

National Standards for Disability Services

Evidence Guide

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The document must be attributed as the National Standards for Disability Services – evidence Guide.

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Introduction

This Guide is part of the National Standards for Disability Services (National Standards) Resource Package. It aims to help you, as a disability service provider, to understand and apply the National Standards to your work and organisation. They focus on rights and outcomes for people with a disability.

Each of the six standards is described in detail along with guidance on what you can do to meet the standard and how you could show that you were meeting the standard.

The Guide has been written to support disability service providers to meet the requirements of the National Standards. It is designed to support workers, service providers and review/accreditation bodies to:

- Understand the National Standards
- Know when they are being achieved
- Reflect on everyday practice, and
- Undertake more formal internal and external reviews of services against the National Standards.

Updating the National Standards

The National Standards for Disability Services were first developed in 1993 following nation-wide consultation. Since that time, all Australian jurisdictions have integrated the National Standards as the core elements of their quality assurance and improvement frameworks.

A review of the National Standards took place in 2010, with consultation with people with disability, their families & carers, service providers and peak bodies. The feedback from this review confirmed the need to update the concepts and language contained within the National Standards, and to ensure that they reflect contemporary practice. The National Standards have been updated based on the feedback.

The importance of National Standards has also been highlighted through the work on the National Disability Insurance Scheme (NDIS). The focus of development of the NDIS is to make sure that people with disability have more control over the support they receive, and are able to access care that meets their needs – so they can participate in school, work and the community to their full potential. This person-centred approach has informed the development of the new National Standards.

Using this Guide

This Guide is for staff working in disability service provision. This could include support workers, team leaders, managers and CEOs. It could also include Committees of Management and volunteers. The Guide also outlines what external assessors may look for in any formal audit or review against the National Standards.

It has been designed to support individual, team and organisational reflection, planning and review. Services may need to change their practice and operations to meet the standards.

It can be used for:

- Induction for new employees
- Training and development
- Individual reflection, self-assessment and improvement planning
- Team meetings
- Individual and service planning
- Consultation with people with disability and their family, friends, carers and advocates
- External Assessors and auditors.

Introduction

The Evidence Guide can be used as a starting point for conversations about the services you provide and how you can make sure that they meet the needs and support the aspirations of people with disability.

It is a companion document to the National Standards for Disability Services. As well as a full version, there is also an Easy English version of the standards. Additional resources include a Conversation Tool and a set of Stories. In time, additional resources will be developed to promote awareness and application.

Structure of the Guide – an outline

This Guide includes four sections.

Section One: The framework for the National Standards

- Human Rights
- Quality Management
- Person-centred approaches

Section Two: How the National Standards work, and how to make them work

- The elements of each standard
- Engaging people with the National Standards

Section Three: The National Standards and their application

Each standard, described with:

- Intent
- Rights for people
- Outcome for people
- Standards for service
- Indicators of practice and evidence examples

Section Four: Assessment and planning

- Checking in on how you are going
- A Quick-check before you start

National Standards for Disability Services Summary table

Definitions

This section lists a number of common terms and describes how they are used within the National Standards.

Continuous improvement – the term ‘continuous improvement’ describes the ongoing effort of an organisation to improve services, systems, processes or products to maximise benefits for clients. The process of continuous improvement relies on evidence-based information to support the organisation’s success in achieving its goals and outcomes. This also means adapting to changing needs of the community or people using services.

Cultural competency – the term ‘cultural competency’ describes individuals and organisations with a set of behaviours, attitudes, knowledge, skills, practices and processes which enable effective work in cross-cultural settings. It is more than cultural awareness. It means that individuals and organisations are proactive rather than responsive regarding cultural diversity to ensure effective and relevant service delivery or supports.

Dignity of risk – the term ‘dignity of risk’ promotes each person’s autonomy and self-determination to make their own choices, including the choice to take some risks in life.

Family, friends and carers – the term ‘family, friends and carers’ recognises the importance of connection with family and friends, as well as the caring roles played by family, friends and carers. The word ‘family’ is inclusive of partners or significant others as well as parents, siblings, children and other family members.

Individual – the term ‘individual’ is used to describe the person who uses a service or support. This is primarily people with disability who use a service or support. The word ‘individual’ may also mean a family member or carer, for example, in the case of people using respite services. ‘Individual’ is used instead of words such as ‘consumer’, ‘client’ or ‘service user’.

Minimal restriction – the term ‘minimal restriction or minimal intervention’ recognises any restrictions on choice and control should be minimal and evidence based. Clear information should be provided to people with disability, their families and carers so that restrictions are transparent and easily understood.

Outcomes – the term ‘outcomes’ describes the impact or result of a service or support, such as an improvement in an individual’s wellbeing. ‘Outcomes’ can be distinguished from ‘outputs’. Outputs describe the delivery of services or supports, such as the provision of training. Outcomes can be short-term (such as an individual being involved in service planning) through to long-term (such as an individual finding employment after completing a course).

People with disability – it is recognised that not all people with disability use services and supports and so the term ‘people with disability’ is used to refer to people with disability in the community generally.

Person-centred – the term ‘person-centred’ describes service and supports that are centred on an individual and their strengths, needs, interests and goals. Person-centred service delivery ensures that people with disability lead and direct the services and supports they use.

Quality management – the term ‘quality management’ describes the systems and processes an organisation has in place to monitor, review, plan, control and ensure quality of services, supports or products.

Reflection – the term ‘reflection’ refers to activities that individuals, teams and organisations undertake to learn from practice and action. This can be undertaken formally or informally as part of professional development or quality management.

Service and supports – the term ‘service and supports’ describes the distinction between ‘services’ (such as specialist and mainstream service delivery) and ‘supports’ (which are other measures that a person may use to live a full life such as brokering and mentoring). For simplicity, the National Standards refer to disability organisations and service providers as ‘services’. An individual may use more than one service.

Section One:

The framework for the National Standards

A lot has changed in disability services since the previous National Standards were released in 1993. The revision of the National Standards kept the elements that are still relevant and effective. It also strengthened elements that needed more focus and included new elements to reflect evolving philosophies and practices regarding service delivery for people with disability.

The National Standards are framed by two sets of principles:

Human Rights principles, which promote respect, dignity and opportunity across all the standards;

Quality Management principles, which keep a focus on the standards as fundamental to quality service delivery.

The National Standards also reflect the move towards person-centred approaches, whereby people with disability are at the centre of planning and delivery. As outlined by the Productivity Commission in its report on [Disability Care and Support](#) “the intention of person-centred approaches is to maximise, as much as reasonably possible, the capacity for people with disabilities to take control of their lives”.

Human Rights

The National Standards include principles that promote respect, dignity and opportunity across the standards. The National Standards are drawn from the United Nations (UN) [Convention on the Rights of Persons with Disabilities](#). Within this set of National Standards a new principle has been added to strengthen the focus on partnerships, consistent with the [National Disability Strategy](#). The National Disability Strategy emphasises the importance of people with disability participating in decisions that affect their lives along with family, friends, carers and advocates. The strategy promotes active participation in decision making to safeguard and advance the human rights, wellbeing and interests of people with disability.

The Human Rights principles are:

- respect for the inherent dignity, independence of persons and individual autonomy, including the freedom to make one's own choices;
- non-discrimination;
- full and effective participation and inclusion in society;
- respect for difference and acceptance of persons with disabilities as part of human diversity and humanity;
- equality of opportunity;
- accessibility;
- equality between men and women;
- respect for the evolving capacities of children with disability and respect for the right of children with disability to preserve their identities; and
- active partnerships between services and people with disability, and where appropriate, their families, friends, carers and/or advocates.

You should consider these principles when considering any of the National Standards. For example, non-discrimination is relevant across all the National Standards. This principle should prompt you to think about how your service prevents discrimination and responds to the diversity of people's needs, backgrounds and identities. Similarly, the principle regarding respect for dignity, independence and autonomy is as relevant when dealing with feedback and complaints as it is when considering rights.

Quality Management

These principles describe core features of a service focused on quality for people with disability, one that considers the effects and impacts of a service and makes changes and improvements when needed. The principles emphasise the involvement of people with disability, as well as family, friends, carers and advocates in monitoring and reviewing services and supports. They also emphasise taking a long-term view of how the service or support contributes to the person's life.

A service with a strong commitment to quality management would:

- focus on outcomes for people who use services and supports;
- provide leadership;
- involve individuals and staff;
- use a process approach;
- take a systems approach;
- encourage continuous improvement;
- make evidence-informed decisions; and
- engage in collaborative partnerships.

At a practice level, the experience of people working 'on the ground' can shape knowledge about what works well and not so well in your service. From this, you can consider how to achieve better outcomes for people using your services.

Those of you working in direct care often have daily contact with people who access your service. This represents the most important partnership in service provision. It should be the key driver for quality. The relationships you build and maintain with people with disability and their family, friends and carers can be the foundation for **reflection, planning and action**. This is the quality cycle in its most simple form. Building an environment where this becomes part of everyday practice is an ultimate goal of quality management.

Continuous improvement is a core component of quality service provision. The quality cycle helps you to look continuously and consistently for opportunities to improve. This can take the form of small and large outcomes, defined and achieved together. Actions for improvement should be based on direct feedback from people accessing or using your service. Checking to see if improvement has actually been achieved is also important. This should be approached in partnership with people using your service.

You can use the National Standards as a framework for quality management. You can also use them to engage individuals, families, friends and carers, staff and other external stakeholders in service planning, delivery and review.

Person-centred approaches

Person-centred approaches have emerged across a number of different kinds of community services. This is partly in response to people using services demanding to be treated fairly and with respect. It is also partly in response to a growing recognition that 'service-centred' approaches to service delivery can be undermining and ineffective, with people excluded from making decisions about their own lives.

Just who has the power to make decisions, and how people are involved in decision making, has a significant impact on the quality of decisions, the actual effect of decisions and people's personal sense of worth.

Person-centred approaches ensure that individuals are in the centre of service design, planning, delivery and review. Individuals shape and direct service and support arrangements to suit their strengths, needs and goals, with the support of families, friends, carers and advocates.

Recognising people with disability as active participants in the community is the first step towards more person-centred service provision. The National Standards stress that the active participation of people with disability in decision-making should be the starting point for action, at both the individual and service levels. This will vary by the nature and type of service. The National Standards will prompt services to work with people with disability, along with their families, friends and carers, to have and maintain control of their decision-making, reviews and planning.

Section Two

How the National Standards work, and how to make them work

The elements of each standard

Each standard starts with a summary of intent, which explains what is expected of service provision and what the standard means for people using a service. Each standard consists of the same basic elements.



Rights for people

This is a new element of the National Standards. It highlights individual rights that each standard promotes or supports. This reinforces the Human Rights principles which cover all the standards.



Outcomes for people

This is a new element of the National Standards. It describes what an individual using disability services or supports should experience through the effective achievement of each particular standard.



Standards for service

The Standards for service give an introductory statement of the requirements involved for services to achieve each standard.

Indicators of practice provide guidance on the activities and ways of working that should be in place to support the standard. They describe what services need to do in order to meet each standard. The indicators are related to the systems and processes that you use every day in service provision. The indicators can also be the focus for assessment and improvement – they provide prompts regarding the kinds of practice, behaviours, activities, systems and processes that would support the achievement of the standard.

Section Two

Evidence examples are provided for each indicator. These are examples of evidence that you may look for or use to assess whether and how your service is meeting each standard. Over time, more specific advice will be developed as required across sectors.

The types of evidence will vary, depending on the size, location or structure of your organisation as well as the kinds of services you provide and the people who use your services.

The examples are not exhaustive and can be used as a starting point for thinking about the best ways for your service to meet the National Standards. A number of evidence examples are relevant across related indicators of practice.

Evidence can be used as part of a more formal assessment process, either internal or external, to check compliance with the National Standards and inform continual improvement.

It is useful to think about evidence in the following way:

- Who has been involved in developing your service's processes and systems – staff, management, people with disability, families, friends, carers and advocates?
- What documentation do you have that might provide guidance on policy, practice or procedures relating to the indicators?
- How do you communicate the key principles and concepts within these documents to staff, people with disability, families, friends and carers?
- What everyday practice can you describe that might show how you apply your processes and systems relating to each standard?
- How do you regularly review your practices, processes and systems and who do you involve in these activities?

It is important to remember that when thinking about evidence, your practice should come first and gathering the relevant evidence should follow. The kinds of evidence you might like to consider will vary in form. It may include:

Consultation – this includes checking with relevant people about knowledge, awareness, experiences and behaviours relating to the standards and their application

Observation – for example, observation of staff practice or an audit of the physical environment.

Documents and data – such as policies, procedures manuals, registers, information kits or case files.

You may find you have a range of evidence for different indicators, and that the amount of evidence may vary across indicators or standards. This is to be expected - evidence should reflect what is actually happening in a service and is likely to change over time as your service evolves and improves.

The questions above are particularly useful when undertaking self-assessment and improvement planning. The last two sections of this Guide provide more detail about how to reflect on your current practice against the National Standards (and the evidence you may need for this) and what you can do to change or improve practice. In particular, they will help you to answer the question “How do we **know** we are meeting the National Standards and continually improving our service?”

Engaging people with the National Standards

You can use the National Standards for Disability Services as a tool to engage a range of people in reviewing your service. Taking the opportunity to reflect on what you are able to achieve together can be an extremely powerful process.

The National Standards can be the starting point for conversations and activities that bring people together to review your current service against the National Standards or to look at how to improve a particular part of your service. Involving the right people – people with disability and their families, friends and carers, staff and external stakeholders – at the right time, will increase the likelihood of success and keep the focus on track.

You may find, after seeking feedback, that there is room for improvement. It is through this consultation and participation that ideas are generated and solutions found. Looking at a particular area of service provision from different perspectives is a way of keeping the service relevant and effective.

The National Standards themselves emphasise the importance of participation, feedback and active decision-making. Using them also presents an additional opportunity to shape self-assessment and improvement planning activities in a way that promotes participation and partnerships.

The National Standards for Disability Services Conversation Tool is a complementary resource to this evidence guide. It provides information and guidance on how to engage people with disability in a conversation about quality in general, and the Standards in particular.

Section Three:

The National Standards and their application

Standard One: Rights

The intent of this standard is to promote ethical, respectful and safe service delivery that meets, if not exceeds, legislative requirements and achieves positive outcomes for people with disability. The Human Rights principles are relevant across all the standards and each standard supports the achievement of basic rights. This standard has a focus on particular rights such as freedom of expression, self-determination, choice, privacy and freedom from discrimination.

The standard recognises people's inherent right to freedom of expression and the right to make decisions about, and exercise control over, their own lives. It reinforces the fundamental right of people with disability to have respect and dignity. This includes the dignity of risk - the right to choose to take some risk in life.

The standard acknowledges the risks of harm, neglect, abuse or violence that some people with disability may face when using services or supports. The standard highlights the roles for services and supports, families, friends, carers and advocates in reducing these risks. The standard promotes individual rights and individual and service responsibility.

The standard emphasises the importance of:

- dignity and respect;
- freedom of expression;
- self-determination;
- choice and control;
- confidentiality and privacy;
- freedom from discrimination, exploitation, abuse, harm, neglect and violence;
- the role of families, friends, carers and advocates in the safeguarding of rights; and
- comprehensive systems to prevent or promptly respond to any breaches of rights.



Rights for people

I have the right to exercise control and choice when I use services or supports. I also have the right to dignity of risk and to be free from discrimination or harm.



Outcome for people

I can make choices about the services and supports I use, and how I use them. When I use a service or support, I am respected and safe.



Standard for service

The service promotes individual rights to freedom of expression, self-determination and decision-making and actively prevents abuse, harm, neglect and violence.

Indicators of practice and evidence examples

1.1 The service, its staff and its volunteers treat individuals with dignity and respect.

- Individuals are satisfied they have experienced being treated with respect and dignity.
- Staff and volunteers can describe what treating individuals with dignity and respect means in practice, and provide examples of their practice.
- Records show how individuals, families, friends and carers are involved in defining dignity and respect (and ways to maintain dignity and respect) from their perspective.
- Service information (such as mission or vision statements and service brochures) includes a commitment to respect and dignity.

Standard One: Rights

1.2 The service, its staff and its volunteers recognise and promote individual freedom of expression.

- Individuals are satisfied that their freedom of expression is supported and promoted, and describe how they seek, receive and share information and opinions.
- Staff and management are required to describe and implement how they ensure that an individual has the freedom to seek, receive and share information and opinions.
- A range of accessible information sources are available and used by individuals.
- Service information (such as mission or vision statements and service brochures) includes a commitment to freedom of expression.

1.3 The service supports active decision-making and individual choice including the timely provision of information in appropriate formats to support individuals, families, friends and carers to make informed decisions and understand their rights and responsibilities.

- Individuals are satisfied that they are provided information in suitable formats, and that the service supports their decision-making and choice.
- Staff and management are required to describe and implement how they ensure that an individual understands the information provided.
- Records show the involvement of individuals, families, friends and carers in the development and review of information.
- Records show that information is reviewed regularly to ensure that it is accurate, current and relevant, and the review process involves individuals, families, friends and carers.
- Written policies and procedures are in place, which outline the range of information and format types to be provided to individuals, families, friends and carers from commencement to leaving a service.

1.4 The service provides support strategies that are based on the least restrictive options and are contemporary, evidence-based, transparent and capable of review.

- Individuals, families, friends, carers and advocates can describe how support strategies are developed and adapted to support human rights.
- Staff can describe the frameworks supporting everyday practice.
- Individualised plans show that actions, services and supports are based on contemporary evidence.

Standard One: Rights

- Records show that research is used to benchmark against contemporary best practice (such as database searches or information exchange with similar services).
- Records show that staff participate in learning and development activities aimed at understanding contemporary practice frameworks (including minimal restrictive options) and improving practice.
- Records document continuous review of practice to ensure relevance, appropriateness and transparency.
- Records show that the specific use of restrictive practice is monitored and reviewed regularly.
- See also Indicator 6.2.

1.5 **The service has preventative measures in place to ensure that individuals are free from discrimination, exploitation, abuse, harm, neglect and violence.**

- Individuals report being provided with information (in appropriate formats) that outlines how the service will ensure they are free from harm, neglect, abuse and violence.
- Staff and management are required to describe and implement how they ensure individuals are free from harm, neglect, abuse and violence and can provide examples of when and how this has been done.
- Staff and management are provided with training (beginning at induction) on the safeguarding of rights and freedom from harm, neglect, abuse and violence, and particularly on the United Nations Convention on the Rights of Persons with Disabilities.
- Written policies and procedures that safeguard individuals rights and freedom from harm, neglect, abuse and violence are upheld in place and applied. These are, at a minimum, consistent with relevant legislative and regulatory frameworks.
- Written policies and procedures provide guidance on actions aimed at preventing harm, neglect, abuse and violence.
- Written policies and procedures provide guidance on roles and responsibilities in responding to alleged/suspected/actual critical incidents.

Standard One: Rights

1.6 The service addresses any breach of rights promptly and systemically to ensure opportunities for improvement are captured.

- Individuals report being provided with information (in appropriate formats) regarding their rights when accessing a service, how their rights will be safeguarded and how any infringements will be addressed.
- Staff and management are able to describe the systems that are in place to investigate and respond to breaches of rights, key obligations of the organisation and how they relate to their role.
- Senior management regularly review outcomes from incidents and use trends and themes to improve services.
- Written policies and procedures are in place that detail actions to be taken in response to any breach of rights. This would include how to initiate, investigate and report on a claim regarding an infringement of an individual's rights.
- Records relating to alleged/ suspected/actual incidents describe actions taken to respond to the incident, supports provided to individuals, families, friends and carers and how the outcome was reported to relevant parties.
- Records show that relevant supports are offered to the individual, family, friends or carer during the course of an investigation.

1.7 The service supports individuals with information and, if needed, access to legal advice and/or advocacy.

- Individuals report being provided with information (in appropriate formats) from the time of commencement of the service, which outline external advisory and/or advocacy services available and how to access such supports.
- Ways to access external advice and support is promoted in service publications.
- Culturally appropriate assistance is provided to people from diverse cultural backgrounds in order to access external advice and advocacy.
- Records indicate that staff use proactive strategies to enable involvement of external advocates.
- Management can describe their legislative responsibilities in relation to facilitating access to independent advice and advocacy.
- Written policy and procedures are in place to guide practice on the promotion of and facilitation of access to independent advice and advocacy.
- See also Indicator 4.2.

Standard One: Rights

1.8 The service recognises the role of families, friends, carers and advocates in safeguarding and upholding the rights of people with disability.

- Families, friends, carers and advocates report that a range of supports are provided to assist them to fulfil their roles (e.g. referral to external supports in the case of an investigation).
- Staff and management are required to describe and implement ways in which they include families, friends, carers and advocates in their everyday practice.
- Written policies and procedures include reference to the role of families, friends, carers and advocates in upholding the rights of individuals.
- Publicly available service information promotes the role of families, friends, carers and advocates and includes examples of how they can be involved.
- Records show how families, friends, carers and advocates are involved in safeguarding and upholding the rights of people with disability.

1.9 The service keeps personal information confidential and private.

- Individuals report being provided with information (in appropriate formats) which outlines how their personal information will be kept private and confidential. This would also include an explanation of when it may be necessary and lawful to share such information (e.g. referrals) with consent. This would also include when it is lawful and appropriate to a service to share personal information without consent (mandatory reporting).
- Records describe how consent to release or share information is sought using methods appropriate for each individual.
- Staff and management are required to describe and implement how they maintain confidentiality and privacy of personal information at an everyday level.
- The physical environment supports the maintenance of privacy in the course of everyday activities.
- Systems are in place to ensure personal information is physically secure and safe, including the use and transfer of electronic information.
- Written policies and procedures outline how personal information is dealt with (including destruction of personal information) and ensure compliance with relevant legislative and regulatory frameworks.

Standard Two: **Participation and Inclusion**

The intent of this standard is to promote the connection of people with disability with their families, friends and chosen communities. It also requires that services work collaboratively with individuals to enable their genuine participation and inclusion.

This standard recognises the role that services can play in enabling the contribution and inclusion of people with disability, and their valued participation in the community, including work and learning. In meeting this standard, services will actively support and encourage individuals to connect with family and friends and to feel included in their chosen communities. This should be based on an individual's interests, identity, heritage and aspirations over time. Importantly, the focus on 'valued role' needs to be one of the individual's choosing. Services will also work with the wider community to promote participation and inclusion.

The standard emphasises the importance of:

- promoting a valued role for people with disability in public and private life;
- connection to family, friends and chosen communities;
- economic and community participation and associated benefits to the individual and the broader community;
- participation based on an individual's interests, identity, heritage, preferences, goals and aspirations (which may change over time); and
- the role of family, friends, carers, advocates and other organisations in promoting participation and inclusion.

Standard Two: Participation and Inclusion



Rights for people

I have the right to participate in my chosen community. I also have the right to decide how I have contact with family, friends and community.



Outcome for people

I follow my interests, with the support of my services, family, friends, carers or advocates.



Standard for service

The service works with individuals and families, friends and carers to promote opportunities for meaningful participation and active inclusion in society.

Indicators of practice and evidence examples

2.1 The service actively promotes a valued role for people with disability, of their own choosing.

- Individuals report playing an active part in identifying options for participation and inclusion.
- Staff and management are required to describe and implement why it is important to promote and support a valued role for people with disability in the community, and how this can be achieved.
- Written and communicated policy is in place that outlines the service's approach to promoting a valued role for people with disability in the broader community.
- Organisational planning processes (strategic and operational) include activities aimed at promoting a valued role for people with disability.
- Records provide evidence of people with disability participating in activities that support valued roles in the community.

2.2 The service works collaboratively with individuals to connect to family, friends and their chosen communities.

- Individuals describe connections with family, friends and chosen communities.
- Frontline staff can describe how they support individuals to connect to family, friends and their chosen communities on a day-to-day basis.

Standard Two: Participation and Inclusion

- Written policies and procedures are in place to identify and regularly review chosen communities and support networks (including, but not limited to, family and friends) as part of individualised planning.
- Records show individualised planning includes consideration and regular review of chosen communities and support networks and relevant support strategies.

2.3 Staff understand, respect and facilitate individual interests and preferences, in relation to work, learning, social activities and community connection over time.

- Individuals report having accessed a range of preferred activities within their chosen communities.
- Staff are provided with training and information about the importance of connection and inclusion for the wellbeing of people with disability.
- Staff can identify a range of innovative ways to support individual interests and preferences.
- Written and communicated policy is in place that outlines the approach to promoting and supporting individual interests and preferences in a range of areas.

2.4 Where appropriate, the service works with an individual's family, friends, carer or advocate to promote community connection, inclusion and participation.

- Family and friends report having been involved (with appropriate consent) in individualised planning and review.
- Where an advocate has been utilised, written evidence is in place that details activities and any relevant actions arising from this involvement.
- Written and communicated policy is in place that outlines the approach to working with family, friends and carers in the delivery of services or supports.
- Written and communicated policy is in place that outlines how and when the service facilitates access to individual advocates.

2.5 The service works in partnership with other organisations and community members to support individuals to actively participate in their community.

- Staff can describe partnerships with other relevant organisations to support individuals.
- Written policy and procedures are in place to guide liaison and collaboration with other agencies.
- Service information (such as mission or vision statements and service brochures) includes a commitment to working with other organisations, where this supports individuals to participate.
- Records show an active network of collaboration with other agencies aimed at supporting employment, learning, social activities and community connection.

Standard Two: Participation and Inclusion

2.6 The service uses strategies that promote community and cultural connection for Aboriginal and Torres Strait Islander people.

- Individuals can describe how the service has responded to the cultural needs of Aboriginal and Torres Strait Islander people.
- Management can describe how they lead a culture of respect and acknowledgement of Aboriginal and Torres Strait Islander culture.
- Staff can describe how they respect and promote cultural awareness in their everyday practice.
- Staff participate in relevant training, where necessary, regarding Aboriginal and Torres Strait Islander cultural awareness.
- Strategic and operational plans detail how the service responds to help promote cultural connection, at both an organisational and individual level.
- Written and communicated policy is in place that outlines an organisation-wide commitment to supporting Aboriginal and Torres Strait Islander culture.
- Service information is available in languages that is appropriate for Aboriginal and Torres Strait Islander individuals and their families, friends and carers.

Standard Three: **Individual Outcomes**

The intent of this standard is to promote person-centred approaches to service delivery whereby individuals lead and direct their services and supports.

Services used by people with disability are expected to be flexible and tailored to each individual's strengths and needs, and deliver positive outcomes. This includes an individual's disability as well as the need for services to competently recognise and respond to issues related to age, gender, culture, heritage, language, faith, sexual identity, relationship status, and other relevant factors.

Achieving individual outcomes requires collaboration between the individual and service provider to ensure active choice and decision-making. This means a joint effort based on mutual respect rather than the service making all the decisions. A focus on individual outcomes includes individuals and services working together to review progress against planned and measurable outcomes.

The standard also recognises the potential role, with the individual's consent, of families, friends, carers and advocates in planning, delivery and review, with the individual's consent. It encourages active dialogue between an individual, their families, friends, carers and/or advocates and a service regarding the nature of the service or supports provided, with a focus on the minimal restrictive options.

The standard emphasises the importance of:

- people with disability leading and directing their supports with support from family, friends, carers and advocates (with consent);
- service planning, implementation and review being based on individual strengths, needs and life goals;
- collaboration and dialogue;
- responsiveness to diversity; and
- minimal restrictive options.

Standard Three: Individual Outcomes



Rights for people

I have the right to lead and direct decisions about my life and how the services I use support me.



Outcome for people

I use services and supports which build on my strengths and support me to reach my life goals.



Standard for service

Services and supports are assessed, planned, delivered and reviewed to build on individual strengths and enable individuals to reach their goals.

Indicators of practice and evidence examples

3.1 The service works together with an individual and, with consent, their family, friends, carer or advocate to identify their strengths, needs, and life goals.

- Individuals describe how they work with and are supported by the service to identify and act on, their needs and life goals.
- Frontline staff and management are provided with training and information on person-centred approaches to service delivery and how to use a strengths-based approach to identifying needs and life goals.
- Written and communicated policy and procedures are in place that demonstrates a person-centred approach to service delivery.
- Records show how feedback is sought from people with disability on the most appropriate ways to collaboratively work together to identify strengths, needs and life goals.
- Individual plans show that the overall wellbeing of the person with disability is taken into consideration (where appropriate) through individualised planning and review.

Standard Three: Individual Outcomes

3.2 Service planning, provision and review is based on individual choice and is undertaken together with an individual and, with consent, their family, friends, carer or advocate.

- People with disability describe how they have choice/lead and direct the process of service planning.
- Families, friends and carers report being actively involved, with consent, in the process of individualised planning and review.
- The service has clear guidelines regarding how families, friends, carers and advocates can be involved in decision-making, and how consent for their involvement is determined.
- Frontline staff can describe how they support the active involvement of people with disability in making decisions and life choices, including the involvement of an independent advocate when necessary.
- Where an advocate has been utilised, written evidence is in place that details activities and any relevant actions arising from this involvement.
- Records show that individualised planning includes an active consideration of risk against benefits when supporting individual choice.

3.3 The service plans, delivers and regularly reviews services or supports against measurable life outcomes.

- Individuals describe how they participate in reviews of services or supports.
- The practice of individualised planning, and review, is centred on the expressed strengths, needs and life goals of individuals accessing the service.
- Staff can provide examples of individual life outcomes and how they are measured, and how they are reviewed with individuals and (where relevant) families, friends, carers or advocates.
- Written policy and procedures are in place to guide assessment and needs identification as the first stage in individualised planning.
- Records show that individualised planning includes expressed individual choices.
- Records show that the achievement of life outcomes is monitored and reviewed regularly as part of the individualised planning process, and plans are modified where necessary to remain relevant and responsive.

Standard Three: Individual Outcomes

3.4 Service planning and delivery is responsive to diversity, including disability, age, gender, culture, heritage, language, faith, sexual identity, relationship status, and other relevant factors.

- Individuals can describe how the service has responded to relevant diversity factors, such as faith, culture, relationship status and so on.
- Management can describe how they lead a culture of respect and tolerance in relation to diversity.
- Staff can describe how they respect and promote diversity in their everyday practice.
- Staff participate in relevant training, where necessary, regarding population diversity, cultural competency and implications for service delivery.
- Strategic and operational plans detail how the service responds to diversity, at both an organisational and individual level.
- Service planning includes identification of the demographic characteristics of individuals accessing the service, as well as their families, friends and carers.
- Written and communicated policy is in place that outlines an organisation-wide commitment to supporting diversity.
- Service information is available in commonly used languages of individuals and their families, friends and carers.

3.5 The service collaborates with other service providers in planning, service delivery and to support internal capacity to respond to diverse needs.

- Individuals, families, friends, carers and advocates can describe how other agencies are involved (where necessary) in supporting the individual's life goals.
- Service planning demonstrates collaboration with other support agencies to respond to the diverse needs.
- Staff can describe how they refer to and then collaborate with other service providers in meeting the diverse needs of individuals.
- Management can describe how they source external support to develop responses to diverse need.
- Individualised planning indicates the involvement of other service providers to respond to diverse need.

Standard Four:

Feedback and Complaints

The intent of this standard is to ensure that both positive and negative feedback, complaints and disputes are effectively handled and seen as opportunities for improvement. To meet this standard, services are required to have clearly communicated and effective systems in place to address and resolve issues raised by individuals, families, friends, carers and advocates.

This standard recognises that robust and timely feedback, including compliments and complaints, is a key driver for continuous improvement. Services should have a range of opportunities to seek feedback from individuals ranging from: day to day feedback; formal consultation & engagement; regular satisfaction surveys; or consumer groups.

In addition, this standard recognises that people need to feel safe to make a complaint or provide negative feedback. This includes being able to access independent mechanisms for complaints, appeals or disputes without fear of adverse consequences or loss of service. The standard also includes being able to have access to advocates and independent information, support, advice and representation.

The standard emphasises the importance of:

- clear and regular communication about how to provide feedback including how to make a complaint;
- the use of feedback and complaints to continuously drive service improvements;
- regular, proactive and inclusive feedback systems;
- effective complaints management and resolution;
- transparent dispute management; and
- access to independent information, support, advice and representation to ensure people are able to provide feedback or make a complaint.

Standard Four: Feedback and Complaints



Rights for people

I have the right and freedom to give positive and negative feedback about all aspects of my supports and services and expect to see improvements as a result. I also have the right to independent advice and support to provide feedback or make a complaint when I need it.



Outcome for people

I have a range of ways to speak up about my supports and services and play an active role in working out how things will improve. I know how to access independent support and advice when providing feedback or making a complaint.



Standard for service

Regular feedback is sought and used to inform individual and organisation-wide service reviews and improvement.

Indicators of practice and evidence examples

4.1 Individuals, families, friends, carers and advocates are actively supported to provide feedback, make a complaint or resolve a dispute without fear of adverse consequences.

- Individuals, families, friends and carers report a willingness to provide feedback, including negative feedback or complaints.
- Individuals, families, friends and carers report active support when providing feedback, making a complaint or dealing with a dispute.
- Written policies and procedures provide guidance on consistent practice in encouraging feedback.
- Written policy and procedures provide guidance on the management of complaints and dispute resolution, including timeframes.
- The service develops and implements a range of feedback mechanisms, as part of organisational planning and service provision.
- Records show regular organisation-wide consultation processes and activities involve people with disability, families, friends, carers and advocates e.g. annual surveys, planning events, focus groups, and advisory committees.
- See also Indicator 6.7.

Standard Four: Feedback and Complaints

4.2 Feedback mechanisms including complaints resolution and how to access independent support, advice & representation, are clearly communicated to individuals, families, friends, carers and advocates.

- Individuals, families, friends and carers report being provided with a range of information (at the commencement of service and at regular intervals) on how to provide feedback, including complaints and disputes, in a non-threatening and inclusive manner.
- Written policy and procedures outline consistent practice relating to enabling access to independent advice and representation.
- On commencement of a service, information is provided (in a range of formats) to individuals, families, friends and carers on how to provide feedback, including how complaints and disputes will be managed and how to access independent support, advice and representation.
- Records of intake and assessment show that the provision of this information to individuals has occurred.
- Records describe how individuals, families, friends and carers are involved in the development and review of information about feedback mechanisms to ensure relevance and appropriateness.
- See also Indicator 1.7.

4.3 Complaints are resolved in collaboration with the individual, family, friends, carer or advocate in a proactive and timely manner.

- Individuals, families, friends, carers and advocates describe their experience of the complaints process as collaborative, proactive and timely.
- Management and staff can describe how they resolve complaints and disputes in collaboration with individuals, families, friends, carers and advocates.
- Complaints and dispute resolution policy and processes outline clear actions, timelines to be followed and mechanisms used to ensure independent review.
- Records demonstrate that the complaints process is tailored to meet individuals' needs (e.g. culturally diverse client-base; using appropriately structured questions to gather relevant information; people with a vision-impairment receiving their complaint statement on a tape; supporting the complainant to choose the mechanism and/or venue for making their complaint statement).
- Records of complaints show policy and procedure is followed, and includes actions taken because of complaint.

Standard Four: Feedback and Complaints

4.4 The service seeks and, in conjunction with individuals, families, friends, carers and advocates, reviews feedback on service provision and supports on a regular basis as part of continuous improvement.

- Individuals, families, friends, carers and advocates report active participation in the review of feedback and can describe how it informs changes in practice.
- Senior management can describe regular review and analysis of feedback (including themes and trends) and how this is used for decision making and planning.
- The service uses continuous improvement processes and systems to support the review and analysis of feedback, including the use of relevant information support systems.
- Records show the involvement of individuals, families, friends, carers and advocates, in the review of feedback.

4.5 The service develops a culture of continuous improvement using compliments, feedback and complaints to plan, deliver and review services for individuals and the community.

- Staff, management and the governing body can articulate the importance of continuous improvement and its impact on quality service provision.
- Records indicate outcomes from complaints and disputes are regularly reviewed by senior management and shared with the governing body as relevant.
- Staff are provided with training and information on how feedback (including complaints) can be sought, acknowledged, analysed and utilised for service planning, provision and improvement.
- Every day practice of staff seeking feedback and supporting feedback processes can be observed.
- Written policy and procedures support a 'no blame' approach to the management of complaints and negative feedback.
- See also indicator 6.4.

Standard Four: Feedback and Complaints

4.6 The service effectively manages disputes.

- Staff and management are required to describe and implement the systems in place for dispute resolution and how outcomes from disputes inform continuous improvement.
- Staff report they are provided with information on how disputes are resolved within the organisation at commencement of employment.
- Systems for dispute resolution include reference to external representative, advisory and complaints resolution bodies, including how to access such services.
- Written policy and procedures are in place that outline how disputes are resolved, including reference to any relevant legislative obligations.

Standard Five:

Service Access

The intent of this standard is to ensure that access to services and supports is fair and equal and transparent so that individuals are supported when services are not available and barriers to access are identified and removed. The standard applies across service entry or commencement, service use and, where relevant, exit or cessation processes.

Access to services and supports is dependent on a range of factors, including location, an individual's identified needs and the resource capacity of a service. This standard recognises that individuals should be supported to understand criteria and processes regarding access to, and use of, a service. This also includes clear explanations when a service is not available to an individual, and referral to alternative service options.

The standard emphasises the importance of:

- accessible information to respond to diversity of need;
- transparent and consistently applied service commencement and cessation processes;
- information provision and active referral when a service is not available
- the value of partnerships with other agencies and relevant community members to enable referral, and
- regular reviews to identify and respond to any potential barriers to access.

Standard Five: Service Access



Rights for people

I have the right to access services based on fair and equal and transparent criteria, and support for referral when a service is not available.



Outcome for people

I understand what the service offers, access to the service that is fair and equal and I am supported with other options when I can't access a service.



Standard for service

The service manages access, commencement and cessation in a transparent, fair and equal and responsive way.

Indicators of practice and evidence examples

5.1 The service systematically seeks and uses input from people with disability, their families, friends and carers to ensure access is fair and equal and transparent.

- Individuals, families, friends, carers and advocates report their involvement in providing feedback about access, including barriers to access.
- Eligibility criteria are regularly reviewed to ensure transparency and equity.
- Rationale for eligibility criteria and assessment decisions are provided both formally and informally.
- Regular consultation activities include input on access and potential barriers to access.
- Consultation activities include seeking feedback from members of the community not currently accessing a service regarding access and potential barriers to access.

Standard Five: Service Access

5.2 The service provides accessible information in a range of formats about the types and quality of services available.

- Staff and management are required to describe and implement how they ensure that individuals understand information provided.
- Written policies and procedures are in place that outline the range of information and format types to be provided to individuals, families, friends and carers from commencement through to leaving a service.
- Records show the involvement of individuals, families, friends and carers in the development and review of information according to their needs.
- Records show that information is regularly reviewed (as part of continual improvement) to ensure accuracy, currency and relevance, with the involvement of individuals, families, friends and carers.

5.3 The service develops, applies, reviews and communicates commencement and leaving a service processes.

- Staff can describe commencement and cessation processes.
- Management and the governing body can describe processes within the context of legislation, service and funding agreements.
- Written policy and procedures guide all activities relating to commencement and/or leaving a service.
- Processes are developed in line with relevant legislation and regulation.
- Processes include the provision of relevant information on alternative service options and referral points (where necessary) upon leaving a service.
- Information, in appropriate formats, is provided to individuals, families, friends and carers, and where appropriate, advocates, on the processes for commencement and leaving a service.
- Records relating to the leaving a service show a clear and transparent rationale.
- Processes (and relevant information) are regularly reviewed as part of a continuous improvement system, with input from individuals, families, friends and carers.

5.4 The service develops, applies and reviews policies and practices related to eligibility criteria, priority of access and waiting lists.

- Written policy and procedures guide the development and application of eligibility criteria, priority of access and waiting lists.
- Policy and procedures are developed within the context of relevant legislation and regulation such as the Disability Discrimination Act 1992.
- Records of intake and assessment show policy and procedures are followed.
- Policy and procedures are regularly reviewed as part of a continuous improvement system, with input from individuals, families, friends and carers.

Standard Five: Service Access

5.5 The service monitors and addresses potential barriers to access.

- Individuals, families, friends, carers and advocates report being involved in regular audits of the physical environment in which services are provided.
- Individuals, families, friends, carers and advocates report being involved in regular audits of service delivery with a focus beyond the physical environment (such as communication, frontline services or programs).
- Management and staff can identify potential barriers to access and describe how these have been addressed.
- Records indicate how barriers to access have been addressed.
- Records indicate regular review and benchmarking of client data to identify potential gaps in access.

5.6 The service provides clear explanations when a service is not available along with information and referral support for alternative access.

- The service maintains up-to-date information on referral support for alternative access.
- Management provide clear and transparent rationale when a service is not available, guided by developed eligibility criteria, priority of access and waiting list policy and procedures.
- Staff can describe processes for information provision and referral support and describe examples relevant to their role.
- Processes include the provision of relevant information on alternative service options and referral points in appropriate formats.

5.7 The service collaborates with other relevant organisations and community members to establish and maintain a referral network.

- Strategic and operational planning describes activities aimed at maintaining a referral network.
- Records show the regular review of options for referral to ensure appropriateness and quality.
- Records indicate the service is an active member of referral networks.
- Staff can describe how they refer to other agencies who may simultaneously deliver support and how they collaborate (e.g. communicate or plan together) to achieve shared outcomes.

Standard Six:

Service Management

The intent of this standard is to ensure that services are managed effectively and efficiently. It requires services to be person-centred and to ensure flexibility to respond to individual strengths and needs. It also requires services to promote a culture of continuous improvement as a basis for quality service delivery.

A range of systems and processes are required to support quality service provision and these are reflected in the standard. The standard refers to the active involvement of people with disability, families, friends, carers and advocates in service and support planning, delivery and review. Support for organisational learning and skills development is considered integral to a culture of quality service delivery and continuous improvement. This includes support and training for staff and volunteers. Additionally, service delivery that is reflective in practice and based on contemporary evidence will support the best possible outcomes for individuals.

Adherence to workplace related legislative and regulatory frameworks is an expectation within the standard. This will support accountability through sound governance and enable services to be delivered in a safe environment by appropriately qualified and supervised personnel.

The standard emphasises the importance of:

- sound governance and management in all aspects of service planning, development and provision;
- clear communication to staff, people with disability and other stakeholders;
- continuous improvement and evidence based practice;
- a range of methods for active participation of people with disability and their family, friends, carers and advocates in planning, delivery and review at the individual, service and organisational levels; and
- compliance with workplace related legislation and regulation including Work Health Safety, human resource management and financial management.

Standard Six: Service Management



Rights for people

I have the right to services and supports that are effectively managed, regularly reviewed, accountable and contemporary.



Outcome for people

My strengths and needs are effectively supported through soundly managed services.



Standard for service

The service has effective and accountable service management and leadership to maximise outcomes for individuals.

Indicators of practice and evidence examples

6.1 Frontline staff, management and governing bodies are suitably qualified, skilled and supported.

- Staff can communicate their key responsibilities according to their role as well as the organisation's vision, mission and value statements, and have a clear understanding of reporting and management structures.
- Feedback from managers and staff confirms that managers are supported in their functions as leaders.
- Written policies and procedures guide recruitment and selection, induction and ethical conduct for all staff, management, governing bodies and volunteers, including position descriptions that outline required skills and knowledge (e.g. up to date records of qualifications and legal requirements, such as police clearances).
- Individuals, families, friends and carers are provided with the opportunity to participate in recruitment activities and performance review.
- The governing body, management, staff and volunteers have access to learning and development opportunities relevant to their role and function.
- An up-to-date organisational chart is publicly available, including key decision-making roles, lines of management and delegation authority.

Standard Six: Service Management

6.2 Practice is based on evidence and the minimal restrictive options and complies with legislative, regulatory and contractual requirements.

- Records show research is used to benchmark against contemporary best practice (such as database searches or information exchange with similar services).
- Records show staff, management and governing bodies participate in learning and development activities aimed at understanding contemporary practice frameworks (including minimal restrictive option) and improving practice.
- Records document continuous review of practice to ensure relevance, appropriateness and transparency.
- Records show that the specific use of restrictive practice is monitored and reviewed regularly.
- See also Indicator 1.4.

6.3 The service documents, monitors and effectively uses management systems including Work Health Safety, human resource management and financial management.

- Management can describe their legislative, regulatory and contractual obligations.
- Clearly defined strategic, business and operational/program plans are maintained, with goals, objectives, targets and performance indicators.
- Planning processes include the consideration of emerging communities, demographic change, future needs and opportunities for service development.
- Written policy and procedures are in place to ensure a safe and healthy environment for staff and individuals accessing the service.
- Regular Work Health Safety audits are undertaken to identify potential safety hazards, ensure issues are addressed and inform continuous improvement.
- Written policy and procedures are in place and followed for Human Resource Management, including industrial relations, organisational development, workforce planning and performance management.
- Written policies and procedures are in place and followed for risk management, which includes (at a minimum) a risk register and monitoring risks associated with workplace, travel, individual's home environment and weather conditions (i.e. extreme weather).
- Written policies and procedures are in place and followed for financial management, including administration, delegation, approvals and other obligations (e.g. service agreements).

Standard Six: Service Management

6.4 The service has monitoring, feedback, learning and reflection processes, which support continuous improvement.

- Individuals, families, friends, carers and advocates report being offered (and where appropriate, taking) opportunities to participate in review and improvement activities.
- Staff and management are required to describe and implement how they are encouraged to reflect on their everyday practice as part of a continuous improvement system.
- Staff, management and the governing body can articulate the benefits of continuous improvement and can provide examples of participation in continuous improvement activities.
- Staff and management participate in relevant networks with other service providers and organisations to share and develop good practice.
- Continuous improvement activities are embedded within strategic and operational planning.
- Continuous improvement activities are coordinated at a senior level within the service and responsibilities are clearly communicated to staff and management.
- Records show that senior management regularly reviews and analyses information (including themes and trends) arising from continuous improvement activities and uses this for decision making and planning.
- Records indicate participation in a Quality Management System.

6.5 The service has a clearly communicated organisational vision, mission and values, which are consistent with contemporary practice.

- Individuals, families, friends and carers demonstrate an understanding of the vision, mission and values, and report having been involved in their development.
- Staff, management and the governing body can apply organisational values in everyday practice across all levels of the organisation.
- Induction and regular staff sessions are offered which reinforce the vision, mission and values.
- Vision, mission and value statements exist which guide person-centred service provision and support the achievement of individual outcomes.
- Vision, mission and value statements are displayed in premises, included in information packages and promoted in service brochures.
- Records describe the processes undertaken to include staff, individuals, their families, friends and carers in determining or reviewing vision, mission and values.

Standard Six: Service Management

6.6 The service has systems to strengthen and maintain organisational capabilities to directly support the achievement of individual goals and outcomes.

- Staff report participating in regular performance planning and review and can articulate the link between individual goals and outcomes and their own capability.
- A human resource management plan is in place that addresses areas such as performance planning and review, workforce planning, recruitment and retention and learning and development.
- Avenues are available for the regular provision of feedback (both positive and negative) on staff capabilities from individuals, families, friends and carers.
- Performance plans outline staff development needs and highlight opportunities to improve skills and knowledge.
- Policies and procedures regarding learning and development for all staff, management, governing bodies and volunteers are in place and followed, including at a minimum, a qualifications and training register.
- A regular program is in place for induction and other learning and development with a focus in individual goals and outcomes.

6.7 The service uses person-centred approaches including the active involvement of people with disability, families, friends, carers and advocates to review policies, practices, procedures and service provision.

- Individuals, families, friends and carers report being offered (and where appropriate, taking) the opportunity to participate in regular service reviews and other improvement planning activities.
- Staff, management and the governing body can describe the consultative approaches relevant to their role within the service, and how they use them.
- A range of consultation approaches are developed and implemented that meet the unique needs of people with disability, families, friends, carers and advocates.
- Records show regular organisation-wide consultation processes and activities involve individuals, families, friends, carers and advocates such as annual surveys, planning events, focus groups and advisory and governance committees or Boards.
- See also Indicator 4.1.

Section Four:

Reflection, planning and action

You will no doubt already have a system in place to review practice, recognising strengths to build on and areas for focus and improvement. This is likely to cover practice at an individual worker level, across service teams and across your whole organisation. This cycle of reflection, planning and action is the foundation for quality management.

These National Standards emphasise the involvement of people with disability and their families, friends, carers and advocates where appropriate in reviewing current practice and identifying areas for change and improvement.

Self-assessment or reflection can often be the starting point on your journey towards quality service provision. For some of you this process will be very familiar and you have been able to experience the benefits of taking part in review and reflection. Alternatively this may be the first time you have considered the significance of National Standards to your work.

The National Standards provide a framework for thinking about your service provision and to systematically review and improve practice and service delivery. Self-assessment is a development opportunity for your whole organisation, in partnership with individuals who may access your service, their families, friends and carers. It will give you a snapshot of how you are currently meeting the National Standards and help you to identify key areas for improvement. It is important that this process be given sufficient time for open and honest engagement, and that there is time to seek and explore different views.

Section Four

Before you start – some things to consider:

- How will management, governing body, staff and volunteers be involved in assessment and planning activities?
- How will individuals who access your service, their families, friends and carers be involved in assessment and planning?
- What type of assessment activities would work best in your service and how can you look for opportunities to build it into what you already do (e.g. team/staff meetings, existing forums, committees)? What about planning?
- What resources and supports will you need to undertake these activities?
- As evidence is gathered against each indicator, how will you know you have sufficient evidence?
- How will the information gathered through self-assessment lead to opportunities for improvement?
- How will you store the information gathered through self-assessment (including any documentation as evidence) so that it is accessible to the right people at the right time?
- How will you report the results of self-assessment to staff, management, individual, families, friends and carers?
- How will you document planning and monitor implementation, to ensure that changes and improvements identified are implemented effectively?
- If you work with other quality frameworks, how will they be streamlined or mapped to these standards to reduce the administrative burden?

National Standards for Disability Services – Summary table

The Human Rights principles overarch all the National Standards

1. Rights	2. Participation and Inclusion	3. Individual Outcomes	4. Feedback and Complaints	5. Service Access	6. Service Management
Rights for people					
I have the right to exercise control and choice when I use services or supports. I also have the right to dignity of risk and to be free from discrimination or harm.	I have the right to participate in my chosen community. I also have the right to decide how I have contact with family, friends and community.	I have the right to lead and direct decisions about my life and how the services I use support me.	I have the right and freedom to give positive and negative feedback about all aspects of my supports and services. I also have the right to independent advice and support to provide feedback or make a complaint when I need it.	I have the right to access services based on fair and equal and transparent criteria, and support for referral when a service is not available.	I have the right to services and supports that are effectively managed, regularly reviewed, accountable and contemporary.
Outcomes for people					
I can make choices about the services and supports I use, and how I use them. When I use a service or support, I am respected and safe.	I follow my interests, with the support of my services, family, friends, carers or advocates.	I use services and supports which build on my strengths and support me to reach my life goals.	I have a range of ways to speak up about my supports and services and play an active role in working out how things will improve. I know how to access independent support and advice when providing feedback or making a complaint.	I understand what the service offers, access to the service is fair and equal and I am supported with other options when I can't access a service.	My strengths and needs are effectively supported through soundly managed services.
Standards for services					
The service promotes individual rights to freedom of expression, self-determination and decision-making and actively prevents abuse, harm, neglect and violence.	The service works with individuals and families, friends and carers to promote opportunities for meaningful participation and active inclusion in society.	Services and supports are assessed, planned, delivered and reviewed to build on individual strengths and enable individuals to reach their goals.	Regular feedback is sought and used to inform individual and organisation-wide service reviews and improvement.	The service manages access, commencement and cessation in a transparent, fair and equal and responsive way.	The service has effective and accountable service management and leadership to maximise outcomes for individuals.

The Quality Management principles underpin all the National Standards