



SUFY protects and defends the human rights of vulnerable people with disability through individual advocacy to address injustices and to make a positive and sustainable difference to their lives.

INFORMATION BOOKLET

Speaking Up For You Inc.

The Precinct. Unit F2
1st Floor, 12 Browning Street
PO Box 5649, West End Qld 4101

www.sufy.org.au

P: 07 3255 1244
F: 07 3255 1266
E: sufy@sufy.org.au

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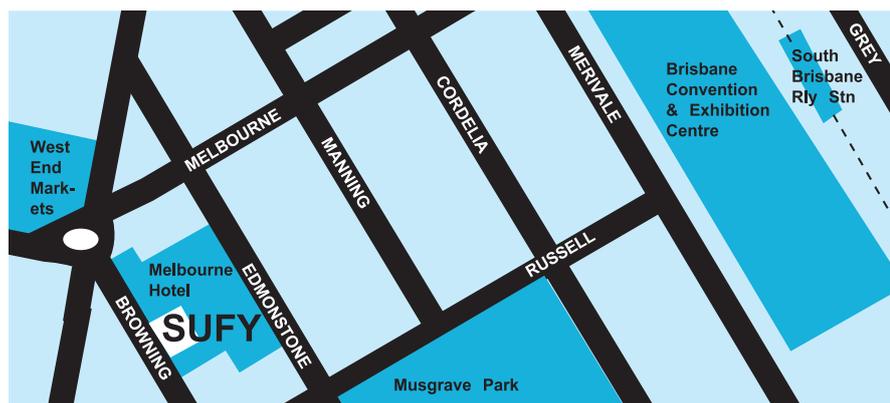
CONTACT DETAILS

CONTACT SPEAKING UP FOR YOU INC (SUFY)

The Precinct

Unit F2 1st Floor
12 Browning Street
WEST END Q 4101

P O BOX 5649
WEST END Q 4101
Phone (07) 3255 1244
Fax (07) 3255 1266
email: sufy@sufy.org.au



SUFY MANAGEMENT COMMITTEE

SUFY is a community based, not for profit advocacy agency governed by a management committee elected by the members at the Annual General Meeting. The committee consists of Chairperson, Vice Chairperson, Secretary, Treasurer and three ordinary members. The majority of SUFY's committee comprises of people with disability.

For more information about our Management Committee, please see our website: www.sufy.org.au

SUFY STAFF

SUFY employs a Manager, Individual Advocates, NDIS Appeals Advocates, an Intake Worker and Bookkeeper.

ABOUT SUFY

INDIVIDUAL SOCIAL ADVOCACY

Speaking Up For You Inc (SUFY) is an Independent Individual Social Advocacy Organisation for people with a disability who live in the Brisbane, Moreton Bay Regional Council and Redlands regions.

SUFY is an independent individual social advocacy organisation for people with disability in Brisbane, Moreton Bay including Redlands. SUFY provides a combination of individual, systems and self-advocacy that is consultative and collaborative with each individual and with families / guardians where appropriate. We stand beside and with vulnerable people with disability so that they can feel confident that their voice is heard. Our advocacy work with them is often long term, creating positive, real and sustainable differences to each person's well-being and lifestyle over time. This work is informed by the principles and elements of social advocacy.

NDIS APPEALS

SUFY supports individuals through the Appeals process to ensure they receive the best outcome possible.

SUFY MISSION STATEMENT

Speaking Up For You Inc. protects and defends vulnerable people with disability through individual advocacy to address injustices and make a positive and sustainable difference to their lives.

ADVOCACY STATEMENT OF PRINCIPLES

Human rights: SUFY will promote, protect and defend the lives and the human rights of each person with disability whom we support in an advocacy relationship.

Social Justice: SUFY will operate in ways that support the achievement of rights, equity, access, participation and equality in our advocacy work with each person.

Inclusion in Community Life: SUFY will operate in ways that value and support the inclusion of people with disability in the life of their diverse communities.

WHO DOES SUFY ADVOCATE FOR?

- SUFY advocates for people with disability who are in unsafe or unjust situations.
- People whose fundamental needs are not being met.
- People who are in danger of becoming more vulnerable or isolated.
- People who live in the Brisbane, Moreton Bay and Redlands regions.

When SUFY is approached to do advocacy for a person, SUFY looks at each situation against the following criteria:

THE ISSUE

SUFY's advocacy focuses on a person's fundamental needs such as human rights, safety, health, shelter, food and appropriate support to live in the community - and may include issues such as:

- at risk of eviction, homelessness, or living on the street
- devalued or neglected, with their needs not known or not being addressed
- lives in a facility such as mental health unit, hospital, nursing home, hostel and boarding house, group home, or in prison
- in physical danger or in abusive situations
- at risk of making poor decision which leave them open to danger and exploitation
- a threat to self or to others by behaviour that is seen as challenging
- without connections, poorly supported, in harmful or unstable living arrangements
- limited or no capacity for the family to provide support family support
- not entitled to essential services and or benefits eg. access free education, public housing, or supports provided by or funded by NDIS.
- lack of financial support
- not receiving important information/ communication in preferred language
- lack of support

PREVIOUS CONTACT

SUFY endeavours to advocate for people we have advocated for previously.

RESOURCES

SUFY has to have sufficient resources to advocate for individuals. SUFY can only advocate within the resources available to them.

GEOGRAPHIC AREA

Within reason, SUFY will continue advocating for someone where they move outside these areas. If the new location is not within a reasonable distance of the SUFY office, SUFY, where possible, will find an advocate for the person in their new area.

PROTECTION OF HUMAN RIGHTS AND FREEDOM FROM ABUSE

SUFY's mission is to defend, protect and promote the fundamental rights, dignity and interests of vulnerable people with disability.

SUFY advocates are especially vigilant in detecting situations where people with disability are experiencing human rights abuses or neglect.

SUFY actively encourages the involvement of family and allies, and considers them integral to the advocacy effort of providing an effective overall safeguard for people with disability.

In carrying out our advocacy work, SUFY is guided by the following principles:

- Human Rights
- Social Justice
- Inclusive Living

HUMAN RIGHTS

SUFY takes its mandate from the following important human rights declarations, laws, international treaties and principles:

Convention on the Rights of Persons with Disabilities [‘CRPD’], (United Nations) 2006

Convention on the Rights of the Child, (United Nations) 1989

Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, (United Nations) 1984

Convention on the Elimination of Discrimination against Women, (United Nations) 1979

Queensland Disability Services Act, (Qld) 2006

Disability Discrimination Act, (Clth) 1992

Anti-Discrimination Act, (Qld) 1991

Racial Discrimination Act, (Clth) 1975

United Nations Declaration on the Rights of Disabled Persons, 1975

Convention on the Elimination of All Forms of Racial Discrimination, 1966

Universal Declaration of Human Rights, 1948

Queensland Human Rights Act, 2019

PROCEDURES

At SUFY, we:

- Advocate on behalf of vulnerable people with disability to defend, protect and promote their human rights and to address issues of violence, abuse and neglect in their lives.
- Respond to allegations of abuse immediately by bringing the abuse to the attention of relevant authorities, including but not limited to; NDIS Quality and Safeguards Commission, the Public Guardian, Qld Police Service, Community Visitor and Department of Child Safety. Our advocates take all the necessary steps in ensuring appropriate action is taken to address any allegations of abuse or neglect.
- Place safeguards around vulnerable individuals who receive advocacy to prevent them from being subjected to abuse or neglect.
- Provide information on induction to all advocates, the Management Committee and staff about advocacy principles, social justice principles, human rights and the prevention of abuse.
- Support all staff to access professional supervision and development.
- Require all staff and Management Committee members sign and commit to a Code of Conduct.

PRIVACY AND CONFIDENTIALITY

SUFY recognises respects and protects the individual's right to dignity, privacy and confidentiality.

SUFY keeps records about the advocacy work that we undertake on behalf of individuals. SUFY is bound by the Privacy Act 1988, the Privacy Amendment (Enhancing Privacy Protection) Bill 2012 (Reform Bill) and the Australian Privacy Principles which regulate how agencies may collect, use, disclose and store personal information and how individuals may access and correct personal information held about them. Information about the collection, storage and disposal of personal information is included in this information kit given to new people who receive advocacy.

INFORMATION COLLECTION, STORAGE, ACCESS & DISPOSAL

SUFY has an obligation to keep the information safe and secure.

The file is kept in a locked filing cabinet. The SUFY computer has a password installed so that only authorised personnel have access to any private information kept on the computer.

When personal information about individuals is sent by fax and email, a clause highlighting the confidentiality of this information is included on the fax/email.

SUFY has an obligation to prevent unauthorised use of information. The only people who have access to the information are the advocacy workers and the individual concerned.

After advocacy ceases, the file is kept by SUFY for a period of seven years in a secure place. It is then destroyed.

WHAT HAPPENS TO ANY INFORMATION SUFY HOLDS ABOUT YOU

The information SUFY collects about individual's includes:

- a. Contact details
- b. The date SUFY started working with the individual
- c. The advocacy issues being worked on
- d. Any actions undertaken and the reason for these actions
- e. Phone calls made and received
- f. Letters sent and received
- g. Emails sent and received
- h. Meetings attended

ACCESS TO INFORMATION HELD BY SUFY

The individual SUFY is working with has the right to access their information on file.

- a. The advocate will talk to the individual at the first contact about the information being collected and tell them how they can access their file.
- b. If an individual wishes to see the records kept about him or her on file at SUFY, an appointment can be made with the advocacy worker to do this. Advocacy worker will talk to the individual and explain the content of the file.
- c. However if the advocate considers that some personal information may be distressing or damaging to the individual the advocate must meet with the Manager or other advocacy worker to discuss their concerns about how this information is released to the individual.
- d. SUFY will then ensure that the information is released with the guidance and support of other appropriate individuals or professionals:
 - A supportive family member or friend
 - The persons general practitioner or psychiatrist/psychologist

SUFY'S OBLIGATIONS UNDER THE DSS SERVICE AGREEMENT

SUFY has an obligation to ensure that the information is up to date and accurate. SUFY has an obligation to ensure that the information is presented in a way that is accessible to the individual concerned. This means that information will be written in plain English or the advocate will verbally advise the individual about their rights to privacy and confidentiality.

SUFY has an obligation to prevent unauthorised use of information. The only people who have access to the information are the advocacy workers and the individual concerned.

SUFY FEEDBACK FORM

Your feedback can be anonymous and if you wish us to call you to discuss your feedback, please provide your name and contact details.

Please return this form to SUFY P O BOX 5649 West End Qld 4101 or email sufy@sufy.org.au

TELL US ABOUT YOUR EXPERIENCE WITH SUFY'S ADVOCACY.

About the Working Relationship with SUFY's Advocate

The advocate listened to me effectively	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
The advocate understood things from my point of view	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
The advocate accepted what I said without judging me	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
The advocate gave me information that helped work out the best options for me	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
I know I can depend on SUFY's advocate to speak up for me	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree

About the Results of Having a SUFY Advocate

It was important to have SUFY's advocate in my corner, on my side	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
The advocate has helped me achieve changes in my circumstances	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
The advocate continues to monitor my situation	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree

Overall Satisfaction

My overall level of satisfaction with the advocacy offered by SUFY	<input type="checkbox"/> Satisfied	<input type="checkbox"/> Dissatisfied
Based on my experience, I would recommend SUFY to others	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Other Comments:

Your name and contact details if you wish

Name:

Contact:

COMPLAINT FORM

This form is to assist you in making a complaint about SUFY.

All persons wishing to make a complaint can speak with the Manager or staff member of choice or choose to complete this form.

All information is strictly confidential.

If you feel unsure about anything or would like help to complete this form, please speak to Administration. We encourage you to make your complaint in writing. Please allow a maximum of ten (10) days for a response.

PERSONAL DETAILS

The information provided will be used to contact you. Only provide the contact details that you wish to be contacted on.

Name: Mr/Mrs/Miss/Ms

Postal Address:

Postcode:

Email:

Phone No:

Mobile:

Is there someone else (legal representative, family member or support person) that you would like involved in making this complaint?

Yes No

Name of legal representative/support person

Postal Address:

Postcode:

Email:

Phone No:

Mobile:

Where it happened?

When it happened? (Include date if possible)

Who was involved? (List all persons involved and witnesses)

Did someone witness the incident? Would they be willing to be contacted regarding your complaint? If so, provide the name and contact details. (Inform the witness that they may be contacted by the organisation to discuss the matter.)

Any other relevant details:

Have you discussed the matter with the person/s involved? Yes No

If yes, what was the outcome, if any? Please attach a copy (not the original) of your complaint to the respondent and any letter of reply you have received.

If no, is there any reason/s that you cannot do so? Do you need help to do this, e.g. for safety reasons, cultural reasons?

How would you like to see your complaint resolved? What action would you like SUFY to take to resolve your complaint?

Additional information/supporting documentation

Please attach copies (not the original) of any documents that may help us to handle the complaint, e.g. if you have letters, emails or faxes or records of conversations you have had with the person/s associated with the complaint.

To help us resolve this matter as fast as we can, please ensure your contact details are kept up to date. If details change, let the organisation know as soon as you can.

Please sign and date this form.

Signature:

Date:

CONSENT AUTHORITY

Giving SUFY permission to seek information about you.

This consent authority gives Speaking Up For You Incorporated (SUFY) permission to seek information about you from individuals or organisations. Only relevant information will be gathered that can be used to enable us to provide adequate levels of advocacy and assistance.

Only where the Privacy Act 1988, the Privacy Amendment (Enhancing Privacy Protection) Bill 2012 (Reform Bill) and the Australian Privacy Principles) allows, will information be given to government authorities without your consent. However, we will inform you of all information given out.

With respect to some government programs, withholding information may mean that access to a government subsidised programs may be withheld.

Your consent authority can be withdrawn at any time. You are entitled to access information held concerning you. Where inaccuracies are recorded you are entitled to have these corrected.

Information may be kept in hard copy format or on a computer file.

All information is kept in a secure manner with restricted access. In the case of hard copies information is kept in filing cabinets that are locked when not in use. Computer files are password protected.

Access to files kept on individuals is restricted to those who have been given consent. SUFY's Privacy Policy is available on request.

You are invited to participate to consent to participate in client research conducted by the Department of Social Services. The research conducted will be approved by a recognized ethics committee and you are not obliged to participate in this research, and that not agreeing to participate in this research will not in any way affect the assistance that Speaking Up For You Inc (SUFY) provides to you in connection with this matter.

Department of Social Services Standard Notification:

"The information that we collect from you on this form includes your personal information. Your personal information is protected by law, including by the Commonwealth Privacy Act.

The client management system that we are using is an IT system called the 'Data Exchange'. This system is hosted by the Australian Government Department of Social Services. Your personal information that is stored by the Department on the Data Exchange will only be disclosed to us for the purposes of managing your case. The Department de-identifies and aggregates data in the Data Exchange to produce information for policy development, grants program administration, and research and evaluation purposes. This includes producing reports for sharing with service providers.

This information will not include information that identifies you, or information that can be used to re-identify you, in any way.

You can find more information about the way the Department will manage your personal information in the Department's APP privacy policy, which the Department has published on its website.

This policy contains information about how you may access the personal information about you that is stored on the Data Exchange and seek correction of that information.

This policy also includes information about how you may complain about a breach of the Australian Privacy Principles by the Department, and how the Department will deal with your complaint."

CONSENT AUTHORITY FORM FOR SUFY'S FILE

Fill out the form below to give SUFY permission to collect and share information about you.

I _____ Date of Birth _____ provide consent for
(your name or substitute decision maker's name)

Speaking Up For You Incorporated (SUFY) to advocate for me and to release information to and if necessary obtain information from the following Agencies/ Organisations.

Tick the agencies that apply

- National Disability Insurance Agency
- Department of Social Services to collect personal information for storage on the DSS Data Exchange
- Registered NDIA Service Providers
- Individuals funded by NDIA
- Queensland Community Care Services
- Registered Service Providers
- Health Department Employees
- Centrelink-Australian Government
- The Public Trustee of Queensland
- The Public Guardian of Queensland
- Queensland Housing
- Other health professionals and health related organisations (e.g., GP)
- Other Agencies/ Services: - add the names of other entities

I understand that I can withdraw consent at any time.

Signature: _____ DATE: _____

(your signature or substitute decision maker's signature)



SPEAKING UP FOR YOU INC

THE PRECINCT
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12 BROWNING STREET
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PO BOX 5649
WEST END QLD 4101

PHONE (07) 3255 1244
FAX (07) 3255 1266
EMAIL sufy@sufy.org.au
WEB www.sufy.org.au

ABN: 58 812 329 872

SUFY is an independent individual social advocacy organisation for people with disability in Brisbane and the Moreton Bay region.

SUFY promotes a positive vision for their lives and advocates on their behalf to protect and defend them against people and systems that treat them unjustly.

SUFY'S OBJECTIVES

- 1 To speak, write and act for people with disability in a way that advocates against unfair and unjust things happening in their lives.
- 2 To support advocacy development efforts that educate community about the vulnerability of people with disability and the need for independent advocacy.
- 3 To enhance the positive image of people with disability in the community.
- 4 To network with individuals and organisations who support advocacy against unfair and unjust things happening in the lives of people with disability.
- 5 To be an effective, efficient and accountable organisation that works and reflects on social advocacy principles and practices.

MEMBERSHIP APPLICATION/RENEWAL

Members of SUFY believe in the objectives of the organisation and are supportive of the work SUFY does.

Please fill in the form below if you would like to become a member of SUFY. The following information is only for SUFY to know and will be kept confidential.

Please select which applies to you:

- I wish to become a new member of SUFY.
- I wish to renew my SUFY membership.

PERSONAL DETAILS

Full Name:			
Street:			
Suburb:		Postcode:	
Phone:			
Email:			
Signature:		Date:	

Disability (for statistical purposes)	<input type="checkbox"/> I am a person with a disability
	<input type="checkbox"/> I am a student or employee in a disability related area
	<input type="checkbox"/> I am a family member of a person with a disability
	Other:

Please turn over for payment details

PAYMENT DETAILS

Please indicate below which payment details apply to you:

Payment:	<input type="checkbox"/> \$Nil – I require a free membership	
	<input type="checkbox"/> \$10 – Individual membership	
	<input type="checkbox"/> \$20 – Organisation membership For organisations who are allies of SUFY and do not have voting privileges	
Method:	<input type="checkbox"/> Cash	
	<input type="checkbox"/> Cheque	Please make cheque to: Speaking Up For You Inc.
	<input type="checkbox"/> Direct Deposit	Payment can be made to: Speaking Up For You Inc. Bank: Bank of Queensland BSB: 124 089 Account No: 10350053 Please use reference: First initial and last name
Donation:	Payment can be made to: Speaking Up For You Inc. Bank: Bank of Queensland BSB: 124 050 Account No: 12350053	

SUFY PROTECTS AND DEFENDS VULNERABLE PEOPLE WITH A DISABILITY THROUGH INDIVIDUAL ADVOCACY TO ADDRESS INJUSTICES AND TO MAKE A POSITIVE AND SUSTAINABLE DIFFERENCE TO THEIR LIVES.

OFFICE USE ONLY		
Status:	<input type="checkbox"/> Accepted	<input type="checkbox"/> Not Accepted
Date paid:		

SUFY INFORMATION CHECK LIST

INFORMATION PROVIDED TO NEW INDIVIDUALS AND/OR FAMILY MEMBERS. SUFY'S COPY TO KEEP ON FILE

The following information has been explained and provided

To:

Date:

- Consent Authority for Individual Advocacy
- Complaints about SUFY policy and flow chart
- Privacy and Confidentiality
- SUFY Information Brochure – About Us
- Membership Form
- Information about Human Rights and Abuse and Neglect

Do you think you will need information and support from SUFY when you talk to the NDIS team?

- YES
- NO

The above information has been explained to me.

- YES
- NO

Signed by individual:

Signed by advocate:
