**NDIS Quality and Safeguard Framework Submission**

**To:** National Disability Insurance Scheme (NDIS)

**From:** Amaze (formerly Autism Victoria)

**Date:** 30 April 2015

**Amaze**

Amaze is the peak organisation in Victoria for people on the autism spectrum and their supporters. Amaze is not a service provider. Its principle activities are in raising awareness and understanding of autism, provision of independent information and resources and build community capacity through training and certification services (the latter through its wholly owned subsidiary, One Certification Limited).

**Comments on the Proposal for a NDIS Quality and Safeguard Framework**

Amaze is fully supportive of a statutory Quality and Safeguarding framework for NDIS funded services, on the condition it is sensitive to the needs of the participants that will be accessing these services.

Amaze acknowledges that the diagnostic group receiving the highest number of approved plans in the NDIS trial sites are people on the autism spectrum (or other developmental disorders) equating to 28% of all plans[[1]](#footnote-1). Furthermore, some 20% of those with an approved plan have an intellectual disability[[2]](#footnote-2). The consequence of this high proportion of people on the autism spectrum/intellectual disability accessing the NDIS, highlights the importance that the quality and safeguarding framework is able to effectively assess the views of this population who experience difficulties with communication and interaction.

This need is further highlighted through the Annual Report of the Victorian Commissioner for Disability for 2014, which states that 38% of all complaints received related to issues of communication and relationships and that the majority of complaints are received by people with an intellectual disability (56%) as well as those with autism (27%), neurological impairment (15%), acquired brain injury (12%) and sensory impairment (7%)[[3]](#footnote-3).

Amaze is pleased to provide its response to the Quality and Safeguarding Framework; specific comments related to the five key areas outlined in the document are outlined below.

***NDIA provider registration***

One Certification Limited (OCL) is an independent review body currently accredited by JASANZ to certify organisations against the Department of Human Services Standards (VIC) (DHSS), the National Standards for Disability Services (NSDS) and ISO 9001 Standard.

OCL is also the only review body in Australia that owns and certifies organisations against specific autism standards for early childhood, education and adult disability services. As such, we understand the importance of ensuring that disability service providers are operating within defined legislative and regulatory requirements.

Of the four proposed options for registering as a provider of NDIS funded supports in the consultation paper, we support the implementation of the provider registration requirements as outlined in ‘Option 3’.

Amaze/OCL agrees that a tiered approach to registration requirements based on the level of risk associated with the types of supports that would be provided would not only reduce the current level and duplication of quality, compliance and reporting systems, but most importantly would give people on the autism spectrum, and other participants, the freedom to exercise choice over who they choose to work with them.

*Basic legal requirements:*

OCL believes that all providers registered with the NDIS, including individuals and organisations of businesses should be mandated to demonstrate compliance with all relevant federal and state/territory legislative and regulatory requirements, and therefore agree with the proposal to make this a required component for registration. This includes ensuring that professionals have the relevant qualification and/or licence to carry out their work.

*Code of conduct*

Adhering to an NDIS Code of Conduct outlining expectations for safe and ethical behaviour would further serve to ensure that registered providers are held accountable for issues such as neglect and financial abuse. We welcome the NDIS’ ability to revoke registration of providers who treat participants in ways that impinge on their human rights and therefore we support the requirement for registration being linked to adherence to a Code of Conduct.

*Additional conditions*

The NDIA should have mechanisms in place to ensure that all registered providers are using safe practices when working with participants. We agree that these ‘additional conditions’ should be dependent on the level of risk, with support in a person’s home, supported accommodation and respite services, day services having the highest level of compliance in this area. These additional conditions should, at a minimum, require all staff to undergo a National Police Criminal History Check, mandatory reporting mechanisms for cases of suspected abuse, and ensuring that participant’s privacy is maintained at all times. These additional conditions should not be dependent upon providers providing the NDIS with documentation as evidence of compliance, but should be dependent upon authentic participant feedback. For people on the autism spectrum, and those with intellectual disability, serious consideration needs to be given as to how acquiescence from participants will be reduced.

*Quality Evaluation*

An independent quality evaluation that focuses on participants’ experiences of the supports they received being a required component of registration is welcomed by Amaze. We believe that observations of practice, coupled with in-depth interviews with participants in their preferred mode of communication, is the only authentic way of measuring the quality of service provision.

This evaluation should focus on quality of life indicators, including the right to choice and participation. Evaluators should have qualifications in and/or significant experience working with, people with disability. This is paramount to ensuring that interviews and observations are conducted in ways that meet the needs of people with cognitive disabilities. Without this knowledge, this evaluation process runs the risk of becoming a ‘tick-the-box’ compliance exercise, rather than a meaningful review of a service.

Amaze’s autism standards reviews are conducted in ways that focus on practice. Amaze/OCL would welcome the opportunity to provide the NDIA with advice about how this could be achieved within its Quality and Safeguarding Framework, particularly for people on the autism spectrum.

*Quality Assurance/industry certification*

A recent paper focusing on the efficacy of the Victorian DHSS in terms of what the standards actually measure, demonstrated that 81% of the DHSS involved a review of documentation[[4]](#footnote-4). This highlights a major concern for Amaze as documentation does not equate to good practice.

Current certification schemes are heavily focused on ‘tick-the-box’ compliance indicators, with little focus on evaluating staff practices when working with people with disability. Organisations invest considerable time and effort to ensure policies and procedures meet compliance requirements to pass assessments.

Further, the majority of third-party reviewers currently assessing disability services have a background in the manufacturing or engineering fields, with little experience or skills with working with people with disability (important when conducting interviews) and little knowledge about what a ‘quality’ service in disability looks like.

The certification schemes that are currently mandated do not offer meaningful reviews of an organisation’s ability to create quality outcomes for clients. Therefore, Amaze/OCL supports the proposal that certification against these schemes are voluntary.

However, Amaze/OCL recommends that an independent review as outlined in section *Quality Evaluation* above is mandated for registration and ongoing registration. If choice and control are to be realised, a key focus of assessing a service needs to be on participant perceptions and satisfaction, and the ability of services to demonstrate that staff are employing evidence-based approaches and strategies. This is achieved when evaluation is conducted through observations of practice. This approach is likely to reduce the investment (financial and human resources) services are currently making to become certified against the mandated schemes (NSDS and DSS), investment that could be better directed to improving service provision and upskilling staff.

***System for handling complaints***

In Victoria, the establishment of a Disability Services Commissioner has seen an increase in the number of complaints being made by participants against disability service providers, demonstrating that internal complaints mechanisms are not effective on their own. Having an independent body that assesses complaints in an impartial manner gives confidence to services users hat organisations are held accountable for their actions if found to be in breach of their legislative and regulatory requirements.

We believe that ‘Option 3b: Independent statutory complaints function’ would be the most appropriate option for NDIS providers. Given that the Disability Services Commissioner in Victoria is established and providing many of the functions outlined under this option, including training, complaints resolution, tracking trends in nature of complaints and reporting publically on these, this framework could be transferred to other states and territories.

***Ensuring staff are safe to work with participants comments***

A nationally consistent approach for working with vulnerable people is welcomed. With all state and territory jurisdictions currently operating different systems, there is a real risk of some workers slipping through the screening net when moving interstate. The cost of applying for different National Police Checks when working across different sectors, e.g. disability and children, would be reduced by having one check for working with vulnerable people to cover a range of vulnerable people across all age groups.

In Victoria, a register of ‘barred workers’ is in place for those working in state-funded disability accommodation services. Given that abuse occurs in settings other than accommodation services, this should be expanded to include all centre-based and home-based care, including respite and day services. This would ensure that people barred from working in some services would not cause harm to vulnerable people in other service settings.

***Safeguards for participants who manage their own plans***

While we support participants being able to manage and implementing their own plans, comprehensive information, guidance and support in how to choose appropriate providers, managing budgets and ensuring that the service provider is safe, needs to be provided. In Victoria, individuals currently in receipt of an Individual Support Package are overwhelmingly choosing not to self-manage their own funds.

As such, ‘*Option 1: Building the capacity for participants to manage their own risks’* would be the most suitable option for people choosing to manage their own funds. Self advocacy support is one option to help participants make informed decisions about how to choose and screen a provider that is not registered with the NDIA.

***Contact Amaze***

For further information relating to this submission please contact Christina Jasem, General Manager, One Certification Limited, [Christina.jasem@onecertification.org.au](mailto:Christina.jasem@onecertification.org.au) or (03) 9657 1617.

1. National Disability Insurance Agency, *Quarterly Report to COAG Disability Reform Council,* [Dec 2014] [↑](#footnote-ref-1)
2. ibid [↑](#footnote-ref-2)
3. State of Victoria, *Disability Support Commissioner Annual Report 2014*, p17, p 21. [↑](#footnote-ref-3)
4. McEwan J, Bigby C, Douglas J (2014) *What are Victoria’s Disabiity Service Standards Really Measuring?* Research and Practice in Intellectual and Developmental Disabilities, DOI: 10.1080/23297018.2014.956385 [↑](#footnote-ref-4)