

Transition or Exit Policy and Procedure

1.0 Purpose

The purpose of this policy is to ensure that participants experience a well-planned and supported transition into or exit from SilaCa Tasmania Pty Ltd 's services. Transitions and exits will be tailored to each participant's needs and preferences, delivered in a respectful, collaborative, and person-centred way. The aim is to support continuity of care, uphold dignity and choice, and minimise disruption, distress, or risk during any change in service.

2.0 Scope

The policy applies to all staff involved in supporting participant transitions or exits from SilaCa Tasmania Pty Ltd 's services.

3.0 Policy

SilaCa Tasmania Pty Ltd is committed to managing transitions and exits in line with the NDIS Practice Standards, Code of Conduct, and Human Rights principles. All participants will be informed of their rights and options throughout the transition or exit process using accessible and appropriate communication methods.

Participant transition or exit planning must be collaborative and documented in the service agreement and support plan. Where a participant transitions between providers or exits services, SilaCa Tasmania Pty Ltd will work with the participant, their representatives, and any new provider to ensure continuity of support and safeguarding of wellbeing.

All transitions and exits must follow these principles:

- Participant choice, autonomy, and consent are central.
- Risk assessments are conducted and documented.
- Any restrictive practices in place must be authorised and continued safely, in line with the NDIS (Restrictive Practices and Behaviour Support) Rules 2018.
- Participants must be informed of their right to access independent advocacy and complaint mechanisms.
- Staff must follow incident reporting procedures when transitions involve elevated risk, including risk of neglect or abuse.

Transitions may include voluntary exits, transfers to other providers, change of location, goal completion, or loss of eligibility. For temporary exits such as hospital admission or respite, staff must

refer to the Transition of Care Between Different Environments Policy and Procedure and complete a Transition and Exit Plan.

4.0 Definition

Term	Definition
Transition	Transition requires the preparation for and support of the participant to enter or exit the service. Or referral from another service or to another service or program where appropriate.
Exit (or discharge)	The process through which participants transition out of our organisation The exit process occurs when they have reached their goals outlined in the participant's support plan. Some participants may have a period of transition to exit or some form of continuing care.

5.0 Procedure

SilaCa Tasmania Pty Ltd will implement a collaborative approach when undertaking all decision-making processing regarding transition and exit to allow for an informed approach. This approach must be recorded in the support plan and include the following:

- reasons for the transition
- details of the provider transitioning to/from
- outline of collaborative communication
- summary of communication methods and details of information provided to relevant parties
- the feedback that is received from participants, families, advocates and stakeholders
- transition time frames
- transition process incorporating details of the process, application and communication process relevant to the participant
- identification of risks to the participant and risk management strategies
- review of the process and adjustments made, as required

All participants must be advised how and when a process of transition or exit can occur at the time of development of their Service Agreement and Support Plan.

5.1 Service agreement

As per the Service Agreement, a minimum notice of no less than 14 days, or a more extended period, is required to enable the participant, family, and advocate or SilaCa Tasmania Pty Ltd to have adequate time to nominate an alternative registered provider to deliver support services.

SilaCa Tasmania Pty Ltd will give notice of intent to withdraw/terminate services to a participant as per their Service Agreement, which states no less than 14 days' notice, or longer, as required.

Participants will be informed of their right to independent advocacy during exit/transition processes. The notice period for exit will be aligned with participant needs and risks, not just minimum contract timeframes, to ensure continuity of care and safe transition. Emergency exits (e.g., where there is immediate risk) will trigger a formal safeguarding response, including Incident Management.

Figure 1. Transition or exit process



5.2 Transition or exit plan

The Transition/Exit Plan will be developed in collaboration with the participant, their family, advocates, and relevant services. It will include participant goals, risks, alternative supports, communication strategies, and contingency planning to ensure a smooth transition. Where restrictive practices are involved, appropriate authorisations and behaviour support oversight will be ensured.

- A transition or exit plan will be developed at the entry into the service.

- The transition or exit plan is discussed during the participant's reviews.
- The participant will be informed of any risks involved with transitioning into or exiting the service.
- The plan will include a seamless time frame, offer flexibility and provide reliable support from the other service provider.
- The plan will support participants to transition into our service, exit to other services, or cease services.

5.3 Interviews

An entry interview is part of the transition plan; participants wishing to make a complaint regarding their transition into the service will be provided with details on the complaint process.

Participants will be offered the opportunity to have an advocate present during transition and exit interviews. All concerns raised during these processes will be documented and addressed, with formal complaint processes made available.

An exit interview is part of the exit plan; participants wishing to make a complaint regarding their exit will be provided with details on the complaint process.

5.4 Risks

Risks associated with the transition or exit process are identified during the planning stage, documented in the participant's plan and responded to immediately. This risk assessment will be held in the support plan.

All identified risks will be reviewed with the participant and their support network. Consent will be documented. If risks indicate potential harm, safeguarding and incident management procedures will be activated, including notification to the NDIS Commission if necessary. Participants' rights to privacy, safety, and dignity will be protected throughout.

5.4.1 Transition

- Identify the participant requiring transition into our organisation
- Identify the service(s) transition from
- Undertake Individual Risk Profile
- Work with the participant and relevant stakeholders to eliminate or minimise risk
- Monitor during the transition process and offer relevant options
- Create a Transition and Exit Plan

5.4.2 Exit

- Participant informs our organisation that they are exiting our service
- Liaise with the new provider and provide relevant risk information and reports
- Work with the participant and new service to eliminate or minimise risk
- Monitor during the exit process and offer relevant options
- Create a Transition and Exit Plan

SilaCa Tasmania Pty Ltd will aim to minimise the impact of change occurring for the participant by creating a transition support schedule that appropriately meets the participant's goals, needs and requirements.

6.0 Related documents

- Transition or Exit Plan
- Code of Conduct Agreement
- Complaints and Feedback Form
- Complaint Compliments and Feedback Register
- Individual Risk Assessment Profile
- Risk Assessment Forms
- Risk Management Plan Register
- Support Plan
- Service Agreement
- Advocacy Support Policy and Procedure
- Reportable Incident, Accident and Emergency Policy and Procedure
- Restrictive Practices Policy and Procedure
- Behaviour Support Policy and Procedure
- Dignity of Risk
- Participant Safeguarding Policy
- Independence and Informed Choice Decision-Making Policy and Procedure

7.0 References

- NDIS Practice Standards and Quality Indicators 2021
- NDIS Scheme Act 2013 (Commonwealth)
- Privacy Act 1988 (Commonwealth)
- Disability Discrimination Act 1992 (Commonwealth)
- NDIS (Incident Management and Reportable Incidents) Rules 2018
- United Nations Convention on the Rights of Persons with Disabilities (UNCRPD)

Transition of Care Between Different Environments Policy and Procedure

1.0 Purpose

The purpose of this policy is to ensure participants experience safe and well-managed transitions between different care settings, including movements between hospitals, disability services, and other environments. Transitions will be planned and communicated in a way that supports continuity of care, protects participant safety, and respects individual choice, dignity, and control. This policy aims to reduce the risks that can occur during changes in environment by supporting effective collaboration between healthcare providers, disability staff, participants, and their support networks.

2.0 Scope

The policy applies to all staff responsible for supporting participants who are transitioning between care environments.

3.0 Policy

SilaCa Tasmania Pty Ltd is committed to supporting safe and effective transitions of care in accordance with the NDIS Practice Standards, NDIS Code of Conduct, and all relevant safeguarding obligations. All transitions must be carefully planned and managed to reduce risks to participant wellbeing and ensure consistent, person-centred support.

Staff must ensure communication is clear, timely, and includes all relevant health, behavioural, and support information. This includes transitions such as:

- a participant moving from home or supported accommodation to hospital
- discharge from hospital to return to supported accommodation or another service setting

All transitions must include:

- accurate documentation of health conditions, medications, risks, and support requirements
- consultation with the participant, their representatives, and any involved health professionals
- active involvement of the participant in all planning and decision-making, with support for advocacy where required

Staff must follow the NDIS Code of Conduct and:

- provide supports and services with care, skill, and respect
- raise and act on concerns about any risks to participant safety or support quality

All transitions involving significant risk or incidents must be managed under SilaCa Tasmania Pty Ltd's Incident Management Policy and, where required, reported under the NDIS (Incident Management and Reportable Incidents) Rules 2018.

This policy is aligned with the following NDIS Practice Standards:

- **Risk Management** – risks to participants are identified, recorded, and addressed
- **Incident Management** – incidents are managed to ensure safety and drive continuous improvement
- **Information Management** – participant information is current, confidential, and accessible to authorised workers
- **Medication Management** – medication needs are communicated and managed to prevent errors or adverse outcomes
- **Quality Management** – feedback and incident data inform improvements in transition processes

4.0 Procedure

SilaCa Tasmania Pty Ltd will undertake the following:

- Prepare for potential hospital admissions by keeping participants' health-related information and documentation up-to-date and accurate to be readily communicated to hospital staff.
- Support participants in preparing for hospital admission by coordinating a pre-admission meeting with hospital staff and the participant's support network.
- Plan transitions out of the hospital as early as possible based on professional medical advice to ensure that any changes in care are considered.
- Work with hospital staff and the participant's support network to ensure you can provide any additional health-related support the participant may require after leaving the hospital.

4.1 Supporting the participant

SilaCa Tasmania Pty Ltd will prepare for possible transitions of care by:

- keeping the participant's health and medication information accurate and up to date
- communicating with other services during transitions of care
- helping participants understand and communicate information about their health

Participants will be supported to access advocacy and decision-making supports, especially where the hospital transition is unplanned, involves high risk, or changes to restrictive practices or behaviour support.

Staff must consider safeguarding risks including neglect, lack of supervision, communication breakdown, or absence of proper medical and behavioural support and must escalate any concerns to management under the Incident Management system.

4.2 Prepare for a planned hospital admission

To support participants in preparing for planned hospital admissions, we will arrange a pre-admission meeting with hospital staff to:

- coordinate the transition of care with the participant, relevant hospital staff, our staff, and, if possible, the participant's support people such as family or friends
- inform hospital staff about the participant's communication requirements, mobility and physical support needs, nutrition and mealtime management, and behaviour support strategies

If the participant has a restrictive practice in place, a Positive Behaviour Support Practitioner must be consulted to ensure continuity of care and to guide the hospital on authorised and safe use of any restrictions.

Where necessary, the organisation will involve the participant's plan nominee, family, or guardian and will ensure the participant is supported with informed consent processes regarding medical and care decisions.

4.3 Information to provide to hospital staff

Providing information to hospital staff requires SilaCa Tasmania Pty Ltd to have consent from participants, guardians or carers to share information; make the following available to hospital staff on admission:

- My Health Record (if used by the participant)
- Hospital Support Plan– based on the participant's specific needs and requirements
- List of current medications
- Webster packs and other required medications
- Health Care Card
- Medicare Card
- Behaviour Support Plan
- Communication plan/profiles and any related communication aids/tools

Ensure hospital staff are aware of any behaviour support plans, restrictive practice authorisations, mental health plans, and consent arrangements. Where applicable, ensure a copy of the Restrictive Practices Authorisation (RPA) documentation is provided. Ensure consent forms are current and up to date and verify that participants, family members, or guardians are actively involved in all healthcare decisions

Document and escalate if there are difficulties in communication or delays in the provision of hospital care that may impact the participant's wellbeing.

For an emergency visit to the hospital, you may need to arrange for a disability support worker familiar with the participant to stay with them during the admission.

4.4 Support when the participant leaves the hospital

4.4.1 Plan for discharge from the hospital

Plan for the participant's hospital discharge in consultation with health professionals as early as possible, including:

- estimated date of transfer
- destination of transfer
- transportation
- referral services
- home assessments for equipment, modifications
- re-assessing support risks (e.g. wound management, tube feeding)

Ensure any medication changes are reviewed by a qualified health professional before inclusion in the support plan and that staff are trained in any new procedures or medications.

4.4.2 Understand the participant's ongoing support needs and assess your capacity to meet them

Work with hospital staff to understand the participant's ongoing needs after they leave the hospital, including obtaining the following:

- Transfer of Care summary:
 - summary of the medical care the participant received in the hospital
- Care plan:
 - follow-up appointments with medical specialists,
 - care recommendations for the participant's regular health care providers, such as their GP, and
 - any other required health or social requirements
- Medications summary:
 - list of current medications, including information about any new or changed medications
- Risk Assessment review
 - Review Individual Risk Profiles and complete new documents as required

- Consider risks associated with changes in care needs and involve advocacy if participants or families express concerns
- Adjust support plan, as required
- Train staff, as required

Manager or their delegate must ask about and understand any changes to the participant's ongoing care needs during their hospital stay and assess whether you can provide for these (for example, if the participant now requires specifically trained staff or equipment). If our organisation cannot provide these new care requirements, we must communicate this to hospital staff as soon as possible.

Manager or their delegate must undertake early and ongoing communication with hospital staff, the participant, and support people such as carers (and, if required, the participant's NDIS plan manager) to prevent delays in leaving the hospital and reduce risk to participants after their discharge.

SilaCa Tasmania Pty Ltd will provide the participant with information about their follow-up care when they leave the hospital. If required, make this available in Easy English.

5.0 Related Documents

- Support Plan
- Easy Read - Planning With You
- Individual Risk Profile Assessment
- Support planning Policy and Procedure
- Independence and Informed Choice Decision-Making Policy and Procedure
- Access to Supports Policy and Procedure
- Reportable Incident, Accident and Emergency Policy and Procedure
- Information Management Policy and Procedure
- Human Resource Management Policy and Procedure
- Risk Management Policy and Procedure
- Continuous Improvement Policy and Procedure
- Quality Management Policy and Procedure
- Advocacy Support Policy and Procedure
- Reportable Incident, Accident and Emergency Policy and Procedure
- Restrictive Practices Policy and Procedure
- Behaviour Support Policy and Procedure
- Participant Safeguarding Policy

6.0 References

- NDIS Practice Alert Transitions of care between disability services and hospitals (January 2025)
- NDIS Code of Conduct Rules 2018
- NDIS Practice Standards and Quality Indicators 2021

- NDIS (Incident Management and Reportable Incidents) Rules 2018
- United Nations Convention on the Rights of Persons with Disabilities (UNCRPD)