.
- Investigations 2IC for Complaints, Incidents and WH&S Incidents when delegated to do so.
- Onboarding and inducting new team members + processing/checking documentation when delegated.
- Other relent or non-relevant task / ad hoc requirement which may be directed by the managing director.
- Onboarding new participants + service agreements + compliance documents + PRODA Service Bookings when delegated.

Not in scope:

- Other roles and responsibilities.
- Clinical Services Manager – not in scope description.
- Changing policies and procedures independently.
- Completing reportable incident investigations.

Position: Clinical Lead

Authorisation approved by: Managing Director & Clinical Services Manager

Date of authorisation: 21/09/2023

Review date of authorisation: As required.

- Lead all behaviour support processes for their regions.
- Be a proficient or above practitioner.
- Ensuring all aspects of the Behaviour Support and Restrictive Practices (2018), practice standards and other relevant legislation are always met in their team.
- Reviewing and updating the clinical team policies and processes when delegated to do so.
- Scheduling Team meetings and supervision sessions with team members.
- Train and assist team members, report positives and concerns to clinical services manager.
- Succession plan with key team members.
- Proposing policy / process updates as needed.
- Put practitioners forward for advancement through the capability assessment.
- Overall oversight of their teams' due dates and compliance.
- Ensuring team supervisions are completed and saved accordingly.
- Support team members with all aspects of PBS/Therapeutic approaches.
- Conducting all types of organisational investigations including (Reportable Incidents, Complaints, Incidents and WH&S Incidents).
- Supporting team members to complete their capability assessment.
- All authority of the business support manager (if required).
- All authority of the clinical project officer (if required).
- All authority of the support coordination manager (if required).
- Running team meetings and clinical supervision with team members.
- Able to conduct all audits if delegated.
- Maintaining own case notes and ensuring team case notes are adequately completed.
- Raising concerns with staff regarding training and development (not performance management). Ensuring notes are kept when conversations occur.
- Authorising personnel to conduct CARL notifications and/or ASU notifications.
- Authorizing low – medium WHS Initial home risk assessment for students are workers.
- Updating Clinical register

- Make recommendations to Clinical Services Manager around allocations of new Participants.
- Approval of staff/individual trainings (without cost) and up to 2 hours with a maximum of once a quarter.

Not in scope:

- Performance management of staff.
- Cannot delegate investigations to team members.
- Negotiating employment contracts and pay.
- Approving timesheets and leave.
- Rescheduling supervisions.
- Seizing services with participants.
- Approving purchases.
- Responding to the NDIS commission without approval or making contact with the NDIS commission without approval.
- Submitting (or delegating a submission) of all reportable incidents (relevant to the org - and 3rd party), this needs to be approved by the managing director and/or clinical services manager.
- Approval of trainings (with cost) or more frequently than above.
- Approval of referrals.

Position: Senior Clinical Team Member

Authorisation approved by: Team Leaders

Date of authorisation: 21/09/2023

Review date of authorisation: As required.

- Review of plans without Restrictive Practices and identified as low – medium risk. To be determined by Team Leaders.
- Review of funding/recommendations letters, NDIA review reports, Functional Capacity Assessments (depending on skills/qualifications)
- Informal supervision to developing cores and core level (day to day questions) Significant risk to be escalated to Team Leader.
- Formal supervision when delegate to do so
- Attending case conference when Team Leader is not available (only if absolutely required)
- If exploring succession planning and wanting to advance, Proficient to run regional meetings.
- Train and assist team members, report positives and concerns to Team Lead or above.
- Proposing policy / process updates as needed.
- Able to conduct all audits if delegated.
- Able to conduct investigations if delegated to.
- Can step into a Clinical Lead role if required to.

- Maintaining own case notes and ensuring team case notes are adequately completed.
- Completing all work (including signing off of RPs) for their case load independently and within minimal oversight

Not in scope:

- Final sign off of plans with Restrictive Practices
- Performance management of staff.
- Cannot delegate investigations to team members.
- Negotiating employment contracts and pay.
- Approving timesheets and leave.
- Rescheduling supervisions.
- Seizing services with participants.
- Approving purchases.
- Updating Clinical register
- Raising concerns with staff regarding training and development (not performance management). Ensuring notes are kept when conversations occur.
- Authorizing personnel to conduct CARL notifications and/or ASU notifications.
- Responding to the NDIS commission without approval or making contact with the NDIS commission without approval.
- Submitting (or delegating a submission) of all reportable incidents (relevant to the org - and 3rd party), this needs to be approved by the managing director and/or clinical services manager.
- Succession planning with key team members.
- Put practitioners up for advancement through the capability assessment.
- Overall oversight of their teams' due dates and compliance.
- Running team meetings and clinical supervision with team members (unless delegated or succession planning)

Position: Clinical Team Members

Authorisation approved by: Clinical Team Leaders

Date of authorisation: 21/09/2023

Review date of authorisation: As required.

- Providing informal supports to developing Core level practitioner and students.
- Ensuring Case load and case notes are up to date for selves.
- Assisting students with learning opportunities (if determined safe by Clinical Leads and/or Clinical Services Manager as per WHS home risk assessment)
- Informal advice with systems to students and developing Core level practitioners

- Assisting Developing Cores and students in resource development and developmental programming.

Not in scope:

- As above
- Charging for or reviewing any documents
- Endorsing RPs

Position: Trainee (new entry) Clinical Team Members

Authorisation approved by: Clinical Team Leaders

Date of authorisation: 09/08/2023

Review date of authorisation: 09/08/2024

- Ensuring Case load and case notes are up to date for selves.

Not in scope:

- As above

Position: Business Support Officer

Authorisation approved by: Managing Director

Date of authorisation: 21/09/2023

Review date of authorisation: As required.

- Referral management in collaboration with the Business Manager
- Assisting with aspects of accounts receivable and sent (i.e., processing invoices and marking off remittances)
- Managing receipt uploads to Xero.
- Assisting with marketing and recruitment campaigns.
- Administration and file management.
- Internal auditing when delegated or in the scope of the business support team (i.e., participant files / staff documentation).
- Assisting with onboarding and inducting new team members + processing/checking documentation when delegated.
- Onboarding new participants + service agreements + compliance documents + PRODA Service Bookings in collaboration with the Business Manager.
- Office maintenance
- Conducting investigations when required
- Telecommunications/Internet + IT set ups in collaboration with BSM
- Assisting with organisational Training.
- Assisting with events + attending expos.
- Other relevant or non-relevant task / ad hoc requirement which may be directed by the managing director.

- Making up to a maximum of \$100 p/month for stationery and/or IT equipment for the organisation with approval from the BSM.

Not in scope:

- Other roles and responsibilities.
- Leading investigations if not delegated.
- Other roles and responsibilities.
- Changing policies and procedures independently.
- Completing reportable incident investigations.
- Performance management of staff.
- Approving timesheets and leave.
- Approving purchases
- Ceasing services with participants.