



Core Module 2:

Governance & Operational Management

Governance, Operational, Risk,
Quality and Information
Management

LIVE POLL

How would you rate your knowledge of the NDIS Practice Standards and registration requirements?



1



2



3



4



5



The Embracing Change Webinar Series

Webinar 1 **24 October 2019**

- Pain Points and Priorities for Providers In Applying the Practice Standards In Psychosocial Disability Services

Webinar 2 **28 November 2019**

- Core Module 1 Rights & Responsibilities

Webinar 3 **5 March 2020**

- Core Module 2 Governance and Operational Management
- Participant Outcomes 1 to 4

Webinar 4 **30 April 2020**

- Core Module 2 Governance and Operational Mgt Cont'd
- Participant Outcomes 5 to 8

Webinar 5 **25 June 2020**

- Understanding Reportable Incidents

Webinar 6 **27 August 2020**

- Understanding Behaviour Support Arrangements

Webinar 7 **29 October 2020**

- Core Module 3 Provision of Supports

Webinar 8 **3 December 2020**

- Core Module 4 Support Provision Environment

Webinar 9 **25 February 2021**

- Understanding Worker Screening

Webinar 10 **27 May 2021**

- Learnings and Next Steps for NDIS Quality & Safety in Psychosocial Services



Governance & Operations Management

 <p>NDIS Practice Standards NDIS Practice Standards and Quality Indicators January 2020 Version 3</p>	<h3>Contents</h3> <ul style="list-style-type: none">What are the NDIS Practice Standards? 4Core Module 5<ul style="list-style-type: none">1. Rights and Responsibilities 5<ul style="list-style-type: none">Person – centred supports 5Individual values and beliefs 5Privacy and Dignity 6Independence and informed choice 6Violence, Abuse, Neglect, Exploitation and Discrimination 72. Provider Governance and Operational Management 7<ul style="list-style-type: none">Governance and Operational Management 7Risk Management 8Quality Management 9Information Management 9Feedback and Complaints Management 10Incident Management 10Human Resource Management 11Continuity of Supports 11
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Today's Objectives

Webinar participants will be able to ...

- Describe the participant outcomes and quality indicators for Governance, Operations, Risk, Quality and Information Management under the NDIS Practice Standards.
- Recognise specific psychosocial work practice documentation that can meet these outcomes and quality indicators.
- Recognise pitfalls to avoid in preparing for audit against these outcomes and indicators.
- Recognise benefits to participants and the organisation of a successful audit result against these outcomes and indicators.





What are the Practice Standards?

Requirements that **set the standard of service you must deliver** to be a registered NDIS provider

Benchmark for providers to **assess performance and demonstrate high quality and safe supports** for participants

Each Practice Standard is build from a **high-level participant outcome**, supported by **quality indicators**.

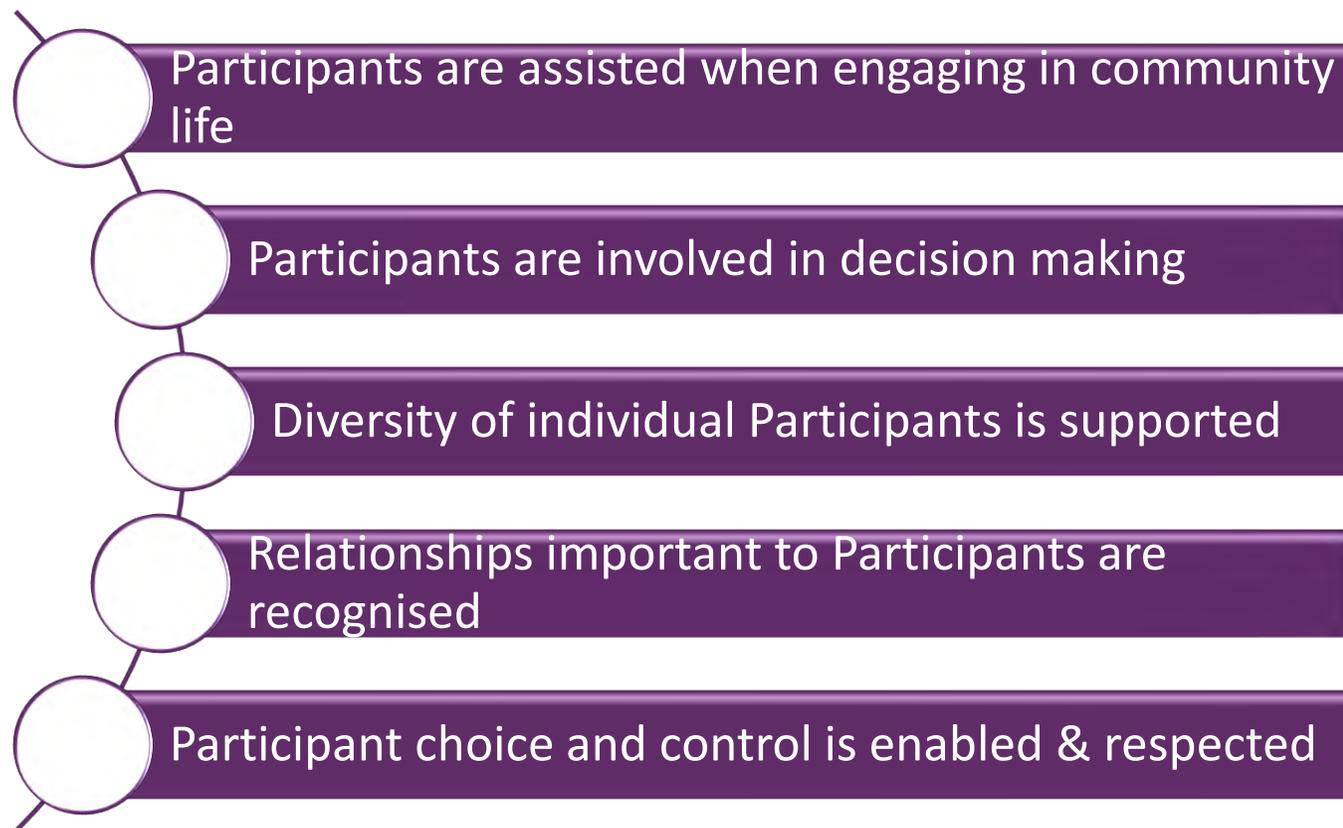
Principles guiding the practice standards



Supports to the NDIS

Participant are to be:

- consistent with the NDIS Act and
- underpinned by the core principles following:



What do Practice standards look like



The standards define outcomes that NDIS providers will be audited against if they wish to apply to be registered by The Commission

High level outcome statements

Participant focused and oriented

Targeted provider-focused practical elements to guide the collection of evidence

Quality indicators, evidence based against each practice standard

Core module: Quality Management

Outcome: Each participant benefits from a quality management system relevant and proportionate to the size and scale of the provider, which promotes continuous improvement of support delivery.

Quality Indicators:

The provider maintains a quality management system that is relevant and proportionate to the size and scale of the provider and the scope and complexity of the supports delivered. The system defines how to meet the requirements of legislation and these standards. The system is reviewed and updated as required to improve support delivery.

The provider's quality management system has a documented program of internal audits relevant (proportionate) to the size and scale of the provider and the scope and complexity of supports delivered.

The provider's quality management system supports continuous improvement, using outcomes, risk related data, evidence-informed practice and feedback from participants and workers ⁹

NDIS Practice Standards Example



Core module: Information Management

Outcome: Management of each participant's information ensures that it is identifiable, accurately recorded, current and confidential. Each participant's information is easily accessible to the participant and appropriately used by workers

Quality Indicators:

Each participant's consent is obtained to collect, use and retain their information or to disclose their information (including assessments) to other parties, including details of the purpose of collection, use and disclosure. Each participant is informed in what circumstances the information could be disclosed, including that the information could be provided without their consent if required or authorised by law.

Each participant is informed of how their information is stored and used, and when and how each participant can access or correct their information, and withdraw or amend their prior consent.

An information management system is maintained that is relevant and proportionate to the size and scale of the organisation and records each participant's information in an accurate and timely manner.

Documents are stored with appropriate use, access, transfer, storage, security, retrieval, retention, destruction and disposal processes relevant and proportionate to the scope and complexity of supports delivered.

Practice Standards Audit



All registered providers must be audited against relevant NDIS Practice Standards

Audits are proportionate to the size and scale of the organisation, risk and complexity of supports & services delivered

We're approving and training more audit bodies

We're here to help guide you through the process.



Continuous improvement



Systems and processes

- Gradual, ongoing incremental improvement
- Simplified work processes
- Constant review, measurement and action

Continuous quality improvement (CQI) is cultural, part of the fabric of the organisation. It is not event-driven. If CQI is truly integrated in an organisation's culture, it will be evident in the values, people, systems and processes.

And the participants will talk positively about their experiences and the benefit that organisation adds.

Certification or Verification?

HIGH RISK & COMPLEXITY SERVICES

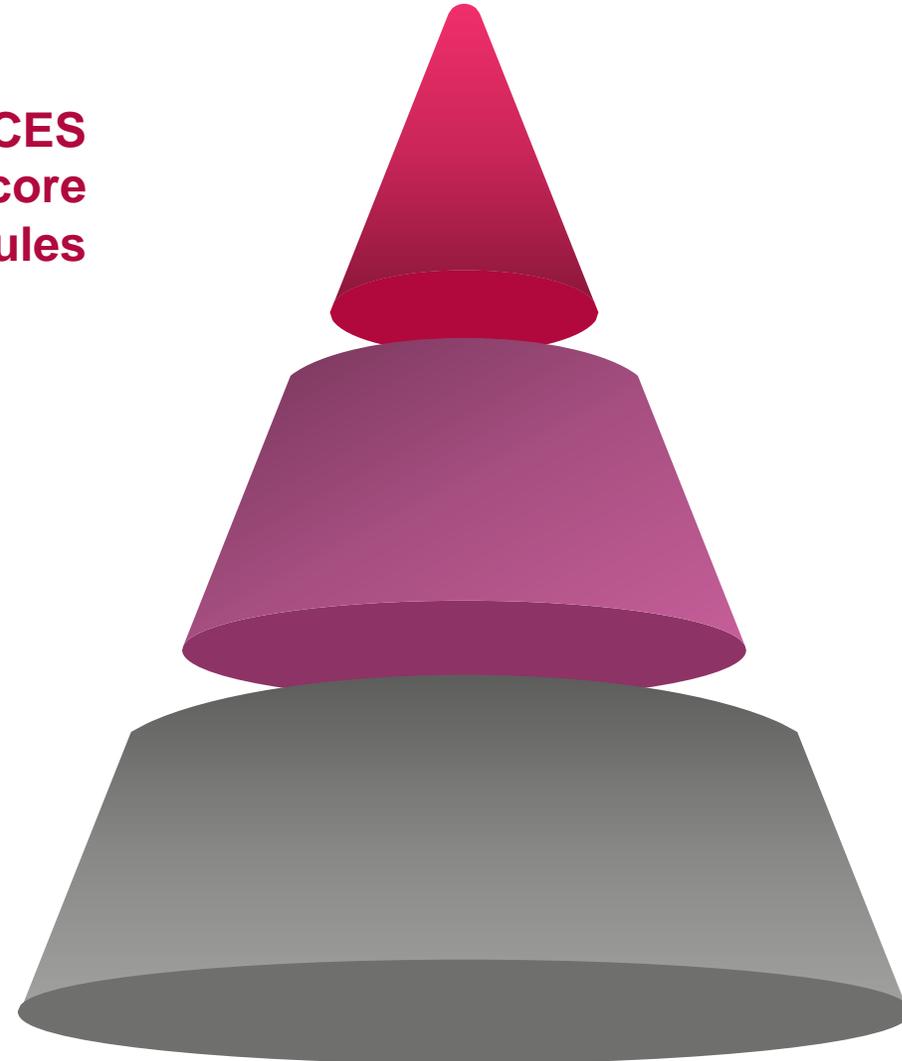
Require **certification** against **core**
+ relevant supplementary modules

MEDIUM RISK & COMPLEXITY SERVICES

Require **certification** against
core module only

LOW RISK & COMPLEXITY SERVICES

Require **verification only**
unless accompanied by a medium or high-risk
service



Certification or Verification?

- *Depends on the risk level of **services** you deliver.*
- *Determined by **NDIS Commission** from registration application.*
- *Refer to your Initial Scope of Audit, Registration Renewal & Approved Quality Auditor for information.*

HIGH RISK & COMPLEXITY

Requires **certification**
against **core**
+ relevant supplementary modules

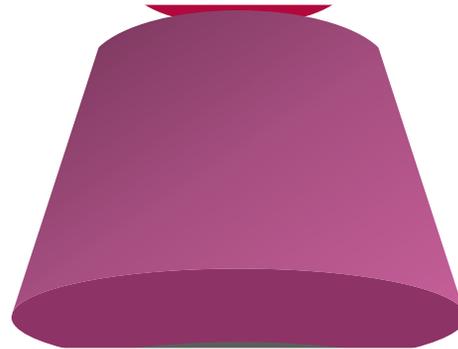


Includes Registration Groups:

- 0110 - Behaviour support
- 0104 - Assist personal activities high
- 0118 - Early childhood supports
- 0131 - Specialist disability accommodation
- 0132 - Specialised support coordination

Certification or Verification?

MEDIUM RISK & COMPLEXITY
Requires **certification** against
core module only



Includes Registration Groups:

- 0102 - Assist access/maintain employ
- 0106 - Life stage, transition
- 0107 - Assist-personal activities
- 0115 - Daily tasks/shared living
- 0117 - Development – life skills
- 0125 - Participate community
- 0136 - Group/centre activities
- 0133 - Specialised supported employment

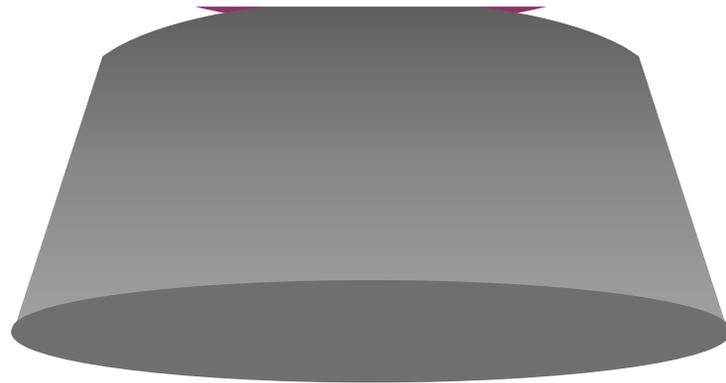
Certification or Verification?

Includes Registration Groups:



LOW RISK & COMPLEXITY

Requires *verification* unless accompanied by a medium or high-risk registration group



- 0101 - Accommodation/tenancy
- 0103 - Assist-prod-pers care/safety
- 0105 - Personal mobility equipment
- 0108 - Assist-travel/transport
- 0109 - Vehicle modifications
- 0111 - Home modifications
- 0112 - Assistive equip for recreation
- 0113 - Vision equipment
- 0114 - Community nursing care
- 0116 - Innov community participation
- 0119 - Specialised hearing services
- 0120 - Household tasks
- 0121 - Interpreting and translating
- 0122 - Hearing equipment
- 0123 - Assistive products in h/hold tasks
- 0124 - Comms & info equipment
- 0126 - Ex phys pers training
- 0127 - Plan management
- 0128 - Therapeutic supports
- 0129 - Specialised driver training
- 0130 - Assistance animals
- 0134 - Hearing services
- 0135 - Customised prosthetics

Certification audits

- Stage 1 (off-site documentation review)
- Stage 2 (on-site review of consistent application of systems and processes in the delivery of safe and quality services to NDIS participants)
- Corrective action planning (if required)
- Auditor provides report and makes recommendation to the NDIS Commission
- Mid-cycle onsite surveillance audits
- Aligned to registration renewal, not certificate expiry

Examples of documentation

Governance and Operational Management

Outcome: (proportionate) to the size, and scale of the provider and the scope and complexity of supports delivered.

NDIS Requirement – Outcome Indicator	Possible documentation
<p>Opportunities are provided by the governing body for people with disability to contribute to the governance of the organisation and have input into the development of organisational policy and processes relevant to the provision of supports and the protection of participant rights.</p>	<ul style="list-style-type: none"> ▪ Policy specifying that board membership should include a certain number of people with a lived experience. ▪ Policy indicating that organisational policies and procedures are recovery oriented and trauma informed. ▪ Strategic plan indicating mental health and peer worker training and recruitment goals for the organisation.
<p>A defined structure is implemented by the governing body to meet a governing body’s financial, legislative, regulatory and contractual responsibilities, and to monitor and respond to quality and safeguarding matters associated with delivering supports to participants.</p>	<ul style="list-style-type: none"> ▪ Matrix of organisational policies and procedures mapped to the NDIS Practice Standards, National Standards for Mental Health Services, plus with any other relevant regulations. ▪ Terms of reference and meeting minutes of a quality and safeguarding working group. ▪ Monitoring tools for ensuring compliance (e.g. Compliance Calendar) ▪ Minutes of board and AGM meetings which indicate the contribution of people with a lived experience to policy review and decision making.
<p>The skills and knowledge required for the governing body to govern effectively are identified, and relevant training is undertaken by members of the governing body to address any gaps.</p>	<ul style="list-style-type: none"> ▪ Position Descriptions specifying roles for which lived experience is either required or desired. ▪ Training records indicating that workers are trained to use CANSAS, LSP-16, HoNOS or other appropriate evidence-based psychosocial needs assessment tools.

Participant sampling

- The Auditor will select participants to sample (interview and file review)
- You will be required to complete a participant list for the auditor to select from
- The participant sampling methodology used under this Scheme is **Opt Out** sampling. You, the provider, will need to advise all participants that they are automatically enrolled into the audit process (i.e. they may be contacted by the audit team for interviews and/or have their files, records or plans reviewed to ensure compliance with the standard)
- Participants should be invited to the opening and closing meetings of the audit
- In the event that a participant does not want to participate in the audit process, you must document and respect that decision, and communicate it to the auditor.

Potential Pitfalls

Plus top tips for avoiding them:

- Ensure that each participant is aware that they will be automatically included in sampling unless they opt out.
- Ensure that each participant has enough notice and opportunity to opt out.
- Ensure that each participant who agrees to remain available to be interviewed and attend meetings has access to the supports they need to make the process safe for them.
- Educate the auditors on how they can make the contact they have with participants trauma-informed and recovery oriented.



Potential Benefits

For participants, carers, organisations, staff:

- Participants, their loved ones and friends may be more confident that their concerns and voices will be heard.
- Organisations may better understand the quality and safety needs of participants and be better placed to address them.
- Participants, their loved ones and friends may be more open and confident in speaking up about the quality and safety of the services they receive.
- Staff may be better supported by a quality and safeguarding framework that is better informed by the lived experience of participants with psychosocial disability and their loved ones and friends.



Review of Today's Objectives

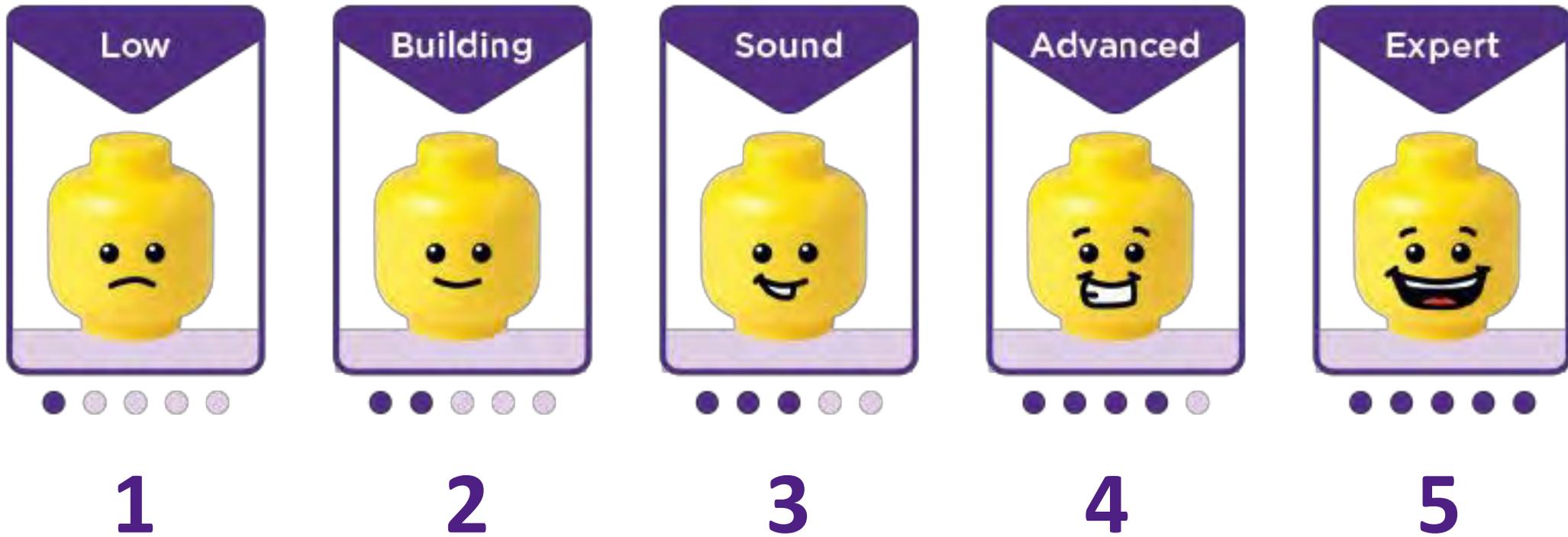
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LIVE POLL

How would you rate your knowledge of the NDIS Practice Standards and registration requirements?



THANK YOU FOR JOINING US TODAY

NEXT WEBINAR

- ◆ 30 Apr 2020 “Governance and Operational Management Continued”
- ◆ Feedback, Complaints, Incident and Human Resources Management, Support Continuity

ACCESS RESOURCES

[Find out more about the Embracing Change project](#)

- ◆ Review this webinar
- ◆ View past webinars
- ◆ Find webinar resources

LET'S CHAT

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