



Scheme Requirements

National Disability Insurance Scheme Approved Quality Auditor requirements (NDIS)

Verification audits

Governing requirements

HDAA Australia Pty Ltd has been appointed by the National Disability Insurance Scheme Quality and Safeguards Commission as an Approved Quality Auditor to conduct verification and certification audits in line with the NDIS rules for provider verification and certification.

The verification audit will be based on the Initial Scope of Audit document or Service Description provided. If any changes are made to the Initial Scope of Audit which may in turn also result in a change to the audit process (including duration), an agreement variation may be developed in response to the change of scope. The scope of audit will be reconfirmed prior to the assessment.

Name of guiding documents

In providing verification and certification services to providers of NDIS, HDAA is required to adhere to the [National Disability Insurance Scheme \(Approved Quality Auditors Scheme\) Guidelines 2018](#). The [National Disability Insurance Scheme \(Quality Indicators\) Guidelines 2018](#) sets out indicators and other matters that are considered when assessing compliance with the NDIS Practice Standards. Further detail should be accessed in the documents described above.

Process requirements

In conducting a verification audit, the applicable NDIS Practice Standards to be assessed are:

- a) Schedule 8 of the [National Disability Insurance Scheme \(Provider Registration and Practice Standards\) Rules 2018](#) for provider verification; and
- b) Part 2 of [the National Disability Insurance Scheme \(Practice Standards-Worker Screening\) Rules](#) for provider certification and verification.

In providing audit services, HDAA staff and assessors will adhere to Annex A – Code of Conduct for Approved Quality Auditors set out in the [National Disability Insurance Scheme \(Approved Quality Auditors Scheme\) Guidelines 2018](#). HDAA has a procedure for handling whistleblowing with respect to alleged abuse or harm related to HDAA certified NDIS providers. The process includes mechanisms to support and protect whistle-blowers, and engage with relevant authorities to investigate issues raised. Service providers are required to advise personnel in the organisation of the opportunity to contact HDAA in such situations.

Applicants must provide a unique reference number (Application Reference Number) to access the relevant sections of the NDIS Commission's system. Prior to conducting certification audits, the audit scope will be reviewed to confirm:

- a) the range of registration groups selected to provide reflects actual or intended services provided
- b) types of participants receiving services, including disability type, age groups, diversity factors such as whether a participant is indigenous or culturally and linguistically diverse
- c) geographic coverage of services provided
- d) location and number of sites where supports are provided or coordinated
- e) number of participants
- f) number of workers providing services to participants.

Should an update of a provider's record on the Commission's system be required to accurately reflect the scope of audit, this should be confirmed to HDAA in writing. Changes in the scope of the audit may impact upon the time of the audit and/or its cost.

The verification audit includes those activities in a stage one certification audit. The verification audit is an off-site audit unless it is more cost-effective to conduct an on-site verification audit. The verification audit includes a review of:

- a) the self-assessment responses completed as part of the registration application, or registration renewal process,
- b) associated evidence documents submitted by you and available through the NDIS provider's application record on the Commission's system
- c) any prior NDIS provider certification outcome, corrective actions, and audit report
- d) any additional requirements raised by the Commission.

The initial Verification cycle is for three years and begins on the registration approval date. Verification audit occurs once every three years.

Verification Audit findings shall be reported in line with the requirements of subsection 16(6) of the Guidelines.

If the Verification Audit determines that a provider is unlikely to be suitably prepared, we shall inform you and inform the Commission using the Commission's system conditional on the identified non-conformities being corrected.

Ratings (Findings)

In assessing the requirements of the Scheme, HDAA shall adhere to the ratings of attainment as set out in the Approved Quality Auditors Scheme. Where improvements are identified these will be followed up to ensure satisfactory progress is made within the required timeframes. HDAA shall conduct follow-up in a cost-effective manner that ensures that improvement actions have been properly downgraded or closed within the required timeframes. Follow-up may entail a desktop review of documentation or other review process as we determine. If any major non-conformance is identified HDAA will specify time limits for correction and corrective actions.

HDAA shall adhere to "Annex C – Timeframe for correcting non-conformities" when determining timeframes for responding to any identified improvement, noting that the Approved Quality Auditors Scheme requires that providers present a corrective action plan within seven calendar days of written notification of the improvement action.