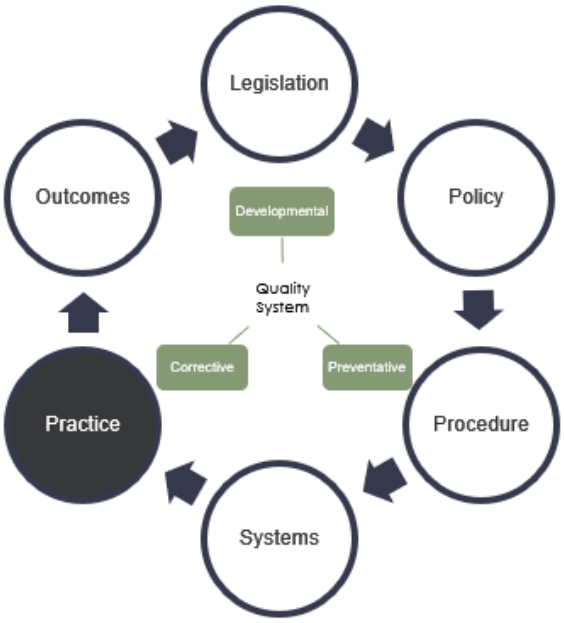
National Disability Services
WESTERN AUSTRALIA



Quality Practice Guide

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Disclaimer

The following information is general in nature and is not intended to provide legal advice or to warrant compliance with any legal requirements. This information in this document was researched and collated in February 2019 based on publicly available materials. It is subject to change and providers should check with the NDIS Commission for any updates on an ongoing basis.

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Introduction

The National Disability Insurance Scheme (NDIS) Quality and Safeguarding Commission is an independent national body, established the National Disability Insurance Scheme Amendment (Quality and Safeguards Commission and Other Measures) Act 2017 to protect and prevent people with disability from experiencing harm arising from poor quality or unsafe supports or services under the NDIS. There are NDIS Commission Rules that services and [Organisations] must follow to become and remain registered providers.
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The NDIS Quality and Safeguarding Commission has been advising the sector that the audit process will have an emphasis on how people receiving supports and services are experiencing their service. This document has been designed to build [Organisations] understanding of how to convert their principles, policies and procedures into practice.

There are four core modules in the NDIS Practice Standards that apply to all registered NDIS providers. They are:

- Rights and Responsibilities
- Provider Governance and Operational Management
- Provision of Support.
- Support Provision Environment

Providers may also be required to comply with additional supplementary modules for more complex supports including:

- High Intensity Daily Personal Activities
- Specialist Behaviour Support
- Implementing Behaviour Support Plans
- Early Childhood Supports
- Specialised Support Co-ordination
- Specialist Disability Accommodation
- Verification

Registered providers will be audited against the Standards and will be required to provide evidence on how the standards are being implemented in their [Organisation]. Auditors will check a variety of reliable sources to corroborate and confirm claims. They will check whether the provider is meeting the expectations of people with disability, families and carers and where appropriate, assisting them to attain their goals. Governance and practice will need to be proportionate to the size and scale of the [Organisation].

The National Disability Scheme Insurance (Provider Registration and Practice Standards) Rules 2018 specify the types of evidence that auditors are required to collect including:

- Information directly from people with disability
- Information from family/friends/carer/nominees and/or independent advocates (with the person's consent)
- The documented support plan and evidence of the delivery of supports, to execute the plan
- All the supports delivered by the NDIS provider to the person.

Evidencing Quality

Legislation

Compliance with Acts of Parliament that document legal requirements in Australia

Includes:

- State and Commonwealth legislation
- Any legislative amendments
- Regulations
- There are often standards associated with legislation or regulations

Sample legislation

- NDIS ACT 2013 (Commonwealth)
- Disability Services Act 1993 (State)
- Disability Discrimination Act 1992(Commonwealth)
- Privacy Act 1988 (Commonwealth)

Tips:

- Legislation changes from time to time, always check if you have the most recent version.
- Join mailing lists to be advised when legislation is updated
- Regulations and Schedules which form part of an Act may be published separately.
- Policy is used by [Organisations] to show how the laws or other requirements are applied in their [Organisation].

Policy

Documented describing [Organisation's] intent to apply certain principles and follow a particular course of action.

Includes:

- Policy statement
- Scope
- Principles
- Key actions
- Definitions
- Other related policies
- Relevant legislation

(See template for definitions)

Example policies

- Rights
- Code of Conduct
- Eliminating Restrictive Practices
- Behaviour Supports
- Safeguarding- (preventing abuse and neglect)
- Supported Decision Making
- Conflict of Interest
- Delegations
- Governance
- Occupational Health and Safety
- Waste Management
- Confidentiality
- Vehicle Use
- Social Media
- Complaints

Tips:

- Use plain English when writing policy
- Offer policies in alternate formats including easy read.
- Check THE NDIS Practice Standards -Quality Indicators to identify many of the policies you need.
- Include people with disability, families and staff in policy development.
- Ensure policies are culturally appropriate.
- Document your policy development process.
- Monitor implementation through engagement with people, their families and carers.
- Record policies on a register that includes review dates.

Download:

Policy development checklist
Policy template
Policy register template

Procedure

Documented explaining to staff how to put a particular policy into real life practice. Work instructions that explain to staff how to undertake a specific task are based on procedures.

Includes:

- Scope
- Roles and responsibilities
- Detailed actions
- Work instructions
- Relevant forms

Example procedures

- Preventing Abuse and Neglect
- Investigations
- Complaints
- First Aid
- Vehicle use
- Medications
- Behaviour support
- Supported decision making
- Vacancy management

Tips:

- Use plain English when writing procedures
- Include people with disability, families and staff in developing procedures
- Test the process with people with disability and staff before it is implemented
- Include hyperlinks to forms and systems within the procedure
- Codes of conduct and customer charters can be included in a procedure manual

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Download:

Procedure template
Sample procedures in the National Standards for Disability Services Toolkit

Systems

A planned and repeatable group of business activities and focused actions that work behind the scenes in support of service delivery. Systems can be manual or digital.

Includes:

- Scope
- Workflows
- Authorizations
- Templates
- Instructions
- Outputs

Sample systems

- Governance
- Finance
- Human Resources including rostering, worker screening
- Information Management
- Complaints
- Occupational Health and Safety
- Incident reporting
- Risk management
- Client Management (including CRM)
- Records
- Strategic and Operational Plans

Tips:

- Systems need to be proportionate to the size of the business, range of services and complexity of services.
- Make sure the governance system includes all high-level activities undertaken to manage the [Organisation] (such as high-level financial policies and Code of Conduct) so it provides an effective guide for hands on operational service delivery.
- Ensure you train staff on new or changed systems and keep a training register.
- Use the complaints and feedback systems to provide learning opportunities and inform a continuous improvement plan.
- Change champions can support staff to adapt their working styles to new systems.

Download:
Complaints templates and sample processes
Continuous Improvement procedure

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Practice

The actions staff take implement policy, procedures and any other obligations and requirements. It is the activities and behaviours that are experienced by people accessing services and co-workers.

Includes:

- Support to people with disability and families
- Promotion/protection of Human Rights
- Applying procedures
- Following work instructions
- Applying Practice Standards
- Service planning
- Using forms, records and systems
- Governance
- Recruitment
- Worker screening
- Safeguarding
- Complaints/Investigations
- Marketing
- Reporting
- Continuous Improvement
- Worker health and safety

Sample practices

- Service delivery
- Induction for people with disability
- Worker orientation
- Complaints are used to improve service delivery
- File notes are accurate and timely
- Consultation/Co-design
- Using the NDIS portal
- Staff development and training including a training register
- Information is secure and private
- Incidents are investigated appropriately
- Communication

Tips:

- Actively seeking advice and insights about people's service experience can identify gaps in processes and opportunities for improvement.
- Asking staff about their experiences in delivering services can identify barriers or challenges that limit choice.
- Develop a speaking up culture where all stakeholders can be confident they will be heard and their views respected.

Practice

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- Reporting
- Continuous Improvement
- Worker health and safety

- Co-designing processes and policies can support [Organisations] to get practice right.
- A person's files and hand over notes can be used to record service activity.
- Agendas and minutes can be used to record business activity.
- Monitoring, review and evaluation are critical for good practice and provide the basis for continuous improvement.
- Professional development processes can support staff who are not applying policies and procedures in a way that supports best practice.

Outcomes

Outcomes are evidence of the results created by the [Organisations]. They can be outcomes for people with disability and families or [Organisational] outcomes. Personal goals or key performance indicators may be used to measure whether intended outcomes have been achieved.

Includes:

- Person's preferences regarding community, culture, etc. are in service plans and used to support the person.
- People have made progress on their goals.
- People have completed a chosen task or activity.
- People with disability (and families) are satisfied with the services.
- Evidence the services has complied with legal and contractual requirements.
- The culture of the [Organisation] improves.
- The reputation of the [Organisation] is strengthened.
- Staff are engaged and satisfied.
- Recruitment and retention of staff meets requirements.

Sample outcomes

- There is evidence a person is leading decisions about their life.
- A person has improved capacity to undertake a particular activity or action.
- A person is more connected to community or culture.
- The service meets certification/verification requirements.
- [Organisation] consistently attracts high quality staff.
- [Organisation] is sustainable.

Tips:

- Interviews and surveys of people with disability and staff are part of the certification audit process for NDIS registration. Effective communication about policy, procedures and practice is essential.
- Feedback processes provide improvement opportunities
- Documenting systems and processes and sufficient record keeping provides an evidence base showing the link between policy, procedures and practice.

Mapping the National Standards for Disability Services to the NDIS Practice Standards: Quality Indicators

The National Standards for Disability Services (NSDS) includes a set of practice indicators were first introduced in the early 1990s. The current standards were released in 2013. These Standards underpin the WA Quality System that is in effect until 1 July 2020.

The NDIS Quality and Safeguarding Framework includes Practice Standards with an accompanying set of quality indicators. These come into effect in WA from 1 July 2020.

Both the indicators accompanying the National Standards for Disability Services and the indicators accompanying the NDIS Practice Standards are used or will be used by people with disability, providers and funders to assess how well the relevant standards are being implemented.

The indicators that sit behind the National Standards for Disability Services are reflected in the quality indicators that support the NDIS Practice Standards, however the two sets of Standards do not always map neatly to each other. The requirements may not be precisely the same. Other providers using this Guide need to consider carefully how there might be opportunities for improvement in moving to the NDIS Practice Standards.

Below is a sample map that shows some of the similarities between the indicators. There are additional indicators in the NDIS Practice Standards that do not form part of the National Standards for Disability Services. This map only considers the core modules of the NDIS Practice Standards. There are additional supplementary modules for more complex supports have not been include in this guide. This map does not include the Verification Module that apply to sole providers or partnerships delivering lower risk or less complex NDIS supports and services.

National Standards for Disability Services Practice Indicators Standard 1: Rights	NDIS Practice Standards Core modules (with outcome areas)	NDIS Practice Standards Quality Indicators
1:1 The service, its staff and its volunteers treat individuals with dignity and respect.	Rights and Responsibilities.	Included in Rights and Responsibilities.
1:2 The service, its staff and its volunteers recognise and promote individual freedom of expression.	Rights and Responsibilities (Independence and Informed Choice)	Each participant's autonomy is respected, including their right to intimacy and sexual expression.

1:3 The service 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.	Rights and Responsibilities (Person Centred Support) Rights and Responsibilities (Person Centred Support) Rights and Responsibilities (Independence and Informed Choice)	Each participant's legal and human rights are understood and incorporated into everyday practice. Communication with each participant about the provision of supports is responsive to their needs and is provided in the language, mode of communication and terms that the participant is most likely to understand. Active decision-making and individual choice are supported for each participant including the timely provision of information using the language, mode of communication and terms that the participant is most likely to understand.
1:4 The service provides support strategies that are based on the minimal restrictive options and are contemporary, evidence-based, transparent and capable of review.	Specialist Behaviour Support Implementing Behaviour Support Plans	See Supplementary Modules- Specialist Behaviour Support Implementing Behaviour Support Plans.
1:5 The service has preventative measures in place to ensure that individuals are free from discrimination, exploitation, abuse, harm, neglect and violence.	Rights and Responsibilities (Violence, Abuse, Neglect and Discrimination)	Policies, procedures and practices are in place which actively prevent violence, abuse, neglect, exploitation or discrimination.
1:6 The service addresses any breach of rights promptly and systemically to ensure opportunities for improvement are captured.	Rights and Responsibilities (Violence, Abuse, Neglect and Discrimination)	Each participant is provided with information about the use of an advocate (including an independent advocate) and access to an advocate is facilitated where allegations of violence, abuse, neglect, exploitation or discrimination have been made.

1:7 The service supports individuals with information and, if needed, access to legal advice and/or advocacy.	Rights and Responsibilities (Independence and Informed Choice)	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. Each participant is provided with information about the use of an advocate (including an independent advocate) and access to an advocate is facilitated where allegations of violence, abuse, neglect, exploitation or discrimination have been made.
1:8 The service recognises the role of families, friends, carers and advocates in safeguarding and upholding the rights of people with disability.	Rights and responsibilities (Person Centred Support)	Each participant is supported to engage with their family, friends and chosen community as directed by the participant.
1:9 The service keeps personal information confidential and private.	Rights and responsibilities (Privacy and Dignity)	Consistent processes and practices are in place that respect and protect the personal privacy and dignity of each participant. Each participant is advised of confidentiality policies using the language, mode of communication and terms that the participant is most likely to understand. Each participant understands and agrees to what personal information will be.

National Standards for Disability Services Practice Indicators Standard 2: Participation and Inclusion	NDIS Practice Standards Core modules (with outcome areas)	NDIS Practice Standards Quality Indicators
2:1 The service actively promotes a valued role for people with disability, of their own choosing.	Rights and Responsibilities	Included in Rights and Responsibilities.
2:2 The service works together with individuals to connect to family, friends and their chosen communities.	Rights and Responsibilities	Included in Rights and Responsibilities.
2:3 Staff understand, respect and facilitate individual interests and preferences, in relation to work, learning, social activities and community connection over time.	Rights and responsibilities (Person Centred Support)	Each participant's right to practice their culture, values and beliefs while accessing supports is supported.
2:4 Where appropriate, the service works with an individual's family, friends, carer or advocate to promote community connection, inclusion and participation.	Rights and Responsibilities	Included in Rights and Responsibilities.
2:5 The service works in partnership with other [Organisations] and community members to support individuals to actively participate in their community.	Provider Governance and Operational Management (Continuity of Supports) Rights and Responsibilities (Person Centred Support)	Supports are planned with each participant to meet their specific needs and preferences. These needs and preferences are documented and provided to workers prior to commencing work with each participant to ensure the participant's experience is consistent with their expressed preferences. Each participant's right to practice their culture, values and beliefs while accessing supports is supported.
2:6 The service uses strategies that promote community and cultural connection for Aboriginal and Torres Strait Islander people.	Rights and Responsibilities (Person Centred Support)	Each participant's right to practice their culture, values and beliefs while accessing supports is supported.

National Standards for Disability Services Practice Indicators Standard 3: Individual Outcomes	NDIS Practice Standards Core modules (with outcome areas)	NDIS Practice Standards Quality Indicators
3:1 The service works together with an individual and, with consent, their family, friends, carer or advocate to identify their strengths, needs and life goals.	Provider Governance and Operational Management (Continuity of Supports) Rights and Responsibility (Independence and Informed Choice) Provider Governance and Operational Management (Information Management)	Supports are planned with each participant to meet their specific needs and preferences. These needs and preferences are documented and provided to workers prior to commencing work with each participant to ensure the participant's experience is consistent with their expressed preferences. Each participant's right to the dignity of risk in decision-making is supported. When needed, each participant is supported to make informed choices about the benefits and risks of the options under consideration. Each participant's consent is obtained to collect, use and retain their information or to disclose their information (including assessments) to other parties, including details of the purpose of collection, use and disclosure. Each participant is informed in what circumstances the information could be disclosed, including that the information could be provided without their consent if required or authorised by law.
3:2 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.	Provider Governance and Operational Management (Information Management) Provider Governance and	Each participant's right to the dignity of risk in decision-making is supported. When needed, each participant is supported to make informed choices about the benefits and risks of the options under consideration. Supports are planned with each participant to meet their specific needs and preferences. These

	Operational Management (Continuity of Supports) Provision of Supports (Support Planning)	needs and preferences are documented and provided to workers prior to commencing work with each participant to ensure the participant's experience is consistent with their expressed preferences. With each participant's consent, work is undertaken with the participant and their support network to enable effective assessment and to develop a support plan. Appropriate information and access are sought from a range of resources to ensure the participant's needs, support requirements, preferences, strengths and goals are included in the assessment and the support plan.
3:3 The service plans, delivers and regularly reviews services or supports against measurable life outcomes.	Provision of Supports (Support Planning) Provision of Supports (Support Planning) Provision of Supports (Support Planning)	Periodic reviews of the effectiveness of risk management strategies are undertaken with each participant to ensure risks are being adequately addressed, and changes are made when required. Each support plan is reviewed annually or earlier in collaboration with each participant, according to their changing needs or circumstances. Progress in meeting desired outcomes and goals is assessed, at a frequency relevant and proportionate to risks, the participant's functionality and the participant's wishes. Where progress is different from expected outcomes and goals, work is done with the participant to change and update the support plan.
3:4 Service planning and delivery is responsive to diversity including disability, age, gender, culture, heritage, language, faith, sexual identity, relationship status, and other relevant factors.	Rights and Responsibilities (Individual Values and Beliefs)	At the direction of the participant, the culture, diversity, values and beliefs of that participant are identified and sensitively responded to. Each participant's right to practice their culture, values and

		beliefs while accessing supports is supported.
3:5 The service collaborates with other service providers in planning service delivery and to support internal capacity to respond to diverse needs.	Provisions of Supports (Responsive Support Provision)	Where agreed in the service agreement, and with the participant's consent or direction, links are developed and maintained through collaboration with other providers to share information and meet participant needs.

National Standards for Disability Services Practice Indicators National Standards for Disability Services Standard 4: Feedback and Complaints	NDIS Practice Standards Core modules (with outcome areas)	NDIS Practice Standards Quality Indicators
4:1 Individuals, families, friends, carers and advocates are actively supported to provide feedback, make a complaint or resolve a dispute without fear of adverse consequences.	Provider Governance and Operational Management.	Included in Provider Governance and Operational Management.
4:2 Feedback mechanisms including complaints resolution, and how to access independent support, advice and representation are clearly communicated to individuals, families, friends, carers and advocates.	Provider Governance and Operational Management (Feedback and Complaints Management)	Each participant is provided with information on how to give feedback or make a complaint, including avenues external to the provider, and their right to access advocates. There is a supportive environment for any person who provides feedback and/or makes complaints.
4:3 Complaints are resolved together with the individual, family, friends, carer or advocate in a proactive and timely manner.	Provider Governance and Operational Management (Feedback and Complaints Management)	Each participant is provided with information on how to give feedback or make a complaint, including avenues external to the provider, and their right to access advocates. There is a supportive environment for any person who provides feedback and/or makes complaints.
4:4 The service 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.	Provider Governance and Operational Management (Feedback and Complaints Management) Provider Governance and Operational Management	Each participant is provided with information on how to give feedback or make a complaint, including avenues external to the provider, and their right to access advocates. There is a supportive environment for any person who provides feedback and/or makes complaints. The governing body provides opportunities for people with disability to contribute to the governance of the [Organisation] and have input into the development of [Organisational] policy and processes relevant to the provision of supports and the protection of participant rights.
4:5 The service develops a culture of continuous improvement using	Provider Governance	Demonstrated continuous improvement in complaints and

compliments, feedback and complaints to plan, deliver and review services for individuals and the community.	and Operational Management (Feedback and Complaints Management)	feedback management by regular review of complaint and feedback policies and procedures, seeking of participant views on the accessibility of the complaints management and resolution system, and incorporation of feedback throughout the provider's [Organisation].
4:6 The service effectively manages disputes.	Provider Governance and Operational Management (Feedback and Complaints Management)	The complaints management and resolution system are maintained that is relevant and proportionate to the scope and complexity of supports delivered and the size and scale of the [Organisation]. The system follows principles of procedural fairness and natural justice and complies with the requirements under the National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018.

National Standards for Disability Services Practice Indicators Standard 5: Service Access	NDIS Practice Standards Core modules (with outcome areas)	NDIS Practice Standards Quality Indicators
5:1 The service systematically seeks and uses input from people with disability, their families, friends and carers to ensure access is fair and equal and transparent.	Rights and Responsibilities and Provision of Supports	Included in Rights and Responsibilities and Provision of Supports.
5:2 The service provides accessible information in a range of formats about the types and quality of services available.	Rights and Responsibilities and Provision of Supports	Included as part of other indicators in Rights and Responsibilities and Provision of Supports.
5:3 The service develops, applies, reviews and communicates commencement and leaving a service process.	Rights and Responsibilities and Provision of Supports	Included in Rights and Responsibilities and Provision of Supports.
5:4 The service develops, applies and reviews policies and practices related to eligibility criteria, priority of access and waiting lists.	Provision of Supports (Access to Supports)	The supports available, and any access / entry criteria (including any associated costs) are clearly defined and documented. This information is communicated to each participant using the language, mode of communication and terms that the participant is most likely to understand.
5:5 The service monitors and addresses potential barriers to access.	Rights and Responsibilities and Provision of Supports	The supports available, and any access / entry criteria (including any associated costs) are clearly defined and documented. This information is communicated to each participant using the language, mode of communication and terms that the participant is most likely to understand.
5:6 The service provides clear explanations when a service is not available along with information and referral support for alternative access.	Provider Governance and Operational Management (Continuity of Supports)	Where changes or interruptions are unavoidable, alternative arrangements are explained and agreed with the participant.
5:7 The service collaborates with other relevant [Organisations] and community members to establish and maintain a referral network	Governance and Operational Management	Included in Governance and Operational Management.

National Standards for Disability Services Practice Indicators Standard 6: Service Management	NDIS Practice Standards Core modules (with outcome areas)	NDIS Practice Standards Quality Indicators
6:1 Frontline staff, management and governing bodies are suitably qualified, skilled and supported.	Provider Governance and Operational (Governance and Operational Management) Provider Governance and Operational (Governance and Operational Management) Provider Governance and Operational Management (Incident Management) Provider Governance and Operational Management (Human Resource Management)	The skills and knowledge required for the governing body to govern effectively are identified, and relevant training is undertaken by members of the governing body to address any gaps. The provider is managed by a suitably qualified and/or experienced persons with clearly defined responsibility, authority and accountability for the provision of supports. All workers are aware of, trained in, and comply with the required procedures in relation to incident management. The skills and knowledge required of each position within a provider are identified and documented together with the responsibilities, scope and limitations of each position.
6:2 Practice is based on evidence and minimal restrictive options and complies with legislative, regulatory and contractual requirements.	Specialist Behaviour Support	See Supplementary Modules-Specialist Behaviour Support.
6:3 The service documents, monitors and effectively uses management systems including Work Health Safety, human resource management and financial management.	Provider Governance and Operational Management (Governance and Operational Management)	A defined structure is implemented by the governing body to meet a governing body's financial, legislative, regulatory and contractual responsibilities, and to monitor and respond to quality and safeguarding matters associated with delivering supports to participants.

	Governance and Operational Management	The governing body ensures that 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.
6:4 The service has monitoring feedback, learning and reflection processes which support continuous improvement.	Provider Governance and Operational Management	The performance of management, including responses to individual issues, is monitored by the governing body to drive continuous improvement in management practices.
6:5 The service has a clearly communicated [Organisational] vision, mission and values, which are consistent with contemporary practice.	Rights and Responsibilities	Included in Rights and Responsibilities.
6:6 The service has systems to strengthen and maintain [Organisational] capabilities to directly support the achievement of individual goals and outcomes.	Governance and Operational Management.	Included Governance and Operational Management.
6:7 The service uses person-centred approaches including the active involvement of people with disability, families, friends, carers and advocates to review policies, practices, procedures and service provision.	Provider Governance and Operational Management	The governing body provides opportunities for people with disability to contribute to the governance of the [Organisation] and have input into the development of [Organisational] policy and processes relevant to the provision of supports and the protection of participant rights.

Additional NDIS Practice Standards: Quality Indicators

There are a number of new indicators that are over and above those included in the National Standards for Disability Services. Many relate to existing functions within [Organisations].

NDIS Practice Standards Core modules (with outcome areas)	NDIS Practice Standards Quality Indicators
Rights and Responsibilities (Independence and Informed Choice)	Each participant has sufficient time to consider and review their options and seek advice if required, at any stage of support provision, including assessment, planning, provision, review and exit.
Rights and Responsibilities (Violence, Abuse, Neglect and Discrimination)	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.
Provider Governance and Operational Management (Governance and Operational Management)	There is a documented system of delegated responsibility and authority to another suitable person in the absence of a usual position holder in place.
Provider Governance and Operational Management (Governance and Operational Management)	Perceived and actual conflicts of interest are proactively managed and documented, including through development and maintenance of [Organisational] policies.
Provider Governance and Operational Management (Risk Management)	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.
Provider Governance and Operational Management (Risk Management)	A documented system that effectively manages identified risks is in place, and is relevant and proportionate to the size and scale of the provider and the scope and complexity of supports provided.
Provider Governance and Operational Management (Risk Management)	Support delivery is linked to a risk management system which includes: • Incident Management • Complaints Management • Work Health and Safety • Human Resource Management • Financial Management • Information Management • Governance
Provider Governance and Operational Management (Quality Management)	A quality management system is maintained that is relevant and proportionate to the size and scale of the provider and the scope and complexity of the supports delivered. The system defines how to meet the

	requirements of legislation and these standards. The system is reviewed and updated as required to improve support delivery.
Provider Governance and Operational Management (Quality Management)	The provider's quality management system has a documented program of internal audits relevant (proportionate) to the size and scale of the provider and the scope and complexity of supports delivered.
Provider Governance and Operational Management (Quality Management)	The provider's quality management system supports continuous improvement, using outcomes, risk related data, evidence-informed practice and feedback from participants and workers
Provider Governance and Operational Management (Information Management)	Each participant is informed of how their information is stored and used, and when and how each participant can access or correct their information, and withdraw or amend their prior consent.
Provider Governance and Operational Management (Information Management)	An information management system is maintained that is relevant and proportionate to the size and scale of the [Organisation] and records each participant's information in an accurate and timely manner.
Provider Governance and Operational Management (Information Management)	Documents are stored with appropriate use, access, transfer, storage, security, retrieval, retention, destruction and disposal processes relevant and proportionate to the scope and complexity of supports delivered.
Provider Governance and Operational Management (Feedback and Complaints Management)	All workers are aware of, trained in, and comply with the required procedures in relation to complaints handling.
Provider Governance and Operational Management (Incident Management)	An incident management system is maintained that is relevant and proportionate to the scope and complexity of supports delivered and the size and scale of the [Organisation]. The system complies with the requirements under the National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018.
Provider Governance and Operational Management (Incident Management)	Each participant is provided with information on incident management, including how incidents involving the participant have been managed
Provider Governance and Operational Management (Incident Management)	Demonstrated continuous improvement in incident management by regular review of incident management policies and procedures, review of the causes, handling and outcomes of incidents, seeking of participant and worker views, and incorporation of feedback throughout the provider's [Organisation].

Provider Governance and Operational Management (Human Resource Management)	Records of worker pre-employment checks, qualifications and experience are maintained.
Provider Governance and Operational Management (Human Resource Management)	An orientation and induction process are in place that is completed by workers including completion of the mandatory NDIS worker orientation program.
Provider Governance and Operational Management (Human Resource Management)	A system to identify, plan, facilitate, record and evaluate the effectiveness of training and education for workers is in place to ensure that workers meet the needs of each participant. The system identifies training that is mandatory and includes training in relation to staff obligations under the NDIS Practice Standards and other National Disability Insurance Scheme rules.
Provider Governance and Operational Management (Human Resource Management)	Timely supervision, support and resources are available to workers relevant to the scope and complexity of supports delivered.
Provider Governance and Operational Management (Human Resource Management)	The performance of workers is managed, developed and documented, including through providing feedback and development opportunities.
Provider Governance and Operational Management (Continuity of Supports)	Day-to-day operations are managed in an efficient and effective way to avoid disruption and ensure continuity of supports.
Provider Governance and Operational Management (Continuity of Supports)	In the event of worker absence or vacancy, a suitably qualified and/or experienced person performs the role.
Provider Governance and Operational Management (Continuity of Supports)	Arrangements are in place to ensure support is provided to the participant without interruption throughout the period of their service agreement. These arrangements are relevant and proportionate to the scope and complexity of supports delivered by the provider
Provider Governance and Operational Management (Continuity of Supports)	Where applicable, disaster preparedness and planning measures are in place to enable continuation of critical supports before, during and after a disaster.
Provision of Supports (Access to Supports)	Reasonable adjustments to the support delivery environment are made and monitored to ensure it is fit for purpose and each participant's health, privacy, dignity, quality of life and independence is supported.
Provision of Supports (Access to Supports)	Each participant is supported to understand under what circumstances supports can be withdrawn. Access to supports required by the participant will not be withdrawn or denied solely on the basis of a dignity of risk choice that has been made by the participant.
Provision of Supports (Support Planning)	In collaboration with each participant, a risk assessment is completed and documented for each participant's support plan, then appropriate strategies to treat known risks are planned and implemented.

Provision of Supports (Support Planning)	Where appropriate, and with the consent of the participant, information on the support plan is communicated to family members, carers, other providers and relevant government agencies.
Provision of Supports (Service Agreements with Participants)	Collaboration occurs with each participant to develop a service agreement which establishes expectations, explains the supports to be delivered, and specifies any conditions attached to the delivery of supports, including why these conditions are attached.
Provision of Supports (Service Agreements with Participants)	Each participant is supported to understand their service agreement and conditions using the language, mode of communication and terms that the participant is most likely to understand.
Provision of Supports (Service Agreements with Participants)	Where the service agreement is created in writing, each participant receives a copy of their agreement signed by the participant and the provider. Where this is not practicable, or the participant chooses not to have an agreement, a record is made of the circumstances under which the participant did not receive a copy of their agreement.
Provision of Supports (Service Agreements with Participants)	Where the provider delivers supported independent living supports to participants in specialist disability accommodation dwellings, documented arrangements are in place with each participant and each specialist disability accommodation provider. At a minimum, the arrangements should outline the party or parties responsible and their roles (where applicable) for the following matters: a) How a Participant's concerns about the dwelling will be communicated and addressed; b) How potential conflicts involving participant(s) will be managed; c) How changes to participant circumstances and/or support needs will be agreed and communicated; d) In shared living, how vacancies will be filled, including each participant's right to have their needs, preferences and situation taken into account; and e) How behaviours of concern which may put tenancies at risk will be managed, if this is a relevant issue for the participant.
Provision of Supports (Responsive Support Provision)	Supports are provided based on the least intrusive options, in accordance with contemporary evidence-informed practices that meet participant needs and help achieve desired outcomes.

Provision of Supports (Responsive Support Provision)	Reasonable efforts are made to involve the participant in selecting their workers, including the preferred gender of workers providing personal care supports.
Provision of Supports (Responsive Support Provision)	Where a participant has specific needs, which require monitoring and/or daily support, workers are appropriately trained and understand the participant's needs and preferences.
Provision of Supports (Transition to or from the Provider)	A planned transition to or from the provider is facilitated in collaboration with each participant when possible, and this is documented, communicated and effectively managed.
Provision of Supports (Transition to or from the Provider)	Risks associated with each transition to or from the provider are identified, documented and responded to.
Provision of Supports (Transition to or from the Provider)	Processes for transitioning to or from the provider are developed, applied, reviewed and communicated.
Provision of Support Environment (Safe Environment)	Each participant can easily identify workers engaged to provide the agreed supports.
Provision of Support Environment (Safe Environment)	Where supports are provided in the participant's home, work is undertaken with the participant to ensure a safe support delivery environment.
Provision of Support Environment (Safe Environment)	Where relevant, work is undertaken with other providers and services to identify and treat risks, ensure safe environments, and prevent and manage injuries.
Provision of Support Environment (Participant Money and Property)	Where the provider has access to a participant's money or other property, processes to ensure that it is managed, protected and accounted for are developed, applied, reviewed and communicated. Participants' money or other property is only used with the consent of the participant and for the purposes intended by the participant.
Provision of Support Environment (Participant Money and Property)	If required, each participant is supported to access and spend their own money as the participant determines.
Provision of Support Environment (Participant Money and Property)	Participants are not given financial advice or information other than that which would reasonably be required under the participant's plan.
Provision of Support Environment (Management of Medications)	Records clearly identify the medication and dosage required by each participant, including all information required to correctly identify the participant and to safely administer the medication.
Provision of Support Environment (Management of Medications)	All workers responsible for administering medication understand the effects and side-effects of the medication and the steps to take in the event of an incident involving medication.
Provision of Support Environment (Management of Medications)	All medications are stored safely and securely, can be easily identified and differentiated, and are only accessed by appropriately trained workers.
Provision of Support Environment (Management of Waste)	Policies, procedures and practices are in place for the safe and appropriate storage and disposal of waste,

	infectious or hazardous substances that comply with current legislation and local health district requirements.
Provision of Support Environment (Management of Waste)	All incidents involving infectious material, body substances or hazardous substances are reported, recorded, investigated and reviewed.
Provision of Support Environment (Management of Waste)	An emergency plan is in place to respond to clinical waste or hazardous substance management issues and/or accidents. Where the plan is implemented, its effectiveness is evaluated, and revisions are made if required.
Provision of Support Environment (Management of Waste)	Workers involved in the management of waste and hazardous substances receive training to ensure safe and appropriate handling. This includes training on any protective equipment and clothing required when handling waste or hazardous substances.

Useful NDIS quick links

Fact sheet: NDIS Quality and Safeguards Commission: what does this mean for providers?
www.ndiscommission.gov.au/sites/default/files/documents/2018-06/NDIS%20Commission%20-%20What%20does%20this%20mean%20for%20providers.pdf

Registration Requirements by Supports and Services
https://www.ndiscommission.gov.au/sites/default/files/documents/2018-07/Registration%20Requirements%20by%20Supports%20and%20Services.pdf

National Disability Insurance Scheme (Quality and Safeguards Commission) Rules Summary
www.ndiscommission.gov.au/document/551

National Disability Scheme Insurance (Provider Registration and Practice Standards) Rules 2018
www.legislation.gov.au/Details/F2018L00631

Resources to support principles, policy and practice

NDIS Code of Conduct
www.ndiscommission.gov.au/sites/default/files/documents/2018-07/NDIS%20Commission%20-%20Conduct_0.PDF

NDS Quality and Safeguarding Hub
www.nds.org.au/resources/ndis-quality-and-safeguards

Zero Tolerance
www.nds.org.au/resources/zero-tolerance

NDIS Readiness Toolkit
www.nds.org.au/resources/ndis-provider-toolkit

National Standards Toolkit (policies and procedures)
www.nds.org.au/resources/national-standards-for-disability-services-toolkit

National Disability Services Help Desk
www.nds.org.au/helpdesk

References

(Accessed February 2019)

NDIS Practice Standards and Quality Indicators V1, July 2018

National Disability Scheme Insurance (Provider Registration and Practice Standards) Rules 2018.

National Disability Insurance Scheme (Approved Quality Auditors Scheme) Guidelines July 2018.

NDIS Commission ‘information for providers’ webpage.

National Standards for Disability Services 2013