

GENERIC QUALITY FRAMEWORK

FOR

HUMAN SERVICE ORGANISATIONS

MARCH 2004



Mental Health Coordinating Council



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FOREWORD

I am pleased to present to you the Generic Quality Framework for Human Service Organisations (HSO Framework). Instigated by the non-government sector, its specific purpose is to address the challenges experienced by organisations receiving funding from multiple agencies to support their services and programs.

I would like to acknowledge the Mental Health Coordinating Council (MHCC), for leading the project; the New South Wales (NSW) Health Department, Centre of Mental Health for funding the project; and the representatives from peak bodies, service providers and government agencies who all contributed their expertise to its development and pilot.

The framework provides a unique opportunity for government agencies to streamline the reporting and accountability requirements, imposed on non-government organisations as a consequence of their funding agreements. NSW Health, NSW Department of Community Services (DOCS) and the NSW Department of Ageing, Disability and Home Care (DADHC) were all represented on the project Advisory Committee. The framework is however, applicable to the broader range of State (New South Wales and South Australia) and Commonwealth agencies that provide funding to human service organisations.

I commend the HSO Framework to you for your consideration.

Yours sincerely,

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INTRODUCTION

Why a Quality Framework?

In order to answer the question 'why a quality framework?', consider the following scenario: an NGO active at a national level with branches in NSW and South Australia; receives funding for several programs through Family and Community Services (FACS) at a commonwealth level; NSW Health and the Department of Ageing, Disability and Home Care (DADHC) in NSW; and the Department of Human Services (DHS) in South Australia.

This NGO would need to undergo four separate quality processes as a result of the above funding:

- an International Standards Organisation (ISO) audit of its employment program against the FACS Quality Assurance Handbook;
- a QMS review against the Quality Improvement Council (QIC) Standards as a consequence of receiving NSW Health funding;
- a Home and Community Care (HACC) appraisal as part of its DADHC funding;
- a validation against the Service Excellence Framework as a result of its DHS (SA) funding.

Many such organisations have attempted to map their reporting and quality requirements. This requires an initial investment in people and resources (money and time) before any savings from a streamlined approach may be accrued.

A survey of more than 200 government agencies and service was conducted to inform the development of framework. Respondents expressed a need for a quality improvement tool that:

- would reduce duplication;
- could identify common elements across programs;
- organisations could use to report on these elements;
- could be used by all external providers of quality services e.g. ISO, QMS; and
- would be accepted as a reporting mechanism by all government funding agencies.

Process for developing the HSO Framework

The development of the HSO Framework was divided into two phases. The activities under both phases are outlined below:

Phase 1

The process for the development for the framework included:

- establishment of an Advisory Committee under the auspices of the MHCC;
- a content analysis of the range of existing standards to explore areas of commonality and specificity;
- consultation with stakeholders including government departments, peak bodies, service providers and consumer groups;
- development of the conceptual underpinnings of the framework i.e. structure, process and outcome;
- establishment of a Reference Group with representatives from a wide range of organisations meeting the specifics of the target group i.e. multi-program, multi-funded NGOs;
- development of the framework matrix headings, content and language with the Reference Group;
- development of support resources for use with the framework;
- request for expressions of interest to participate in the pilot of the framework;
- presentation to the advisory committee for endorsement; and
- commencement of the pilot phase.

Phase 2

Organisations responded to the call for expression of interest to participate in the pilot of the framework. 18 organisations were selected representing metropolitan, rural, large and small organisations. Each organisation was asked to nominate one of the nine framework domains to pilot. The rationale of asking organisations to select one domain, rather than to pilot the framework in its entirety was due to resources (both time and money) and because the focus of the pilot was to test the framework as a quality tool and not the achievements of the organisations themselves. 17 organisations completed the pilot phase.

ACKNOWLEDGEMENTS

Advisory Committee

An Advisory Committee was established to monitor and guide the process of developing the HSO Framework. Meetings were held monthly during the development phase, then two monthly during the pilot and evaluation phase.

Membership included:

Mental Health Coordinating Council	Jenna Bateman
Aftercare	Joy Said
Centacare, South Australia	Alison Sinclair
Consumer Advisory Group	Doug Holmes
NSW Council of Social Services	Gary Moore
NSW Department of Aging Disability & Home Care	Suzanne Pierce
NSW Department of Community Services	Allan Raisin
NSW Health, Centre for Mental Health	Robyn Murray
NSW Health Primary Health & Community Partnerships Branch	Louise Cuschieri
Office of the Ombudsman	Tony Ovadia
The Northcott Society	Craig Moore
Quality Improvement Council	Steve Einfeld
Quality Management Services	Hon Chan
	Roisin Smith
	Stephanie Pope

We would also like to take the opportunity to thank Sue Taylor formerly NSW DOCS, Ros Bragg formerly with NCOSS and Anna Edwards and Lynette Lee from DADHC for their contribution to the Advisory Committee.

Reference Group

Represented on the Reference Group were service providers (national and state-based) and peak bodies. The Reference Group assisted in providing comments and feedback from a user's point of view during the development of the framework. Some Reference Group member organisations also participated in the pilot of the framework.

Regional Extended Family Services Inc (REFS)	Bruce Argyle
Aged & Community Services Association NSW & ACT	Carrie Hayter
Anglicare	Peter Gardiner
Baptist Community Services	June Heinrich
Catholic Welfare Australia	Margaret Roots
Community Services Inc	Helen Nickless
Mission Australia	Tonette Tonika
Network of Drug & Alcohol Associations	Larry Pierce
Network of Drug & Alcohol Associations	Vanessa Long
New Horizons Enterprises Limited	Stephen Kinhead
The Spastic Centre	Deborah Hoffman
Quality Management Services	Hon Chan
	Roisin Smith
	Stephanie Pope
	Lis Maier

Organisations that piloted the framework:

1. Aboriginal Drug & Alcohol Council (SA Inc)
2. Aids Council of New South Wales
3. Anglicare NSW
4. Baptist Community Services NSW
5. Centacare Cairns, QLD
6. Community Programs Inc
7. Marist Youth Care
8. Mission Australia
9. Mt. Barker Hospital & Health Service
10. Narrabri Neighbourhood Centre
11. New Horizons Enterprises Inc
12. Regional Extended Family Services Inc
13. Relationships Australia SA
14. Richmond Fellowship of NSW
15. Rockdale Community Services, NSW
16. SDN Children's Services Inc
17. The Spastic Centre of NSW

THE GENERIC QUALITY FRAMEWORK FOR HUMAN SERVICE ORGANISATIONS

The HSO Framework and its relationship to existing standards

The HSO Framework can be viewed as a map to existing standards. Existing sets of standards set the parameters for the design of the framework and its eventual content. This can best be seen in the matrices, which act as a directory to locate existing standards and indicators within the domains and elements of the framework.

A range of existing standards were reviewed in the development of the framework. They include national and state standards as listed below.

National

- National Standards for Mental Health Services
- Home and Community Care National Service Standards (HACC)
- Disability Employment Service Standards
- Family Relationships Service Program Good Practice Standards
- Family Relationships Service Program Approval Requirements
- Community Aged Care Packages Standards (CACP)
- Extended Aged Care in the Home Standards (EACH)
- Reconnect Good Practice Principles
- Quality Improvement Council, Health and Community Services Core Standards (5thed)
- Quality Management Services, Community Services Standards

State

- NSW Supported Accommodation Standards (SAAP)
- Out of Home Care Standards (Office of the Childrens' Guardian)
- Disability Service Standards, Standards in Action (DADHC)
- South Australian Service Excellence Framework (DHS)
- NSW Family Support Services Standards (FSSA)

Criteria for inclusion of Standards in the HSO Framework

The criteria for inclusion of the standards were, that they were:

- typical of standards found in the multi-program NGO context
- that they were not 'locked-in' to a designated accreditation provider whether government or non-government.

On the basis of these criteria the following sets of standards were excluded:

National

- Standards for Juvenile Custodial Facilities
- Draft Quality Practice Standards for Outside School Hours Care (OSHCQA)
- Family Day Care Quality Assurance-Quality Practice Guide (FDCQA)
- Standards for Long Day Care Centres (QIAS)
- National Community Housing Standards
- Australian Qualifications Training Framework (AQTF)

State

- NSW Department of Housing Best Value Inspection

Exception to the criteria

The only exception to those included which meet the criteria for exclusion were the Disability Employment Services Standards, which are reviewed using ISO providers. The rationale for their inclusion was their relationship to the Disability Services Standards.

The structure of the HSO Framework and its intended use

The framework is made up of three *sections* (the vertical columns):

1. Creating Supportive Environments
2. Providing Services & Programs
3. Building Capacity

Each of the sections is supported by a *Statement of Intent* which sets out the scope for the content of the section.

Within each section, there are three *domains*:

Section 1 Creating Supportive Environments

- Domain 1.1 Governance
- Domain 1.2 Management
- Domain 1.3 Workforce Development

Section 2 Providing Services and Programs

- Domain 2.1 Access & Equity
- Domain 2.2 Individual and Group Planning
- Domain 2.3 Implementation

Section 3 Building Capacity

- Domain 3.1 Fostering Relationships
- Domain 3.2 Networks and Stakeholders
- Domain 3.3 Funding Partnerships

Within each of the domains are *elements* which reflect the areas of commonality in each of the domains across the existing standards.

Structure-Process and Outcome

The design concept behind the development of the framework is based on the work of Donabedian (Salzer et al, 1997). His work on validating quality standards and indicators suggest that in order for them to be valid measures of the quality of the services provided they must relate to:

- the structures provided;
- the processes implemented;
- the outcomes produced.

As such in the design of the framework we have attempted to include in the relevant sections, those issues which fall under definitions of structure-process and outcome found in the literature.

Section 1: Creating Supportive Environments includes all those functions that need to be in place and at a level of preparedness before an organisation registers service users. This includes governance arrangements, physical infrastructure, management and administrative, resources-human and financial.

Section 2: Providing Services & Programs represents the interpersonal domain, where trained staff and volunteers use the structures and functions provided by the organisation to fulfill the needs of service users in a way that provides safe and effective service outcomes.

Section 3: Building Capacity has a focus on those resources that lie outside the realm of the organisation. These resources may contribute to the organisation's ability to meet the needs of service users or assist the community at large to better meet its own needs.

It is important to note that *outcomes are achievable and measurable from all three sections of the framework e.g.*

- Section 1: Creating Supportive Environments-Human Resource Management-staff retention;
- Section 2: Providing Services and Programs-proportion of service users with a care support plan reviewed within the specified period;
- Section 3: Building Capacity achievement against key performance indicators in Funding and Performance Agreement . All are examples of outcomes which contribute to the measurement of organisation-wide quality, effectiveness, efficiency and sustainability.

The Matrices

The matrices outline the location within existing standards of issues addressed in the framework. The matrices are structured in a way that optimises the benefit received by organisations using the framework.

Firstly the standards are separated into national and state level standards. Secondly the matrices are again divided into those sets of standards and indicators that address issues denoted as 'Common to All' and those which are 'Specific to Some'.

The criteria for inclusion of a standard or indicator as 'Common to All' required that it occur in at least four sets of standards. Standards or indicators that occurred in less than four sets of standards were denoted as 'Specific to Some'.

The rationale for this design feature is to give confidence to organisations using the HSO Framework that wish to streamline their policies and procedures across programs. In this way a centralised policy and procedure manual could address all of the common elements required by standards or funding agencies.

Policies and procedures specific to the program content or service user population can be added to the centralised policy and procedure manual as modular attachments to be held by that program/unit. This approach will also facilitate the review of policies and procedures as a result of changes in legislation, statutory authority decisions or emerging best practice.

Document Control

A table to assist understanding of the numbering system and versions of standards used in the matrices can be found in the Appendix at the end of this document.

Permission for Use

Copyright for the HSO Framework lies with NSW Health and the MHCC. The framework can be used by organisations provided that they acknowledge the source.

Given that standards are reviewed periodically, the framework will also need to be revised regularly to reflect changes in the standards. It is therefore the responsibility of any organisation which uses the framework to update it if there is a change in any of the standards that form part of the framework.

SECTION 1 Creating Supportive Environments	SECTION 2 Providing Services & Programs	SECTION 3 Building Community Capacity
<p>Domain 1.1 Governance</p> <p><i>Elements:</i></p> <ul style="list-style-type: none"> ◆ Leadership ◆ Regulatory Environment ◆ Policy Framework ◆ Accountability 	<p>Domain 2.1 Access & Equity</p> <p><i>Elements:</i></p> <ul style="list-style-type: none"> ◆ Access ◆ Entry, Exit & Re-entry ◆ Information, Rights & Responsibilities 	<p>Domain 3.1 Fostering Relationships</p> <p><i>Elements:</i></p> <ul style="list-style-type: none"> ● Autonomy ◆ Participation ◆ Systems Advocacy ◆ Social Resources
<p>Domain 1.2 Management</p> <p><i>Elements:</i></p> <ul style="list-style-type: none"> ◆ Information Management ◆ Administration Systems ◆ Planning, Evaluation & Quality Improvement ◆ Risk Management ◆ Facilities Management 	<p>Domain 2.2 Individual & Group Planning</p> <p><i>Elements:</i></p> <ul style="list-style-type: none"> ◆ Client Focus ◆ Assessment & Review ◆ Coordination ◆ Documentation ◆ Referral & Brokerage ◆ Discharge, Transition & After-care 	<p>Domain 3.2 Networks</p> <p><i>Elements:</i></p> <ul style="list-style-type: none"> ◆ Forums ◆ Collaboration ◆ Contracts & Brokerage
<p>Domain 1.3 Workforce Development</p> <p><i>Elements:</i></p> <ul style="list-style-type: none"> ◆ Human Resource Planning ◆ Personnel Management ◆ Training & Development ◆ Occupational Health & Safety 	<p>Domain 2.3 Implementation</p> <p><i>Elements:</i></p> <ul style="list-style-type: none"> ● Support & Placement ● Counselling/Mediation ● Health Maintenance ● Developing Knowledge & Skills ● Group Work ● Education 	<p>Domain 3.3 Funding Partnerships</p> <p><i>Elements:</i></p> <ul style="list-style-type: none"> ◆ Accountability & Reporting ◆ Specialist Requirements ◆ Roles & Contributions

Section 1: Creating Supportive Environments

Statement of Intent: Organisational systems and resources support an environment in which effective, safe, efficient and accountable services are provided.

Section 1: Domain 1.1 Governance

Governance is defined as the “exercise of authority to manage an organisation’s affairs at all levels comprising the mechanisms, processes and institutions through which authority is directed. Good governance is, among other things participatory, transparent, accountable and efficient and promotes the rule of law” (NCOSS Management Support Unit definition, based on the United Nations Development Program).

Leadership: three factors important to leadership include skills, vision and implementing the vision. Skills include specific capacities for action such as decision-making, problem solving and performance appraisal. A vision articulates a view of a realistic, credible and attractive future for an organisation. The vision must be communicated across the organisation, to the community and external stakeholders. Leaders must develop or help to develop a general strategy for achieving the vision e.g. Mission, Vision and Values statements, Strategic Directions, Strategic Plan (based on Steers, Porter & Bigley 6th Ed 1996:196).

Regulatory Environment: commonwealth, state and territory legislation provide a structure for an organisation’s establishment and operations. Some legislation applies to all organisations while others are specific to certain sectors i.e. public, private or non-government, including whether the organisation was established under the Companies Act, Corporations or Associations Act. These Acts inform the constitution or corporate framework to which Governing Bodies or Boards must adhere. For example, public organisations must hold a Annual General Meeting and private companies must comply with Australian Securities and Investment Commission (ASIC) reporting requirements. Other bodies which may be state or sector specific e.g. Ombudsmen, Community Service Commission, Aged Care Complaints Resolution Scheme, may issue statements or findings on decisions with which organisations active in that sector must comply and incorporate into operations.

Policy Framework: the policy framework sets the structure for the governance, management, operations and program areas that identify the organisation as being involved in the delivery of human services. The policy framework provides a clear system against which the organisation can audit its performance. It provides clear instruction to governance, management, staff, volunteers, external bodies, stakeholders and the community about how the organisation will conduct its business internally and externally.

Accountability: the responsibility of an organisation or an individual for achieving the vision, mission and strategic direction as outlined in organisational literature, including the strategic plan and business or operational plans. Accountability also includes responsibility for financial management, organisational sustainability, staff practices and media liaison; and accountability to the community, funding partners and stakeholders such as other agencies, service users, staff and volunteers.

Domain 1.1: Element 1 Leadership

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Mission & Vision Common to all		7.1.1	Std 6.1 6.1.1	LEME1 LEME2		8.1.1			
Mission & Vision Specific	8.4.2								
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Mission & Vision Common to all			AR1		Std 1.1				
Mission & Vision Specific									

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Strategic Leadership Common to all	8.2.2 8.2.5	7.1.2 2.2.4	6.2.3	LEME3 SMEME2	Std 6.1 6.1.1	9.1.1			
Strategic Leadership Specific	6.1.2 8.1.9 EPR 8.1.1 8.2.1 EPR 8.2.2	4.5.1	Std 2.4	SMEME1 LFE6 LFE7 SOFE7 CEME1 CFE6 WTOLE9 LOLE9					
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Strategic Leadership Common to all	PQ 11d ^{MC}		AR 2			9.7			
Strategic Leadership Specific		Std 8	AR 13	LOLE10	Std 3.1 Std 3.2				

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Selection Common to all	8.1.8	6.1.3 6.1.4	6.5.2			8.1.6 Std 10.11 10.11.1			
Selection Specific	8.1.4 EPR 8.1.2	4.4.5	6.5.4	LFE5 LOLE11					
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Selection Common to all									
Selection Specific	PQ 10a ^{Mc}					3.6 9.1			

Domain 1.1: Element 2 Regulatory Environment

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Legal & Human Rights Common to all	4.2.2 8.1 ^{ES} 8.4.1 Std 10	1.2.4 2.5.2	3.3.3			Std 4.1 Std 4.2			
Legal & Human Rights Specific	10.2.1	1.2.16			3.3.1				
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Legal & Human Rights Common to all		Std 12 KPI 12.2				Std 1 1.1 2.1 Std 5 5.1 Std 7 10.1			
Legal & Human Rights Specific						1.4			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Other Legislation Regulations Common to all	8.2.4 8.5.1 EPR 8.6.1 8.8.2 8.8.3 8.8.5 EPR 8.8.6 EPR 8.8.7 8.9.3 8.9.7	3.1.8 9.3.2		PEME1	7.1.1				
Other Legislation Regulations Specific	EPR 2.1.2 4.3.1 4.3.10 4.3.9 8.1.1 8.1.2 8.2.3 10.4.21 10.5.7 10.5.8 10.5.10 10.5.11 10.5.12			SMEME4 SOEME3	9.1.1				
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Other Legislation Common to all	PQ 11c ^{MC}				Std 1.7				
Other Legislation Specific						11.4.C.2			

Domain 1.1: Element 3 Policy Framework

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Rights Common to all	4.1a ^{MS} 4.1.1 6.1 ^{ES} 7.1a ^{MS} 7.1.1 7.1.2 8.9 ^{ES} 10.1.1	2.5.8 Std 4.1 4.1.1 4.1.2 4.1.4 4.2.2 Std 4.3 4.3.1		CSEME2		4.1.1 4.2.1 4.3.1 4.3.2			
Rights Specific	3.1.2 4.7 ^{ES} 8.8 ^{ES} 9.1.6 10.6.15	9.4.7 9.4.8				4.3.5 4.3.6			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Rights Common to all	PQ 25a ^{MC}					1.11 2.3 5.2 7.6			
Rights Specific	PQ 23b ^{MC} PQ 23c ^{FR}								

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Consumer Participation Common to all	3.1a ^{MS} 9.1.2	Std 4.4		CSOLE6		1.7.1 8.1.15			
Consumer Participation Specific	3.5 ^{ES} 3.1.1 3.1.11 3.1.12 5.1 ^{ES} 5.1.1 8.3.2					1.7.6 2.4.1 2A.11			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Consumer Participation Common to all						3.1			
Consumer Participation Specific						3.5			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Client Records Common to all	4.2.1 4.2.3 4.2.4 4.2.5 4.2.10	3.1.9				5.1.1			
Client Records Specific	4.2.14	3.1.2			7.1.7				
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Client Records Common to all						10.8			
Client Records Specific									

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Access Common to all	1.1 ^{ES} 1.1.1 1.1.4 1.1.5 1.1.6 1.1.13	1.1.1 1.2.1	3.3.1		1.1.5				
Access Specific	1.3 ^{ES} 1.1.11 1.1.12	1.3.1							
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Access Common to all				Std 1.3		11.1.8 11.2.2 11.2.13			
Access Specific	PQ 3d ^{FR}	KPI 1.2				11.4.E.3			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Care Support Planning/ Assessment Common to all	2.1a ^{MS} 2.1.1	2.1.1				1.1.1 1.2.1			
Care Support Planning/ Assessment Specific	2.5 ^{ES} 10.3.1 10.4.1	2.4.1				3.4.1 3.4.2 3.7.1 6.2.1			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Care Support Planning/ Assessment Common to all						11.3.7 11.3.20			
Care Support Planning/ Assessment Specific	PQ 16b ^{Mc} PQ 15b ^{Mc}					11.2.11			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Treatment & Support Common to all	4.2.12				1.4.1				
Treatment & Support Specific	1.2.1 4.3.2 10.2.2 10.4.15 10.4.20 10.5.1	1.3.4 2.5.1 2.5.5 9.4.3			1.6.6	10.9.6			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Treatment & Support Common to all						11.4.12			
Treatment & Support Specific						11.4.A.14 11.4.B.1 11.4.B.17 11.4.C.15 11.4.D.8 11.4.E.15 11.5.8 11.6.7			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Child Protection & Abuse of Service Users Common to all	10.1 ^{MS} 10.6.1	2.4.7	2.4.1			3.1.10			
Child Protection & Abuse of Service Users Specific	10.2 ^{MS} 10.6.3 10.6.18		2.5.1						
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Child Protection & Abuse of Service Users Common to all		KPI 12.1				2.2			
Child Protection & Abuse of Service Users Specific						11.4.B.16			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Behaviour Common to all	10.2.8	2.4.10 9.3.6				3.3.5			
Behaviour Specific	10.2.6 10.6.9					2A.6			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Behaviour Common to all									
Behaviour Specific									

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Integration Common to all					1.6.5				
Integration Specific	5.2.1 8.12 ^{ES}			WTEME3 SOFE8	1.6.7 1.7.3 2.3.2 2.3.4 2.4.4	1.1.9 7.2.3			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Integration Common to all						8.1.5 9.4			
Integration Specific					Std 3.2	8.2.4 8.3.3 11.1.3 11.4.B.3			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Program Areas Common to all									
Program Areas Specific	9.1a ^{MS} 9.5 ^{ES} 9.6 ^{ES} 9.1.1	1.3.3			Std 2.1 2.1.1 Std 4.3 4.1.4 4.2.3 5.1.2 6.1.2 6.4.2 6.6.6 8.2.6	1.5.4 1.8.6 2.1.1 2.2.1 2.3.4 2.3.11 2.3.12 2A.1 2A.8			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Program Areas Common to all									
Program Areas Specific						4.3 6.1			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Special Needs Groups Common to all									
Special Needs Groups Specific		1.1.10 1.1.11 1.2.13 1.2.14 1.2.15 2.1.8 2.1.13 2.4.13				3.6.7			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Special Needs Groups Common to all									
Special Needs Groups Specific									

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Media Common to all									
Media Specific		5.2.4			3.5.2 3.5.3				

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Media Common to all									
Media Specific									

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Management Common to all									
Management Specific	8.3.1 8.9.1 EPR 8.9.1	6.4.1 6.4.2				8.4.6 8.4.7 8.4.8 8.4.9			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Management Common to all									
Management Specific									

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Workforce Development Common to all	8.5.2 8.6.2 8.7.1 8.7.2 8.8.1 8.9.2	8.1.1 8.3.1 8.4.9 8.5.1 9.3.1 9.5.3	2.5.3 6.3.1		5.2.1	10.1.1 10.5.1 10.8.1 10.9.1 10.7.6 10.9.9			
Workforce Development Specific	8.6.1 EPR 8.6.3	8.4.4 8.5.5 8.5.6 9.3.5 9.5.1				10.4.4 10.8.7 10.9.5 10.10.1			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Workforce Development Common to all	PQ 12a ^{MC} PQ 12b ^{MC}								
Workforce Development Specific									

Domain 1.1: Element 4 Accountability

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Finance Common to all	8.1.3 8.1.11	Std 6.3	6.5.3			Std 8.4			
Finance Specific	8.1.15 EPR 8.1.7 EPR 8.9.2	1.3.6 2.4.12 6.3.1 6.3.4 6.3.7		SMEME3 SMFE5	4.2.5 Std 9.1	2A.10 8.4.1 8.4.4			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Finance Common to all					Std 1.4				
Finance Specific						9.12 9.13			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Responsibilities Common to all	8.5 ^{ES} 8.1.5 8.1.6 8.1.12 EPR 8.1.3 EPR 8.1.5	6.1.1 6.1.2 6.1.7 6.1.8	6.5.1			8.1.5 10.9.2			
Responsibilities Specific	6.1.1 8.1.13 8.1.16	Std 4.5 Std 6.1 6.3.6 8.6.2		CEME4 CFE5 SOOLE13	3.3.3 4.1.8 8.1.7 9.1.2 Std 9.2 9.2.1 9.2.3 9.2.6 9.2.8	8.1.2 8.1.3 8.1.7 8.1.4 8.4.12 10.11.3			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Responsibilities Common to all									
Responsibilities Specific									

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Resources Common to all	8.10 ^{ES}	Std 7.1		SMOLE7					
Resources Specific		Std 6.4 6.4.6 7.1.4	Std 6.6		3.3.7 6.1.7 Std 8.2	8.4.13 8.3.5 9.1.5			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Resources Common to all									
Resources Specific					Std 1.3	9.14 9.15			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Management Common to all	Std 8 8.11	6.1.5 Std 6.2 6.2.5 6.3.5		LOLE12		Std 8.1 8.1.8 8.1.11 8.1.13 8.1.14			
Management Specific	8.1.10 8.1.14 EPR 8.1.6		Std 6.5						
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Management Common to all						Std 9 9.2			
Management Specific						Std 8.1 8.1.1 9.3			

Section 1: Domain 1.2 Management

Management is the process of planning, implementing, monitoring and improving the efficiency and effectiveness of an organisation and its staff (NCOSS definition based on the definition of performance management used by CPA Australia).

Information Management: the process of planning, organising, analysing and using data and information to monitor, review, improve and report organisational performance. Information management includes information technology systems and the concept of 'Knowledge Management' i.e. the ability "to create, identify, capture and distribute knowledge to the people who need it" (Newman, 1996). Transfer of information or knowledge may occur electronically, in hard copy such as memos or minutes of meetings; it may occur face to face at staff, team or case conference meetings at which organisational or client information is shared. Dissemination externally may include release of client information to other agencies involved in support or care of the client and/or their family or carer. Disaggregated service data may be released under the Federal Privacy Act and State Records Acts eg HACC, Drug & Alcohol and SAAP Minimum Data Sets. Finally, information management also includes the release of culturally and literacy appropriate material to the community, service users and stakeholder agencies.

Administration Systems: those systems which support the governance, management and operational functions of the organisation. They may include designated personnel, systems that perform or support administrative functions including purchasing, fleet management, contract management, equipment maintenance systems, invoice reconciliations and postage.

Planning, Evaluation, Quality Improvement incorporates the Plan-Do-Check-Act cycle which underpins the concept of continuous quality improvement. Planning should be structured, participative and responsive to the needs and priorities of the community, funder and stakeholder agencies. Evaluation should target governance, management, workforce and service users to ensure effective and efficient operation and delivery of system and care outcomes. Information gained through information and knowledge management systems add value to that gained from planning and evaluation activities to inform future planning and improvement activities.

Risk Management: "is the culture, processes and structures that are directed towards the effective management of potential opportunities and adverse effects". It is achieved through "the systematic application of management policies, procedures and practices to the tasks of establishing the context, identifying, analysing, evaluating, treating, monitoring and communicating risk" (Australian New Zealand International Standards AS/NZS 4360:1999 p4).

Facilities Management: buildings should conform to Building Code of Australia standards, OH&S standards and provide a comfortable, safe and culturally appropriate environment for staff, visitors and service users.

Domain 1.2: Element 1 Information Management

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Client Information Common to all	4.5 ^{MS}	Std 3.1			Std 7.1	4.2.3			
	4.9 ^{ES}	3.1.1.			7.1.3	4.2.4			
	4.1.3	3.1.5			7.1.4	Std 5.1			
	4.1.4	3.1.7			7.1.5	5.1.2			
	4.1.6	3.1.10			7.1.6	5.1.5			
	4.1.12	4.3.2			7.1.8	5.1.6			
	4.1.13				7.1.9	5.1.7			
	4.2.7					5.1.8			
	4.2.9					Std 5.2			
	4.2.8					5.2.1			
	4.2.10					5.2.2			
	4.2.11					5.2.3			
	4.2.15					Std 5.3			
	EPR 4.2.1								
	Client information Specific	4.1.7	3.1.6			1.5.5	1.4.9		
4.2.13		3.1.11			1.6.3	3.2.6			
10.4.18					4.1.6	3.2.7			
10.5.27					6.5.3	3.5.5			
10.5.28					9.2.4	4.2.7			
10.5.29						5.2.5			
10.5.30						5.3.1			
					5.3.2				
					5.3.3				
						6.1.7			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Client Information Common to all	PQ 20a ^{MC} PQ 20b ^{FR} PQ 21a ^{MC} PQ 21b ^{MC}	KPI 4.1	AR 11	Std 1.8	Std 1.5 Std 2.4	5.4 9.25 Std 10 10.2 10.3 10.4 10.5 10.6 10.7 11.6.6		5.3	5.3
Client Information Specific									

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Comments & Complaints Common to all	Std 7 7.3 ^{MS} 7.4 ^{MS} 7.5 ^{ES} 7.7 ^{ES} 7.10 ^{ES} 7.1.6 7.1.7 7.1.8 7.1.9 EPR 9.1.4 10.6.12	Std 4.2 4.2.1 4.2.3	1.3.2			Std 4.3			
Comments & Complaints Specific	7.1.4 7.1.5 EPR 7.1.1	4.2.4				4.3.3			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Comments & Complaints Common to all	PQ 22c ^{FR} PQ 23a ^{Mc}	Std 7 KPI 7.1 KPI 7.2 KPI 7.3	AR 10	Std 2.4		1.10		6.1	6.1
Comments & Complaints Specific	PQ 22d ^{FR} PQ 23c ^{FR}					5.9			

State										
	DSS	SAAP	FSSA	SEF	CSM	OHC				
Knowledge Common to all	1.2 ^{ES} 1.1.2 1.1.3 1.1.17 1.1.19 2.2 ^{MS} 3.2 ^{MS} 3.1.4 5.2.3 7.2 ^{MS} 7.9 ^{ES} 7.1.10 7.1.13 8.2.7 EPR 8.2.3 8.3.5 9.2	1.1.4 3.2.4 4.5.2 5.1.2 5.1.3 6.2.4 8.3.5	4.3.1 5.2.1		2.3.1	Std 7.1 7.1.1 7.1.3 7.3.4 8.5.4 10.5.7				

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Knowledge Specific	1.9 ^{ES}	Std 3.2	2.4.2	ComEME2	1.7.2	9.1.7			
	4.2 ^{MS}	3.2.1	5.2.2	ComFE3	2.1.2	10.5.5			
	EPR 4.3.1	3.2.2	6.4.4	ComFE4	2.1.3	10.5.8			
	6.1.10	3.2.3		ComOLE6	2.3.5	10.7.4			
	EPR 8.1.4	4.4.6		ComOLE7	3.2.6	10. 10.4			
	EPR 8.2.2	5.2.1		POLE8	3.3.6	7.2.2			
	EPR 8.3.4	6.4.3		LFE4	3.5.10	Std 7.3			
	8.8.10	8.3.4		CSFE4	3.5.9	7.3.2			
	10.6	8.3.6		SOEME4	3.5.1	1.8.3			
	10.1.2	8.4.5		SMOLE9	4.3.1	1.8.5			
		8.4.8			4.3.3	2.1.4			
					4.3.4	4.1.2			
					Std 4.4	4.1.3			
					4.4.5	4.3.4			
					4.4.6	7.3.5			
					4.4.7	9.2.7			
					6.1.6	2.2.7			
					6.1.8	5.3.4			
					6.2.5	5.3.5			
					Std 6.6	10.7.7			
					6.6.1	9.2.8			
					6.6.3				
					6.6.5				
					Std 7.2				
					7.2.1				
					7.2.4				
					7.2.5				
				7.2.6					
				7.2.7					

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Knowledge Specific continued					Std 8.1 8.1.1 8.1.5 8.1.6 8.2.2 8.2.8 8.3.1 8.3.2 8.3.3 8.3.4 8.3.6 8.5.2 8.5.7 9.2.5				
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Knowledge Common to all				Std 4.1	Std 1.5 Std 3.3	11.1.6 11.2.1	GPP 2.1		
Knowledge Specific						7.1 8.1.3 9.31 9.33			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Data Management Common to all									
Data Management Specific	4.3 ^{MS} 4.1.14	3.3.1 3.3.2 7.1.8			1.4.5 2.3.6 4.3.2 6.1.3 8.2.9 9.1.8	8.5.1 8.5.2 8.5.3 8.5.6 8.5.7			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Data Management Common to all									
Data Management Specific	PQ 2c ^{FR} NSW SIA PQ 2c & 2d ^{FR}		AR 3			9.22 9.23 9.24 9.26 9.27			

Domain 1.2: Element 2 Administration Systems

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Finance Common to all	8.9.8 EPR 8.9.3	6.3.2 6.3.3 6.3.8	6.5.3			8.4.2 8.4.11			
Finance Specific		6.3.6 6.3.9		CEME2 CEME3	9.1.4 9.1.7 9.2.7	2.3.7 2.3.8 2.3.9 8.4.3 8.4.12			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Finance Common to all	PQ 11b ^{MC}								
Finance Specific						3.4			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Equipment Common to all									
Equipment Specific	8.9.5 8.9.10	6.4.4 6.4.5 6.4.6 9.5.2	6.6.1			8.4.10 8.6.9			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Equipment Common to all									
Equipment Specific									

Domain 1.2: Element 3 Planning, Evaluation & Quality Improvement

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Strategic Planning Common to all	EPR 2.1.1 8.3 8.3.3	Std 7.1 7.1.2 7.1.3 7.1.5 7.1.6 7.1.12	4.3.2 Std 5.1 5.1.2 Std 5.2 Std 6.2	ComEME1 WTEME1 WTEME2 WTFE6 WTOLE8 WTOLE11 CSEME1 CSEME3 SOEME1 SOFE6 SOOLE10 SMEME1 SMOLE10	2.1.4	Std 9.1 9.1.1 9.1.6 9.1.10			
Strategic Planning Specific	8.3.4 EPR 8.3.2	7.1.4 Std 1.2 7.1.10		LEME3 LOLE10 ComOLE5 WTOLE9 POLE11	2.2.4 3.2.4 3.3.2 3.5.4 Std 4.1 4.1.2 4.1.7 8.2.1 8.4.1	2.1.3 2.2.8 7.3.1 9.1.2 9.1.3 9.1.4 9.1.5 9.1.9 9.1.11 10.5.2			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Strategic Planning Common to all	PQ 789a ^{MC} NSW SIA PQ 7a ^{MC} PQ 789e ^{FR} NSW SIA PQ 7b ^{FR}	KPI 3.1			Std 2.1	Std 3 9.7 9.8 9.9 9.11 11.1.2			
Strategic Planning Specific	PQ 789f ^{FR} NSW SIA PQ 7c ^{FR} PQ 15f ^{FR}				Std 2.2 Std 2.3	7.2 9.10 11.4.D.3			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Participation in Planning, Evaluation & Review Common to all	2.1b 3.1b EPR 3.1.1 4.1b 7.1b EPR 7.1.3 8.2.8 EPR 8.2.1 8.4 9.1b 10.6.12	3.1.4 4.4.1 4.4.2 6.2.2 6.2.3 Std 7.2	1.3.2 4.1.2 6.2.1 6.2.2	CSOLE6 SOOLE12 SOEME2 CSOLE9 SMOLE10	1.5.11 3.3.4 7.1.2	2.4.4 5.1.4 5.2.4 8.1.12 Std 9.2 9.2.2 9.2.5 9.2.3			
Participation in Planning, Evaluation & Review Specific	5.1.4 8.1.19 10.1.8 10.2.9 10.5.2 10.6.13	1.1.9 2.2.4 2.5.9 4.2.6 4.4.3 4.4.7 6.1.6 7.1.13 7.1.9 7.2.1 7.2.2 7.2.4 8.4.6 9.3.3 9.3.3	4.2.2	SOOLE11 COLE9 SOOLE9	1.4.4 1.6.8 2.4.1 3.1.4 3.1.9 3.2.2 3.2.8 4.3.6 6.2.3 6.2.4 6.4.5 8.2.4 8.2.7 8.4.3 8.4.4 8.5.3	1.1.11 2.2.3 3.6.14 5.3.6 8.5.8 9.2.1 10.5.5 10.5.6 10.9.3			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Participation in Planning, Evaluation & Review Common to all	PQ 11a ^{MC}	KPI 8.1		Std 2.3		3.2 9.29 9.30 11.4.B.2 11.4.E.11	GPP 2.6		
Participation in Planning, Evaluation & Review Specific	PQ 789d ^{MC} not in NSW SIA PQ 10b ^{FR} PQ 11 f ^{FR}					9.5 8.1.6 11.3.19			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Informed decision making Common to all	EPR 4.2.1 EPR10.2.2	Std 3.3 4.2.7 7.1.7 7.2.3		LOLE8	1.5.10	4.3.7 Std 8.5 8.5.5 9.2.4			
Informed decision making Specific	EPR 7.1.2	3.3.3		SMOLE9	6.5.2 7.2.8 Std 8.3 8.3.5 Std 8.4	8.1.9 9.2.6			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Informed decision making Common to all	PQ 789b ^{MC} not in NSW SIA PQ 789c ^{MC} not in NSW SIA	KPI 3.2	AR 14			1.12 2.7 3.7 4.4 5.11 6.10 7.7			
Informed decision making Specific						8.1.7 8.2.5 8.3.4 9.34 10.9 11.1.9 11.2.14 11.3.21 11.4.13 11.4.A.15 11.4.B.18 11.4.C.9 11.4.C.16 11.4.D.9 11.4.E.16 11.5.9 11.6.8			

Domain 1.2: Element 4 Risk Management

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Abuse/Neglect Common to all									
Abuse/Neglect Specific	10.6.13								
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Abuse/Neglect Common to all		KPI 12.1	AR 12			2.2			
Abuse/Neglect Specific						11.4.B.16			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Financial Management Common to all									
Financial Management Specific				SMEME3 SMFE5	4.1.1 9.1.5 9.1.10	8.4.5			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Financial Management Common to all					Std 1.4				
Financial Management Specific									

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Safety Common to all		Std 9.4	Std 2.5	SOEME5					
Safety Specific	EPR 10.2.3 10.4.12 10.5.3 10.5.9 10.5.13 10.5.14 10.5.15 10.5.16 10.5.17 10.5.20 10.5.21 10.5.22 10.5.24 10.5.26 10.6.2 10.6.14 10.6.16 10.6.17 10.6.19	9.4.3 9.4.6 9.5.3			3.5.8	2.3.6			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Safety Common to all						Std 2			
Safety Specific				Std 3.5.1	Std 1.3	9.32 11.3.2			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Risk Management Common to all	EPR 8.3.1 8.8.8 8.8.9	9.4.1 9.4.2				8.6.6 8.6.7			
Risk Management Specific	4.3.3 4.3.4 4.3.5 4.3.7 EPR 4.3.2 EPR 8.8.1 8.9.6 10.5.2	9.1.9		LOLE8 SMFE6 SMOLE8 CEME2 COLE7 COLE9	3.5.6 3.5.7 3.5.11 6.1.6 9.1.3 9.1.6 9.2.5				
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Risk Management Common to all					Std 1.6				
Risk Management Specific									

Domain 1.2: Element 5 Facility Management

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Environment Common to all	4.1.8 8.2 8.9.4	4.5.6				Std 8.6 8.6.1			
Environment Specific	8.9.9 8.9.10	Std 9.1 9.1.1 9.1.2 9.1.3 9.1.4 9.1.5 9.1.7 9.1.8 9.1.10 9.1.11 9.2.2 9.3.7 9.4.9 9.4.10 Std 9.5	Std 1.1 1.1.1 2.4.2 3.2.1		Std 4.2 4.2.1 4.2.2	Std 3.1 3.1.1 3.1.2 3.1.3 3.1.4 3.2.5 7.3.6 8.6.2 8.6.3 8.6.4 8.6.5			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Environment Common to all				Std 1.2		5.6			
Environment Specific				Std 3.5.1		5.7 11.4.A.3 11.4.B.4 11.4.D.7 11.4.E.14			

Section 1: Domain 1.3 Workforce Development

Workforce Development is the current term for what has previously been referred to as Human Resource (HR) Management. It is defined as “a multi faceted approach which addresses the range of factors impacting on the ability of the workforce to function with maximum effectiveness” (National Centre for Education & Training in Addictions (NCETA)).

Human Resource Planning: should form part of the strategic planning activities of an organisation. HR planning targets the current and future needs of the organisation measured by the emerging characteristics of the community it serves i.e. demographic, changes in the needs profile of the community and strategic directions of commonwealth and state funder agencies to which the organisations operation’s must align. It will also be influenced by new practice evidence that alters the historical deployment of staff in certain areas and thus is central to the management of organisational change or restructure.

Personnel Management: refers to all those functions of a HR Department. These include recruitment, selection, termination, monitoring and implementation of industrial awards, enterprise agreements, grievance resolution systems, performance management, i.e. identification of training needs and competencies, provision of HR policies and procedures outlining entitlements and processes, position descriptions, information packages, salary packaging and payroll.

Training & Development: includes initial orientation and induction processes for new employees’, provision of annual training updates in areas of statutory compliance, implementation of training programs related to the identified needs of staff and emerging needs of service users. It will include opportunities for study and conference leave, rotation within or between service sites and provision of training or education by external providers. It also includes development programs for governance committee members.

Occupational Health & Safety (OH & S): refers to those roles and responsibilities of organisations, including Company Directors, employees and volunteers, to identify, report and address any hazards which impact on the capacity of the organisation to comply with OH&S legislation and to provide a safe and effective service, work and care environment.

Domain 1.3: Element 1 Human Resource Planning

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Workforce planning Common to all	8.5.3	1.2.2	1.1.2	PEME2		10.2.1			
Workforce planning Specific		8.1.2 8.3.2	4.2.1 Std 6.3	POLE9 WTFE7	1.7.1 Std 5.1 5.1.1 5.1.5 5.1.7 8.4.3	8.5.7 10.1.3 10.1.2 10.2.4 10.5.3 Std 10.10			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Workforce planning Common to all	PQ 12d ^{FR}				Std 1.2	7.4	GPP 2.5		
Workforce planning Specific						8.1.4 9.16			

Domain 1.3: Element 2 Personnel Management

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Recruitment & Employment Common to all	8.5.6 8.5.7 8.5.8 8.5.10 8.8.6	6.1.8 6.2.1 Std 8.1 8.1.3 8.1.4 Std 8.5	6.3.2	PEME3	5.1.6	8.1.10 Std 10.1 10.1.6 10.1.7 Std 10.8 10.9.2			
Recruitment & Employment Specific	8.4.4 8.5.5 8.5.9 EPR 8.5.1 EPR 8.5.2 EPR 8.5.3 EPR 8.5.4 EPR 8.6.4	2.4.6 8.5.2 8.5.3 8.5.7 8.5.8	1.4.1 5.1.1		5.1.3 5.1.4 5.2.4 7.2.3	5.1.3 7.1.2 8.1.4 8.1.5 8.6.11 10.1.4 10.1.5 10.1.8 Std 10.2 10.2.2 10.2.3 10.4.6 10.8.2 10.8.3 10.8.5 10.8.6 10.10.2 10.10.3			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Recruitment & Employment Common to all	PQ 12a ^{Mc} PQ 12b ^{Mc} PQ 11e ^{Mc}		AR 4	Std 4.2		9.6			
Recruitment & Employment Specific						1.9			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Supervision Common to all	8.7 ^{ES} 8.6.5	Std 8.2 8.2.1	2.4.4 6.4.2 6.4.3		4.1.3 Std 5.2	Std 10.3 10.3.1 10.3.2 10.3.3 Std 10.4			
Supervision Specific	EPR 8.6.5				5.2.2 5.2.3	10.3.5			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Supervision Common to all			AR 5	Std 4.3		9.20 11.3.15			
Supervision Specific									

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Performance Management Common to all	8.6.8	8.2.2	Std 6.4 6.4.7	PFE4	4.4.1	10.3.4 10.4.5			
Performance Management Specific	6.1.11 8.6.3 8.6.6 8.6.7 8.6.9 EPR 8.6.2 8.7.3 8.7.4 8.7.5 10.6.4	5.1.1 Std 8.6 8.6.3	Std 1.5	LOLE11 POLE8	3.1.5 3.1.6 3.2.3 3.3.5 5.2.5 6.2.2 6.3.1 6.5.1 8.2.3 9.1.9 9.2.2	10.7.5 10.7.9 10.11.4			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Performance Management Common to all	PQ 12e ^{FR}	Std 11 KPI 11.1 KPI 11.2	AR 7			9.17			
Performance Management Specific	PQ 5e ^{FR} PQ 16d ^{FR} PQ 17f ^{FR}					7.5 8.2.2 8.3.1 9.28			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Work Satisfaction Common to all		Std 8.4 8.4.1 8.4.2				Std 10.7 10.7.1 10.7.2 10.7.3			
Work Satisfaction Specific		7.1.11 8.4.7 8.5.4	4.2.2	WTOLE10 PFE7	5.1.8 5.2.6 5.2.7	9.1.8 10.7.8 10.8.4 10.10.7			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Work Satisfaction Common to all				Std 4.5					
Work Satisfaction Specific									

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Teamwork Common to all									
Teamwork Specific		8.4.3	Std 1.6 1.6.1	WTFE4 WTFE5		Std 8.3 8.3.1 8.3.2 8.3.3 8.3.4 10.10.4			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Teamwork Common to all									
Teamwork Specific									

Domain 1.3: Element 3 Training & Development

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Training & Development Common to all	4.1.2 7.1.11 8.6 ^{ES} 8.8.4 10.6.6 10.6.11	1.2.3 2.1.4 3.1.8 4.1.6 4.2.4 4.2.5 4.3.5 Std 8.3 9.3.2 9.3.4 9.3.6 9.4.5	1.1.2 3.1.1 Std 6.4	POLE10		4.2.2 5.1.9 Std 10.5 10.9.2 10.9.4 10.10.6			
Training & Development Specific	EPR 8.3.3 8.6.10 8.9.11 10.4 ^{ES} 10.5 ^{ES} 10.3.2 10.3.4 10.4.14 10.5.5 10.5.19 10.6.7 10.6.8 10.6.22	1.1.6 1.2.9 1.2.12 2.4.8 2.4.9 2.4.11 9.5.2	2.3.1 2.3.2 2.4.3 2.5.2 3.1.3 6.4.5 6.4.6	PFE6	1.3.2 8.4.2 8.5.5	1.7.7 3.1.9 3.3.2 3.4.13 3.7.4 9.2.9 10.5.9 Std 10.6 10.6.1 10.6.2 10.6.3 10.6.4 10.10.6			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Training & Development Common to all	PQ 4e ^{FR} PQ 12c ^{Mc} PQ 12f ^{FR} (a, b & d) PQ 23d ^{FR}	KP1 11.3	AR 6	Std 4.4		2.4 9.18 11.3.10			
Training & Development Specific	PQ 12f ^{FR} (c) PQ 12g ^{FR} PQ 16c ^{FR} PQ 24b ^{Mc} PQ 25f ^{FR}					11.3.15			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Orientation/ Induction Common to all	8.1.7 8.2.6 8.5.4 8.5.11 8.6.4	8.3.3 8.6.1	6.4.1			10.5.4 10.10.5 10.11.2 10.11.5			
Orientation/ Induction Specific			6.1.2	WTFE6 PFE5					

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Orientation/ Induction Common to all						9.19			
Orientation/ Induction Specific									

Domain 1.3: Element 4 Occupational Health & Safety

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Occupational Health & Safety Common to all	4.3.8 8.8.7 8.8.9 8.8.10 EPR 8.8.1 EPR 8.8.2 EPR 8.8.3 EPR 8.8.4 EPR 8.8.5	8.2.3 Std 9.2 9.2.1 9.2.3 Std 9.3 9.3.7 9.5.4	6.3.1 6.4.8			8.6.2 8.6.5 10.3.6 Std 10.9 10.9.7 10.9.8			
Occupational Health & Safety Specific	8.8.11 8.8.12	9.2.4 9.2.5 9.4.1 9.4.4			4.2.4	8.6.8 8.6.10 8.6.12 10.4.2			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Occupational Health & Safety Common to all			AR 8			9.21			
Occupational Health & Safety Specific						2.5			

Section 2: Providing Services & Programs

Statement of Intent: Services are designed to provide improved outcomes to service users through a planned, collaborative approach and delivery of evidenced based programs and services.

Section 2 Domain 2.1 Access & Equity

Access and equity is the principle that underpins service delivery in the non government sector. Many NGOs were established as voluntary organisations in response to issues of access and equity in their local areas. These issues could pertain to funding characteristics of mainstream services, the range of services provided locally or the needs of a particular group.

Access The National Health Performance Framework Report (2001: 65) characterises ‘accessible’ services as “the ability for people to obtain appropriate” services “at the right place, right time, irrespective of income, cultural background or geography”. This definition encompasses the issue of fees, opening hours, service structure e.g. mobile or outreach services, telephone helplines and eligibility criteria. It also targets the capacity of frontline staff to engage with and respond to service users and the communities needs.

Entry, Exit & Re-entry: entry, exit and re-entry processes facilitate prompt and comprehensive response to service users needs. Entry should be prioritised according to need or risk to optimise the benefit gained from the allocation of service resources. Entry processes should be coordinated to minimise duplication. Waiting lists may be required for those who, because of low priority or resource constraints, cannot be registered for services in the short term. Entry and exit procedures are linked to appointment, case allocation and client records systems to facilitate continuity of care for service users re-entering the service. Referral may be provided if:

- there is a more appropriate service that the service user should access to meet their needs;
- if there is a service that the service user could access, while on a waiting list;
- if the client is refused a service because of ineligibility or refuses a service but will accept referral to another agency.

Information, Rights & Responsibilities: many standards require service users to be given certain types of information at point of access or registration. Commonly these refer to issues of rights and responsibilities including privacy and confidentiality of service user information held, information on fees and charges, services offered and review of waiting lists.

Domain 2.1: Element 1 Access

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Non Discrimination Common to all	Std 1 1.6 ^{ES} 1.7 ^{ES} 1.1.10 8.4.3	Std 1.1 1.1.3 1.1.5 4.5.6			Std 6.2	Std 1.1 8.6.1			
Non Discrimination Specific		Std 1.3		CSOLE8					

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Non Discrimination Common to all	PQ 2a ^{MC} NSW SIA: PQ 2A+2B PQ 2b ^{MC} NATIONAL ONLY NOT IN NSW SIA PQ 15c ^{MC}	Std 1 KPI 1.1	AR 9	Std 1.1		Std 11.1 11.1.1 11.1.5 11.4.B.13			
Non Discrimination Specific						11.4.B.5 11.4.B.15 Std 11.6			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Emergency Common to all									
Emergency Specific		4.5.9			Std 6.4	1.3.6 1.3.9 2.3.3			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Emergency Common to all									
Emergency Specific						11.1.4	GPP 2.1	14 (s2)	

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Ease of access Common to all									
Ease of access Specific		4.5.3 4.5.4 4.5.5 4.5.7 4.5.8	1.1.1 1.1.3 4.1.1		Std 1.1 6.1.4	7.3.7			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Ease of access Common to all									
Ease of access Specific	PQ 1f ^{FR}					11.1.3 11.1.7			

Domain 2.1: Element 2 Entry, Exit & Re-entry

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Priority Criteria Common to all	1.5 ^{ES}	1.1.1 1.1.2			1.1.2 6.4.1				
Priority Criteria Specific					Std 1.3				
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Priority Criteria Common to all	PQ 1a ^{MC}					11.2.9			
Priority Criteria Specific						11.2.12			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Entry Process Common to all					1.1.1 1.1.3				
Entry Process Specific	1.1.8 1.1.14	2.4.3			6.2.1 Std 6.3 6.3.2 6.3.4 6.6.4				
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Entry Process Common to all				Std 1.3		11.2.6 11.2.7			
Entry Process Specific		KPI 1.2				Std 11.2 11.2.3 11.2.4 11.2.5			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Ineligibility/ Refusal Common to all	1.8 ^{ES} 1.1.20	1.1.7 1.1.8			6.4.4 6.3.5				
Ineligibility/ Refusal Specific	1.1.9								
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Ineligibility/ Refusal Common to all	PQ 1d ^{FR} PQ 3c ^{MC}								
Ineligibility/ Refusal Specific	PQ 3a ^{MC} PQ 1e ^{FR}					11.3.3			

Domain 2.1: Element 3 Information, Rights & Responsibilities

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Informed Common to all	3.3 ^{MS} 3.4 ^{MS} 4.1.15 4.2.6 5.3 ^{ES}	2.3.3			1.1.4	4.1.5			
Informed Specific	1.1.7 1.1.16 1.1.18 1.2.2 2.1.2 2.1.10 4.4 ^{MS}	1.3.2 1.3.3 2.3.6 2.4.18			7.1.4	1.4.7 7.3.4			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Informed Common to all	PQ 5a ^{MC} PQ 5b ^{MC} PQ 5c ^{FR} PQ 22a ^{MC} PQ 25b ^{MC}					1.6 1.8		1.1	1.1
Informed Specific	PQ 3a ^{MC} PQ 3b ^{MC} PQ 3e ^{FR} PQ 5d ^{FR} PQ 6e ^{MC} PQ 15e ^{MC} PQ 21c ^{FR} PQ 22b ^{FR}					11.6.2		1.3	1.3

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Rights & Responsibilities Common to all	1.1.15 Std 4 4.6 ^{MS} 4.1.15 4.2.6	Std 4.1 4.1.3 4.3.2			6.1.5				
Rights & Responsibilities Specific	2.1.11 3.1.5 4.1.5	2.4.3 3.1.6 4.1.5 4.3.4 4.3.6			8.2.5				
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Rights & Responsibilities Common to all	PQ 4a ^{MC} PQ 4b ^{MC} PQ 4c ^{MC} PQ 22a ^{MC}	Std 4		Std 2.1 Std 2.2	Std 2.4	1.2 1.3 1.10		1.2 5.1 5.2	1.2 5.1 5.2
Rights & Responsibilities Specific	PQ 4d ^{FR} PQ 4f ^{FR} PQ 6c ^{MC} PQ 15d ^{MC} PQ 20d ^{FR}					1.7 11.4.E.6			

Section 2: Domain 2.2 Individual & Group Planning

Individual and Group Planning forms the basis of service delivery to service users. The outcome of the planning process can be a care plan or service agreement that acts as a contract between the service user, the service represented by the case manager/primary worker, other organisations and/or individuals including family and carers involved in meeting the needs of the service user(s). The care support plan as such, establishes the basis for communication and continuity across program and organisational boundaries and is the tool by which achievement of client and organisational goals can be evaluated. Where care support planning is not applicable e.g. proclaimed places in short-term SAAP services, a SAAP Minimum Data Set is maintained which details the minimum level of service of which service users can avail themselves.

Client Focus: encompasses the rights of clients to exercise self-control in the selection of services to meet their needs. This is achieved through ensuring participation and informed decision making by the client and if requested by them their elected representative. It infers culturally, age and disability appropriate care support planning which may require the presence of an interpreter and/or advocate.

Assessment & Review: the process of assessment and review may be directed at the identification of clients needs, the formulation of a diagnosis, prioritisation for initial or continuing receipt of services or evaluation of progress towards achieving care plan/service agreement objectives including client goals. Assessment, re-assessment and review can be scheduled at specific intervals or triggered by particular events e.g. deterioration in service users situation. Assessment should be conducted by qualified and/or experienced staff using evidence based assessment tools to identify service user needs, priority and risk profile.

Coordination: refers to the allocation of a case manager/care coordinator or primary worker to each service user. They:

- act as an advocate for the service user internally and externally to the organisation;
- coordinate the care support planning and assessment process and the attendance at meetings by the client, their elected representative and case managers from other services working with the client;
- are responsible for the documentation of the plan and its ongoing review and evaluation in meeting the service user's needs;
- facilitate referral and brokerage of service required to meet the clients needs but not provided by the organisation;
- plan and arrange discharge and transition of the service user to independence in meeting their own needs;
- to other service providers, specialist and mainstream services to continue to meet service users needs;
- arrange and monitor after-care requirements in the short-to medium term; and
- provide continuity of care where re-entry is required.

Documentation: in a common client record (hard copy or electronic) of the assessment findings, the agreed care plan/service agreement signed by the client and documenting the names of case managers in other agencies involved with the client and the delivery of services. Client records are legal documents and can be called on as sources of evidence for appropriate care and should contain accurate, sequential and comprehensive information to support continuity of care and repeated episodes of care.

Referral & Brokerage: at time of assessment needs may be identified which the organisation does not have the resources or capacity to meet. The organisation may refer service users to the range of agencies which are better placed to meet service users needs or have service partners e.g. vocational training and employment placement agencies, accommodation providers, acute or community health services and general practitioners.

Discharge, Transition & After-Care: as the process of entry, exit and re-entry exists on a continuum so does the process of discharge, transition and aftercare. Some services deliver episodes of care and have formal discharge processes from one episode to the next. Others deliver care along a continuum e.g. residential care to step-down accommodation to independent living. These include mental health and SAAP services. In some sectors clients may simply not turn up thus the organisation is unable to institute formal discharge procedures or because of the transient lifestyles of service users be unable to conduct follow-up. Optimally the exit of the service user from one service to another or back to the community is facilitated by the case manager. Arrangements with other service providers that will support the client in the new environment are formalised prior to exit. The case manager should provide the client, family/carer and other service providers with information that outlines criteria for client re-entry into the service and dates and times for follow-up appointment and emergency contact numbers.

Domain 2.2: Element 1 Client Focus

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Respect Common to all	2.9 ^{ES} 3.1.3 5.2.7 8.4.6 9.7 ^{ES} EPR 9.1.3 10.3.6	1.2.5 1.2.8 1.2.10 1.2.11	Std 1.2 Std 1.4 1.4.2 Std 3.1			4.1.4 4.2.5			
Respect Specific	2.1.16 2.1.8 3.8 ^{ES} 3.9 ^{ES} 3.1.6 4.1.10 4.1.11 6.1.12 6.1.15 6.1.16 8.4.7 9.1.4 9.1.5 10.4.16	2.2.5	1.2.2 1.3.1 3.1.1	ComOLE6		1.7.5 3.2.2 3.4.3 4.2.6			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Respect Common to all	PQ 14a ^{Mc} PQ 15a ^{Mc}	KPI 4.2			Std 2.3	7.3 11.4.B.12	GPP 2.5	4.2	
Respect Specific		KPI 6.1			Std 2.5	1.5 5.5 11.3.2 11.3.9 11.4.8 11.4.10 11.4.C.5 11.4.C.14 11.4.E.1 11.4.E.8 11.4.E.10 11.4.E.12 11.4.E.13			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Participatory Common to all	2.3 ^{MS} 2.1.14 2.1.15 Std 3.0	2.1.2 2.1.3	Std 1.3 2.1.2		1.5.6	1.2.3 1.2.5 1.6.3 1.6.4 Std 1.7 1.7.2 3.1.8			
Participatory Specific	1.2.3	2.2.9 4.5.10				1.7.4 2.4.2 2A.12 3.6.6 6.1.2			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Participatory Common to all	PQ 6f ^{FR} PQ 14d ^{FR} PQ 17c ^{Mc} PQ 18/19a ^{Mc}	Std 3				5.3 11.3.5 11.4.11			
Participatory Specific	PQ 17d ^{Mc}	KPI 9.3			Std 2.5	8.2.3 11.4.D.4 11.4.E.4 11.5.2 11.5.3			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Advocate Common to all	3.7 ^{ES} 3.1.10 5.2.6 10.1.2 10.1.3 10.1.4 10.1.8			CSOLE7					
Advocate Specific	7.8 ^{ES} 7.1.12 EPR 9.1.2 10.1.5 10.1.7 10.1.9	2.2.6			3.1.1 3.1.3 3.1.8	1.4.8 1.8.4 3.5.8 4.1.5 4.3.3			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Advocate Common to all						1.6		7.1	7.1
Advocate Specific	PQ 16b ^{Mc} PQ 25d ^{FR}								

Domain 2.2 Element 2 Assessment & Review

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Identifying Needs/Goals Common to all	Std 2.0 2.8 ^{ES} 2.1.3 5.2.5	Std 2.1 Std 2.2	1.2.3 Std 2.3	CSEME3	Std 1.2 1.2.2 Std 1.5 1.5.3	Std 1.1 Std 1.2			
Identifying Needs/Goals Specific	2.1.17	2.2.2 Std 2.4 2.4.14	1.2.1 Std 2.1 2.1.1 2.1.3		Std 1.3 1.4.6 Std 3.1 3.1.7 3.2.7	1.1.2 1.1.4 1.1.5 1.1.6 1.1.10 1.2.9 1.2.10 1.2.11 1.2.12 Std 1.4 Std 3.5			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Identifying Needs/Goals Common to all		Std 2 KPI 2.1 KPI 2.2		Std 1.4 Std 1.5	Std 2.2	Std 11.3 11.4.6	GPP 2.2	2.1	2.1
Identifying Needs/Goals Specific	PQ 1b ^{Mc} PQ 1c ^{Mc} PQ 6g ^{FR} PQ 16a ^{Mc} PQ 16e ^{FR} PQ 17a ^{Mc} PQ 17b ^{Mc} PQ 18/19d ^{FR} NSW SIA PQ 18/19c ^{FR} PQ 24c ^{FR}					2.6 11.2.10 11.3.13 11.4.3 11.4.4 11.4.5 11.4.7 11.4.A.4 11.4.A.5 11.4.B.8 11.4.D.2 11.4.E.7 11.5.7		4.1 4.3	4.1 4.2

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Reassess/ Review Common to all	2.4 ^{MS} 2.1.9	2.1.6			1.5.7	Std 1.6 1.6.1			
Reassess/ Review Specific	1.2.5 1.2.8 2.1.12 10.4.3	2.2.1 2.5.3 2.5.7				1.3.2 1.5.3 1.6.6 1.6.9 3.3.10 3.6.2 3.6.8 3.6.11 6.1.1 6.1.3 6.1.4 6.1.5			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Reassess/ Review Common to all								2 (s2)	
Reassess/ Review Specific	PQ 13a ^{Mc} PQ 13b ^{Mc} PQ 13c ^{Mc} PQ 13d ^{Mc} PQ 13g ^{FR} PQ 14b ^{Mc}					11.3.14 11.3.16 11.3.17 11.3.18 11.6.1			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Quality of Assessment/ Review Common to all	3.1.8 10.2.3		2.3.3	CSFE4	1.2.1 1.2.3 1.3.1 1.3.3 1.5.1 1.5.2 1.5.8 6.3.3	1.1.3 1.6.2			
Quality of Assessment/ Review Specific	5.2.4 10.4.2 10.4.4 10.4.6 10.4.7 EPR 10.4.1 10.5.4 10.5.23		1.5.1 1.5.2 2.3.6	CSFE5	Std 1.4 Std 6.5 8.1.3 8.1.4	1.1.7 1.3.1 1.4.7 2A.4 3.2.3 3.4.9 3.5.1 3.6.3 7.3.3			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Quality of Assessment/ Review Common to all						11.3.1 11.3.6	GPP 2.3		
Quality of Assessment/ Review Specific	PQ 6a ^{MC} PQ 6b ^{MC} PQ 6d ^{MC} PQ 17e ^{FR} PQ 20c ^{FR}					6.4 6.5 11.3.11 11.3.12 11.4.C.4 11.4.D.5 11.4.E.2			

Domain 2.2: Element 3 Coordination

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Coordination Common to all		Std 2.3 2.3.1 2.3.4		SOFE8	Std 1.6	1.1.8 1.2.8			
Coordination Specific	2.7 4.3.6 EPR 4.3.3 EPR 4.3.4 EPR 4.3.5 10.3.3 10.4.9 10.4.18 10.4.19 10.5.6 10.5.18 10.6.20 10.6.21	2.1.11 2.1.12 2.3.5 4.3.3	1.4.4		1.5.9 1.6.3	1.3.8 1.8.2 2.4.3 2A.13 3.4.14 3.5.3 3.5.4 3.5.6 3.5.7 3.6.4 3.6.5 3.6.9 3.6.10 6.1.9 6.2.6 6.2.7 6.2.8 7.2.1 7.2.4 10.4.3 10.4.1			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Coordination Common to all	PQ 18/19b ^{MC} NSW SIA: PQ 18/19A ^{MC}				Std 2.6				
Coordination Specific	PQ 13f ^{MC} PQ 18/19c ^{FR} NSW SIA: PQ 18/19B ^{FR} PQ 24a ^{MC}					8.1.2 8.2.1 11.4.C.12 11.4.D.6 11.6.4			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Case Manager/ Coordinator Common to all		2.4.5			1.6.1	1.2.6 1.5.2			
Case Manager/ Coordinator Specific	EPR 2.1.3	2.3.2 2.3.4				1.2.7 1.3.3 1.3.4 1.3.5 1.3.7 1.5.5 2.3.2 2.3.10 3.6.1			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Case Manager/ Coordinator Common to all						11.2.8 11.6.3			
Case Manager/ Coordinator Specific	PQ 17g ^{FR}								

Domain 2.2: Element 4 Documentation

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Client Records Common to all		3.1.3				1.6.5			
Client Records Specific	3.1.7 3.1.9 10.1.6 10.2.4 10.2.5 10.3.5 10.4.5 10.4.17 10.5.10 10.5.11				1.5.9	1.8.1 3.4.4 3.4.5 3.4.8			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Client Records Common to all						11.3.8		1(s2)	
Client Records Specific						11.3.4			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Care Plan Common to all	2.1.5 2.1.7					1.2.2 1.2.4 1.2.13 1.6.8			
Care Plan Specific	2.1.4 2.1.6 EPR 10.2.4 10.1.6 10.4.11 10.4.13 10.6.10	2.1.5 2.1.8 2.1.9 2.4.2				1.2.14 1.6.7 1.7.3 3.2.1 3.6.12 3.6.13 3.7.3			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Care Plan Common to all	PQ 14e ^{FR}					10.6 11.4.9		3.1	3.1
Care Plan Specific	PQ 13e ^{Mc} PQ 14c ^{Mc} PQ 15b ^{Mc}	KPI 2.3				6.7 11.5.1			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Consent Common to all				CSFE5					
Consent Specific	1.2.6 10.4.19 10.4.22	2.4.15							
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Consent Common to all	PQ 20b ^{FR}					5.4			
Consent Specific						11.4.2 11.4.C.3			

Domain 2.2: Element 5 Referral & Brokerage

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Referral/ Brokerage Common to all	EPR 2.1.4	2.1.7	2.3.5		1.4.3 1.5.4				
Referral/ Brokerage Specific	2.1.13 10.6.23	2.4.4 2.5.6			1.6.2	3.5.9 6.2.5			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Referral/ Brokerage Common to all								3.2 4 (s2)	3.2
Referral/ Brokerage Specific									

Domain 2.2: Element 6 Discharge, Transition & After Care

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Exit planning & Support Common to all	1.2.4 1.2.7	Std 2.5	2.3.7			3.4.12			
Exit Planning & Support Specific		2.5.1 2.5.4				1.4.6 Std 3.6 Std 6.1 6.1.8 6.1.9 Std 6.2 6.2.2 6.2.3 6.2.4			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Exit planning Common to all	PQ 6h ^{FR}			Std 1.6		Std 11.5			
Exit planning Specific						6.7 11.4.E.5 11.5.4 11.5.5 11.5.6 11.6.5			

Section 2: Domain 2.3 Implementation

Implementation refers to the process of carrying out the agreed plan of care. This domain represents the 'non-generic' components of existing standards e.g. the Substitute Care Standards cover the placement of children and young adults in 'out-of-home care'; the Disability Employment Standards aim to place persons with disabilities in employment and the Supported Accommodation Assistance Program (SAAP) Standards aim to provide service users with short, medium and long term accommodation.

Support & Placement: refers to those services that the organisation provides aimed at improving the service users quality of life or wellbeing. They may include shower, food and clothing as in the case of crisis services or drop in centres. It may involve providing paid staff or the volunteer support of individuals in their home e.g. shopping, transport, personal care or domestic assistance. It may also include programs aimed at involving the service user in leisure or other activities which support their participation in the community and/or offer respite to carers and families.

Counselling/Mediation: may be offered along a continuum between emotional support for those service users who are geographically or socially isolated to mediation in the case of family or relationship breakdown. In this instance the service user is the primary recipient of counselling, but counselling sessions may involve other parties with the service user's consent e.g. family groups or other clients in a supported accommodation house. Counselling/mediation may be directed at behavioural change, building resilience and family reconciliation. Counselling/mediation practices should be evidence based and relevant to the context in which the organisation operates.

Health Maintenance: is directed at the prevention, maintenance and promotion of physical, mental, emotional and developmental health and wellbeing. It may be delivered across a number of settings from acute e.g. mental health inpatient to the community or home setting. It may be delivered by professional staff or, under their supervision, non-professional persons including carers and families. Where it involves the instigation of any kind of treatment or therapy it must be with the informed consent of the individual service user. In the case of children or persons with an intellectual disability or acquired brain injury, who are unable to give informed consent, the consent of their nominated carer, family member or legal guardian is required.

Developing Knowledge & Skills: so that the service user may fully participate in their community whether that be through the development of knowledge and skills in vocational/employment, social or relationships skills, self advocacy, consumer representation skills, living skills including literacy, budgeting, cooking and other forms of self care.

Group Work: may be directed at providing information sessions to groups in the community, in other services, or of individuals or families/carers that share particular issues. Activities could include the auspicing of Alcoholics Anonymous, Al-Anon, Narcotics Anonymous meetings, working with groups of general practitioners in the provision of a shared care program or providing support to groups of foster carers.

Education: may be directed at providing education to groups of volunteers who will be involved in supporting or providing services to service users e.g. foster carers, mediators, volunteers in the home or carers for persons with disabilities. Education may also target mainstream service personnel to provide support to their level of practice/competence/cultural safety in engaging service users. Some organisations may be Registered Training Organisations (RTOs) and be involved in providing Train the Trainer programs.

Domain 2.3: Element 1 Support & Placement

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Personal care & support Common to all									
Personal care & support Specific	4.1.9 10.4.10	1.3.5 2.2.3				3.7.2			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Personal care & support Common to all									
Personal care & support Specific						11.4.A.13 11.4.B.6		5 (s2) 6 (s2) 7 (s2) 8 (s2) 10 (s2) 15 (s2) 16 (s2) 17 (s2)	

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Activities & Programs Common to all	Std 5.0 5.4 ^{ES} 6.1.7								
Activities & Programs Specific	5.2 ^{ES} 5.1.3 6.1.8 EPR 6.1.1 Std 9.0	2.4.17	1.4.3 Std 2.2 2.2.2 2.3.4 3.1.2 3.1.3 Std 3.2		1.4.2	2.4.7			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Activities & Programs Common to all		Std 5							
Activities & Programs Specific						6.8 Std 11.4.A 11.4.A.10 11.4.A.11 11.4.E.9		9 (s2) 11 (s2)	

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Placement Common to all		Std 9.1				Std 2A			
Placement Specific	10.5.25	9.1.6				Std 1.3 1.4.5 1.4.10 Std 1.5 1.5.1 2.3.5 2A.2 2A.5 2A.7 2A.9 3.1.5 3.1.6 3.1.7 Std 3.2 3.2.6 3.2.7 Std 3.3 3.3.3 3.3.8 3.4.10 4.2.6			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Placement Common to all						Std 11.4.B			
Placement Specific		KPI 6.2 Std 9 KPI 9.1 KPI 9.2 KPI 9.3				5.8 5.10 11.4.A.8 11.4.B.2 11.4.B.7 11.4.B.9 11.4.B.11			

Domain 2.3: Element 2 Counselling & Mediation

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Counselling & Mediation Common to all									
Counselling & Mediation Specific		2.2.7 2.2.8				1.4.1 1.4.2 1.4.3 1.4.4 Std 1.8			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Counselling & Mediation Common to all									
Counselling & Mediation Specific				Std 3.1.1 Std 3.1.2 Std 3.4.1 Std 3.4.2 Std 3.5.2				12 (s2)	

Domain 2.3: Element 3 Health Maintenance

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Monitoring & maintaining health status Common to all									
Monitoring & maintaining health status Specific	10.2.7 10.4.3 10.4.4 10.4.8 10.4.9 10.4.10 10.5.7 10.5.8 EPR 10.4.2					Std 3.4 3.4.4 3.4.5 3.4.6 3.4.7 3.4.8 3.4.10 3.4.11 Std 3.7 3.7.2 3.7.5 3.7.6			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Monitoring & maintaining health status Common to all									
Monitoring & maintaining health status Specific						6.6 8.2.1 Std 11.4 11.4.1 11.4.B.6 Std 11.4.C 11.4.C.1 11.4.C.6 11.4.C.7 11.4.C.8 11.4.C.10 11.4.C.13 Std 11.4.D 11.4.D.1 Std 11.4.E		3 (s2) 6 (s2) 7 (s2) 8 (s2) 10 (s2) 13 (s2)	

Domain 2.3: Element 4 Developing Knowledge & Skills

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Knowledge/Skill Development Common to all									
Knowledge/Skill Development Specific	5.1.2 Std 6.0 6.3 ^{ES} 6.1.4 6.1.5 6.1.9 6.1.13 7.1.3 8.9.11 EPR 9.1.1 10.6 EPR 10.2.1 10.6.5 10.6.11	4.4.6	2.2.1 2.2.3		3.1.2	1.7.7 3.3.7 6.1.6			

National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Knowledge/Skill Development Common to all									
Knowledge/Skill Development Specific		Std 6 KPI 5.1 KPI 6.3 Std 10 KPI 10.1		Std 3.3.1		11.4.A.1 11.4.A.2 11.4.A.6 11.4.A.7 11.4.A.9			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Group Work Common to all									
Group Work Specific		4.3.7			2.2.2 3.4.1 3.4.2	2.3.1			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Group Work Common to all									
Group Work Specific				Std 3.2.1 Std 3.2.2		11.4.A.12			

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Education Common to all									
Education Specific	10.6.8	2.4.16	4.3.3		4.1.5 4.3.5 4.3.7 4.4.2 4.4.3 4.4.4 8.5.6	Std 2.1 2.1.5 2.1.6 2.1.7 2.1.8 2.1.9 2.1.10 Std 2.2 2.2.2 2.2.4 2.2.5 2.2.6 Std 2.3 3.1.9 3.3.1 3.3.2 3.3.6 3.4.13			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Education Common to all									
Education Specific						3.3			

Section 3: Building Capacity

Statement of Intent: The organisation is proactive in developing relationships and partnerships that enhance the ability of the organisation, the sector, funding partners and the broader community to meet the needs of service users and the community of interest.

Section 3 Domain 3.1 Fostering Relationships

Fostering Relationships is a key activity to ensure understanding of the organisation's role and services. Relationship building may occur informally at the level of the individual workers across organisations; or at the organisational level with the broader community, specific communities e.g. Indigenous, Culturally And Linguistically Diverse (CALD), peak bodies, charities or other agencies involved in delivering services. Activities may include engaging the attention of politicians, philanthropic bodies and the media, in order to build capacity.

Autonomy: relates to the capacity of individuals and the community to meet their own needs and to address and achieve resolution on issues of concern. It encompasses the concept of sustainable services that service users or the community might be involved in establishing or maintaining.

Participation: encompasses the notion of engaging service users, families, carers and the broader community in the issues of the sector and the needs of service users. This may involve the organisation or its staff in a proactive or reactive role in mobilising the community; promoting the image of service users and their participation in community life; auspicing fledgling organisations through resourcing or staff involvement on voluntary boards, or community project committees.

Systems Advocacy: relates to activities that the organisation may get involved with or work undertaken with other agencies/forums/the media or the political process to represent the needs of service users, families, carers and the community. It seeks to address barriers to access, standards of care, funding constraints, or public perceptions to facilitate better outcomes for constituents.

Social Resources: implies the linking of individuals, groups and communities with other individuals, organisations or agencies which will expand access to resources and knowledge in order to affect change and strengthen individual or community capacity or empowerment. Again it may include use of local media, the political process and volunteer organisations.

Domain 3.1: Element 1 Autonomy

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Autonomy Common to all									
Autonomy Specific					2.2.5 Std 3.4 3.4.3 3.4.5 Std 8.5	2.4.6 6.2.9			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Autonomy Common to all									
Autonomy Specific							GPP 2.7		

Domain 3.1: Element 2 Participation

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Participation Common to all	5.2.2 6.1.6 6.1.14 9.1.3 EPR 9.1.4		Std 4.1 4.1.3			2A.3 3.2.4 3.3.4 3.3.9			
Participation Specific	1.4 2.6 3.6 4.8 5.1.5 5.1.7 6.1.8 7.6 10.3	1.2.7 4.4.4 7.2.4	1.3.3 Std 3.3 4.1.2 Std 4.2 Std 4.3		3.2.1 3.3.9 3.4.4 3.4.6 Std 5.1 8.5.1	2.1.2 Std 2.4 2.4.5 10.2.5			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Participation Common to all						11.4.B.10			
Participation Specific						6.9 8.3.2			

Domain 3.1: Element 3 Systems Advocacy

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Systems Advocacy Common to all									
Systems Advocacy Specific	5.1.6 6.1.3 6.2 8.4.5	Std 5.2 5.2.2 5.2.3 5.2.5	3.3.3 4.3.4 4.4.3		Std 2.2 2.2.1 2.2.3 Std 2.4 2.4.2 Std 3.2 3.2.5 3.2.9 Std 3.3 3.3.8 Std 3.5 3.5.7				
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Systems Advocacy Common to all									
Systems Advocacy Specific	PQ 25c ^{MC} PQ 25e ^{FR}					Std 4 4.1 4.2 Std 6 6.3			

Domain 3.1: Element 4 Social Resources

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Social Resources Common to all									
Social Resources Specific	EPR 5.2.1 EPR 5.2.2 8.12	1.2.6 5.1.6	2.3.4 3.3.2		Std 2.3 2.4.3 3.5.5 6.4.3 8.5.4	7.1.4 7.1.6 7.1.7			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Social Resources Common to all									
Social Resources Specific				Std 3.6.1	Std 3.4	7.4			

Section 3: Domain 3.2 Networks

Networks are another means of building capacity within the sector. Service users present with a broad range of needs, few agencies have the capacity to meet all of those needs. Integration with the local service providers' networks is highlighted in existing standards as a means to overcome the resource and expertise constraints experienced by an individual organisation/agency in meeting service users needs.

Forums: interagency forums are a common form of building capacity at a sector or regional level. Examples include HACC Regional Forums, Community Drug Action Teams, Interagency meetings around families and children at risk with representation from various sectors such as health, disability, education and child protection. Interagency forums provide opportunities:

- for better management of scarce resources;
- for a coordinated response to service users needs along the continuum of care;
- to expand the capacity to serve community needs.

Collaboration: placing a relationship on a more formal footing may involve agreed referral protocols between organisations, establishment of service agreements or memorandums of understanding outlining joint responsibilities for joint case management, advocacy services for people with dementia, intellectual disability or migrant support. Collaboration may also take the form of representation on steering committees, at joint planning days, or grant submissions or the auspicing of one organisation by another.

Contracts & Brokerage: an organisation may choose to sub-contract a component of service delivery to a third party. Examples include provision of vocational training skills, including or not including job placement, provision of day programs for frail aged or those with intellectual disability, or accommodation provided through the Department of Housing. This form of relationship carries specific responsibilities on the part of the contractor and the contracted party to ensure that services are provided in the manner agreed and, to the required level of quality, safety and effectiveness. This requires ongoing monitoring and risk management by both parties to ensure that each meets the key performance agreements contained within their funding contracts.

Domain 3.2: Element 1 Forums

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Forums Common to all		5.1.7	4.4.1		Std 1.7 1.7.1	7.1.5 7.2.6 7.2.7 7.2.9			
Forums Specific									
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Forums Common to all	PQ 18/19 ^{fFR} NSW SIA PQ 18/19e ^{FR}				Std 3.4				
Forums Specific									

Domain 3.2: Element 2 Collaboration

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Collaboration Common to all	10.6.24	1.2.6 Std 5.1 5.1.4 5.1.5 5.2.6	Std 4.4 4.4.2	WTEME1 WTEME3 WTOLE8	1.6.4 2.3.3	1.1.9 Std 7.2 7.2.3 7.2.5 7.2.8			
Collaboration Specific				LOLE9					
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Collaboration Common to all	PQ 2d ^{FR} NSW SIA PQ 2e ^{FR} PQ 18/19b ^{MC} NSW SIA PQ 18/19a ^{MC} PQ 18/19e ^{FR}			Std 1.7	Std 3.2	Std 8.2 Std 8.3	GPP 2.4		
Collaboration Specific						6.2 11.4.B.14			

Domain 3.2: Element 3 Contracts & Brokerage

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Contracts & Brokerage Common to all									
Contracts & Brokerage Specific				WTEME2 COLE8	8.1.2 6.6.2				
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Contracts & Brokerage Common to all									
Contracts & Brokerage Specific					Std 3.1				

Section 3: Domain 3.3 Funding Partnerships

The concept of funding partnerships moves beyond the narrow focus of funding bodies as government departments, i.e. publicly sourced grants. It includes the concept of private funding through corporate trusts, foundations or sponsorship arrangements. It implies a shared understanding and engagement of all parties to contribute to an effective outcome.

Accountability & Reporting: With funding comes the responsibility for accountability and reporting on the expenditure of those funds on the agreed purpose. It infers the capacity of those involved in governance in organisations to manage funds and have systems to track and account for funds spent. There may be additional accounting and reporting requirements specific to the particular grant in addition to the legal requirement of private and public organisation is to submit a copy of the organisation's financial statements to the funder and/or ASIC. Reporting may include quarterly and annual progress reports on the project or program, reporting of occasions of service or minimum data set reporting specific to the service type e.g. HACCC; SAAP, Drug & Alcohol.

Specialist Requirements: will vary as per the grant specifications in each state and territory and at the commonwealth level and those set out by philanthropic organisations.

Roles & Contributions: refers to interdependent partnerships promoting sustainable services to the community. Evidence of shared goals and delineated responsibilities for all parties in the delivery of those goals is required.

Domain 3.3: Element 1 Accountability & Reporting

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Accountability & Reporting Common to all	8.1.16	6.3.5		SMEME4		8.1.14			
Accountability & Reporting Specific	8.1.17 8.1.18			LOLE12 Com FE3 SOEME1 SOOLE13		Std 8.2 8.2.2 8.2.3 8.2.6 8.2.7 8.2.8 8.2.9 8.2.10 8.2.11			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Accountability & Reporting Common to all									
Accountability & Reporting Specific									

Domain 3.3 Element 2 Specialist Requirements

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Specialist Requirements Common to all									
Specialist Requirements Specific				WTOLE9					
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Specialist Requirements Common to all									
Specialist Requirements Specific									

Domain 3.3: Element 3 Roles & Contributions

State									
	DSS	SAAP	FSSA	SEF	CSM	OHC			
Roles & Contributions Common to all									
Roles & Contributions Specific						8.2.1 8.2.4 8.2.5			
National									
	HACC	Employ	FRSP AR	FRSP BP	QIC	NSMHS	REC	EACH	CACP
Roles & Contributions Common to all									
Roles & Contributions Specific									

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APPENDIX 1: Document Control

- **Extended Aged Care in the Home (EACH) Standards**

Schedule 1 of the EACH Program are the Standards. Schedule 2 are the 'specified care and services' for EACH clients. In the matrices the EACH Standards are presented as per the numbers used in the standards document, however following the specified services brackets i.e (s2) can be found the specified service in order to distinguish the EACH Standards from the 'specified services'.

- **HACC National Standards Instrument**

The project team have used the *National HACC Standards Instrument* not the *NSW HACC Standards in Action Manual* as the basis of the numbers used in the matrices. The numbers referred to in the matrices refer to the *Performance Questions (1-25)* and the *Minimum & Further Requirements* under each Performance Question. They do not refer to the *Objectives, Service Standards or Consumer Outcomes*. The rationale for this is that in a HACC Appraisal it is the *Performance Questions* and *Minimum & Further Requirements* that are scored and to which services must respond.

NSW services who use the DADHC resource the *HACC Standards in Action Manual* (HACC SIA) need to be aware of slight differences between the numbers in that publication to those in the National HACC Standards Instrument. We have identified these changes as they occur by placing a special notation into the matrix.

- **Reconnect Good Practice Principles**

The numbering system used in the matrices to describe the Reconnect Good Practice Principles is taken from the *Reconnect Program Guidelines (May 2003)*

- **Disability Services Standards (NSW DADHC Standards in Action)**

The numbering system used in the matrices uses the Standard number e.g. 1.1 Service Entry. The Minimum Practice Requirements as 1.1.1, 1.1.2, 1.1.3. Enhanced Practice Requirements have EPR before the indicator number using the same system Standard 2.1 Individual Planning and Review Minimum Practice Requirement appear as 2.1.1; Enhanced Practice Requirement appear as EPR 2.1.1.

At the Commonwealth level, the Disability Standards have been amended to include two additional Standards. The Standards up to and including Standard 8 use the same titles and numbering system as the NSW Disability Services Standards *Standard in Action* publication. However those services using the Commonwealth Disability Standards and in particular the *Quality Assurance Handbook for disability employment services*, will experience some changes in Standard titles and numbers for those Standards following Section 8-Service Management. These changes are outlined in the table below:

Disability Service Standarads (Standards in Action)	Quality Assurance Handbook for disability employment services
Standard 9: Family Relationships	Standard 9: Employment conditions
Standard 10 Protection of Human Rights and Freedom from Abuse	Standard 10: Service recipient training & support
	Standard 11: Staff recruitment, employment and training
	Standard 12 Protection of human rights and freedom from abuse

Organisations providing disability employment services in NSW need to be aware of the cross over in numbers outlined in the table above. This is particularly the case where internal data systems or policies are aligned with the numbering systems used.

- **NSW Office of the Children's Guardian, Out of Home Care Standards**

The Office of the Children's Guardian (OFG) updated version of the September 1998 Substitute Care Standards have been used in the matrices. This version can be downloaded from the OFG website <http://www.kidsguardian.nsw.gov.au/accreditation/acc-substitute.asp>.

Essentially the changes from the 1998 version are numbering rather than content; the changes are as outlined below.

DoCS 1998 Standard name and numbers; changes only	OFG version 1 October 2003 Standard name and number; changes only
Standard 1.6 Kinship placement	Standard 1.5 Relative placements
Standard 1.7 Monitoring placement and reviewing care plan	Standard 1.6 Monitoring placement and reviewing care plan
Standard 1.8 Participation in decision making	Standard 1.7 Participation in decision making. Additional indicator 1.7.7
Standard 1.9 Work in relation to courts	Standard 1.8 Work in relation to courts
Standard 2.1 Care Environment	Standard 3.1 Care Environment
Standard 2.2 Identity & Family Relationships	Standard 3.2 Identity & Family Relationships
Standard 2.3 Emotional and Social Development	Standard 3.3 Emotional and Social Development
Standard 2.4 Health	Standard 3.4 Health
Standard 2.5 Education	Standard 3.5 Education
Standard 2.6 Moving in Care	Standard 3.6 Moving in Care
	New Standard Standard 3.7 Nutritional requirements for children and young people particularly those with special needs
Standard 3.1 Planning for leaving care to live independently	Standard 6.1 Planning for leaving care to live independently
Standard 3.2 After care support	Standard 6.2 After care support

Standard 4.1 Knowledge of community needs and resources	Standard 7.1 Knowledge of community needs and resources
Standard 4.2 Liaison with other agencies	Standard 7.2 Liaison with other agencies
Standard 4.3 Service visibility and publicity	Standard 7.3 Service visibility and publicity
Standard 5.1 Rights of children, young people and families	Standard 4.1 Rights of children, young people and families
Standard 5.2 Confidentiality and privacy	Standard 4.2 Confidentiality and privacy
Standard 5.3 Complaints and appeals	Standard 4.3 Complaints and appeals
Standard 6.1 Management of the care record system	Standard 5.1 Management of the care record system
Standard 6.2 Contents of care records	Standard 5.2 Contents of care records
Standard 6.3 Related records	Standard 6.3 Related records
Standard 7.1 Recruitment and selection of foster carers	Standard 2.1 Recruitment and selection of authorised (foster) carers
Standard 7.2 Carer training	Standard 2.2 Authorised (foster) carer training
Standard 7.3 Supervision and support	Standard 2.3 Supervision and support
Standard 7.4 Carer participation and rights	Standard 2.4 Authorised (foster) carer participation and rights
	New Standard Standard 2A Residential care is provided in a personalised environment
	New Standard Standard 10.2 Residential care worker employment recruitment, selection and appointment.
Standard 10.2 Supervision & Support	Standard 10.3 Supervision & Support
	New Standard Standard 10.4 Supervision & support in residential care
Standard 10.3 Training and development	Standard 10.5 Training and development
	New Standard Standard 10.5 Residential training and development
Standard 10.4 Work Satisfaction	Standard 10.7 Work Satisfaction.
Standard 10.5 Personnel systems	Standard 10.8 Personnel systems
Standard 10.6 Occupational health and safety	Standard 10.9 Occupational health and safety
Standard 10.7 Student placement and volunteer management	Standard 10.10 Student placement and volunteer management
Standard 10.8 Boards of management	Standard 10.11 Boards of management

- **Department of Human Services (SA) Service Excellent Framework**

As the DHS SEF does not use a numbering system, the following system has been used to represent the elements in the HSO Framework.

The first letter(s) refers to the Section i.e.

- Leadership = L;
- Communication =Com;
- Working Together = WT;
- Consumer Satisfaction = CS;
- Sound Management = SM;
- Service Outcomes = SO;
- Contracting = C;
- People = P.

The next part of the system uses the levels of the SEF ie

- EM = Essential Minimum;
- F = Foundation;
- OL = Organisational Learning

The final part is E= Element and the number of the element

Therefore:

Leadership Essential Minimum Element 1 is LEME1

Working together Foundation Element 5 is WTFE5

Sound Management Organisational Learning Element 7 is SMOLE7