**ADHC Quality Framework Frequently Asked Questions for ADHC Funded Service Providers**

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# What are the ADHC Quality Framework requirements?

The Ageing Disability and Home Care (ADHC) Quality Framework requirements are outlined in the current ADHC Funding Agreement. The Funding Agreement requires you to:

* comply with the NSW Disability Services Standards (NSW DSS) and the [ADHC Quality Policy](file:///%5C%5CAcrod-svr1%5Ccommon%5CPROJECTS%5CCurrent%20Projects%5CQuality%20Management%5CAdmnistration%5CNDS%20Quality%20Webpage%5CApril%202013%5CADHCs%20Quality%20webpage%20link.docx), and to have a quality management system in place and;
* Provide evidence to an independent third party to confirm organisational performance against the NSW Disability Services Standards during the term of each agreement. Through third party verification (TPV), service providers will be able to demonstrate their compliance with the NSW DSS and provide evidence that the organisation fulfils the quality and reporting requirements in the Funding Agreement.

Additional information on the Quality Framework requirements is available on the Quality section of the ADHC website (<https://www.adhc.nsw.gov.au/sp/quality>) and via the Quality link on the NDS website (<https://www.nds.org.au/resources/nds-quality-portal>).

# What is ADHC Quality Framework Reporting?

ADHC has implemented and oversees the Quality Framework Reporting (QFR) initiative. The QFR requires all ADHC funded service providers to report on their status against the NSW Quality framework using an online portal. Reporting through the QFR is a funding agreement requirement for all ADHC funded services.

More information is available on the ADHC website <http://www.adhc.nsw.gov.au/sp/quality>.

# What supports are available to help my service meet the ADHC Quality Framework requirements?[[1]](#footnote-2)

The following list identifies the range of resources that are available to assist all service providers:

***It’s Your Business (IYB)* - Quality Management Chapter (Chapter 10)**

The quality management chapter of IYB is a resource to assist you to understand what a quality management system is and how you might implement one across your organisation.

**Self-assessment tools**

A listing of resources is available to support you to conduct a self-assessment against the requirements of the NSW DSS, in preparation for TPV.

**Information and Advice**

NDS has appointed Engels, Floyd and Associates to answer your questions regarding TPV. This service is generally provided either over the phone or via e-mail and is funded through the Industry Development Fund. This service is available until 31st December 2017.

They can be contacted on:

Sharon Floyd - 0422 586 219 or Jennifer Engels - 0417 554 736

Email address: engelsfloyd@gmail.com

**Approved list of third party verifiers**

List of organisations currently approved by NDS to conduct TPV available via <http://www.idfnsw.org.au/images/TPV-Profiles-April-2017.pdf>.

**ADHC Quality website**

Online resources provided on the ADHC website include the current quality policy, fact sheets, Standards in Action, a guide to quality Key Performance Indicators (KPIs), a guide for organisations that currently use an external certifying body and the [NSW Quality Framework e-learning module](https://www.adhc.nsw.gov.au/nsw-quality-framework-e-learning-module/). All available via <https://www.adhc.nsw.gov.au/sp/quality/supports_and_resources>.

# How long do we have to implement a quality management system and achieve TPV?

All ADHC funded service providers are required to achieve TPV against the NSW DSS before 30 June 2018 (the end of the current Funding Agreement). It is important that providers who are yet to achieve TPV commence the TPV process as soon as possible, as it may take up to 6 months to prepare for, arrange and fully complete TPV (including working through any gaps identified to achieve compliance with the NSW DSS).

It is recommended that if you are yet to complete TPV, you begin making arrangements as soon as possible and **aim to complete your TPV by the end of 2017**.

# What is Third Party Verification (TPV)?

TPV is the process of an impartial and competent certification body reviewing evidence to establish that a service provider meets the NSW DSS.

# What is a third party verification body?

A third party verifier or third party verification body is an impartial and competent party that reviews the evidence to establish that a service provider meets the NSW Disability Service Standards.

Third party verifiers or certifying bodies for the NSW DSS and comparable standards must be accredited either by the Joint Accreditation System of Australia and New Zealand (JAS-ANZ) or the International Society for Quality in Health Care (ISQua).

National Disability Services (NSW) holds a list of third party verification bodies who can conduct TPV against the NSW DSS. This list includes those TPV bodies who have met the criteria to be listed and who have agreed to comply with the Operating Guidelines. The list of these TPV bodies, along with their profiles and experience can be found at the following link <http://www.idfnsw.org.au/images/TPV-Profiles-April-2017.pdf>

NDS recommends that service providers apply their internal purchasing good practice when selecting a third party verifier or TPV body.

# What is self-assessment or gap assessment?

Both involve conducting an informal assessment of your performance against the NSW Disability Services Standards (NSW DSS).

Before undertaking third party verification it is important to review your organisation’s practices, policies, procedures and systems to ensure they align with the requirements of the NSW DSS . There are two approaches to this initial assessment against the standards.

1. **Self-assessment:** during a self-assessment your organisation undertakes a planned, process-based review against the NSW DSS and identifies issues or gaps which are documented and communicated in an action plan or report. Self-assessments require adequate and relevant evidence to be identified and collected. A range of tools are available to assist with self-assessment (via <https://www.adhc.nsw.gov.au/sp/quality/supports_and_resources> and <https://www.nds.org.au/resources/nds-quality-portal>).
2. **Third party assessment:** a third party gap assessment occurs when a suitably skilled person from outside your organisation undertakes an assessment of your current practices against the NSW DSS and writes a report or action plan which details the gaps identified during the review. As in a self-assessment, gap assessments require adequate and relevant evidence to be identified and collected.

Many service providers will use their third party verification body to undertake a third party gap assessment, but you can choose any individual or group from outside your organisation who has the requisite skills and knowledge to complete a gap assessment.

# Can I choose an organisation that is not on the approved NDS TPV listing to do my verification?

You are able to choose any third party verifier or certifying body for your verification against the NSW DSS and comparable standards, but they must be accredited either by the Joint Accreditation System of Australia and New Zealand (JAS-ANZ) or the International Society for Quality in Health Care (ISQua).

# Some organisations are required to undergo many different accreditation processes. Where does TPV fit in?

As part of the evidence review, third party verification takes into account a service providers’ existing accreditation or certification against other standards. The external review processes can occur concurrently with other required accreditation/certification activities.

ADHC has engaged JAS-ANZ to map 12 industry standards currently in use by the sector, against the NSW DSS so that where the standards share common components, their existing accreditation can be recognised. The third party verifying body is only required to review performance against those standards in the NSW DSS not already covered elsewhere. More information about this mapping can be found at <https://www.adhc.nsw.gov.au/sp/quality/adhc_systems_recognition_tool>.

# I have questions about the reporting and the funding requirements. How do I get further information on these?

You can contact ADHC with questions specific to your organisation via the ADHC Quality team by email at: ADHC-QualityTeam@facs.nsw.gov.au or call 9377 6016.

# What happens once our organisation has been verified?

You will need to report this via the ADHC QFR by uploading your verification certificate.

It is important to maintain Continuous Quality Improvement activities across your organisation

# What is the relationship between the NSW Disability Services Standards (NSW DSS) and the National Standards for Disability Services?

ADHC recognises that the NSW DSS align with the National Standards for Disability Services (NSDS). This means that where organisations are required to meet both the NSDS and NSW DSS, ADHC will recognise certification against just the NSDS. The scope of your NSDS audit must include ADHC funded services.

# What if our organisation is not verified by June 2018?

FACS/ADHC funded service providers that do not achieve third party verification by 30 June 2018, will be in breach of their funding agreement.

Providers who are registered with the NDIS who fail to upload a valid TPV certificate to the QFR before 30 June 2018 may run the risk of having their NDIS registration revoked.

# Can we market that we have been verified?

Yes. Whilst there is no current standardised way to do this, you are able to market your verification status.

# What are the arrangements for existing FACS-ADHC funded providers registering with the National Disability Insurance Scheme (NDIS)?

Providers operating under an existing FACS-ADHC Funding Agreement are deemed compliant with the[***NSW Transitional Quality Assurance and Safeguards Working Arrangements****.*](https://www.ndis.gov.au/providers/nsw-registering-provider.html#safeguard)

All existing ADHC funded providers will need to:

* Complete the National Disability Insurance Agency (NDIA) Provider Registration form and other requirements for registration as determined by the NDIA CEO;
* Agree to the *Terms of Business for Registered Support Providers* and Declaration of Suitability

FACS-ADHC will provide a status report on provider TPV compliance to the NDIA following the formal Quality Framework Reporting (QFR) periods.

FACS-ADHC funded providers are required to continue to comply with the terms of their Funding Agreement throughout the transition period (even if funding ceases in whole or part during the Agreement term) including all relevant legislation, operational policies and guidelines.

This includes continuing to report on the achievement of third party verification (TPV) status through Quality Framework Reporting (QFR).

More information can be found in the [*NSW Transitional Quality Assurance and Safeguards Working Arrangements.*](https://www.ndis.gov.au/providers/nsw-registering-provider.html#safeguard)

1. The subsidy that was accessible under the Industry Development Fund is no longer available. [↑](#footnote-ref-2)