



Australian Government



Disability Employment Services Quality Framework V1.0

Disclaimer

This document is not a stand-alone document and does not contain the entirety of Disability Employment Services Providers' obligations. It should be read in conjunction with the Disability Employment Services Deed 2010-2012 and any relevant guidelines or reference material issued by DEEWR under or in connection with Disability Employment Services Deed 2010-2012. The terms of the Disability Employment Services Deed 2010-2012 prevail if there is any inconsistency between those terms, and the contents of this document.

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Disability Employment Services Quality Framework

Document Change History

Version	Start Date	Effective Date	End Date	Change & Location
1.0		31 May 2010		Original version of document

Background

This Guide is designed to inform Disability Employment Services (DES) providers about the DES quality framework. Clause 133.2 of the *Disability Employment Services Deed 2010 – 2012* (Deed) sets out the Key Performance Indicators for the program:

- KPI 1 Efficiency
- KPI 2 Effectiveness
- KPI 3 Quality

Performance against KPI1 and KPI2 will be measured through star ratings. The DES quality framework will be the basis for the department's assessment of KPI 3.

Performance against KPI 3 may be considered in any future procurement processes or Deed extensions.

Quality Assurance System

In 2002 the *Disabilities Services Act 1986* was amended to introduce new quality assurance requirements for all Australian Government-funded disability employment services. Service providers are required to be certified against 12 *Disability Services Standards* (DSS). The standards focus on organisational values and principles, service outcomes, service delivery, service management, and staff recruitment and training.

Providers must maintain certification against the DSS to continue their appointment as a provider. New providers that do not hold certification against the DSS must obtain certification within 12 months of the Deed commencement date and must comply with the DSS while awaiting certification.

Compliance with the DSS will be the primary method of assessment of quality for DES providers. By incorporating the existing legislated quality certification regime, the DES quality framework aims to avoid duplication and minimise red tape. It also takes full account of the existing National Quality Strategy for disability employment and rehabilitation services.

The DES Quality Framework

The DES quality framework is designed to enable the department to assess a providers' performance against KPI 3 in a fair and objective manner.

The DES quality framework is based on four quality measures that broadly align with the Job Services Australia quality framework:

1. Provider Capability: assessment of organisational health;
2. Service Delivery: ensuring that participants are receiving services being funded, through assessment of provider compliance with the Deed;
3. Engagement: ensuring that services are tailored to the participant; and
4. Client Experience: assessment of services provided to participants and linkages with employers and other stakeholders (e.g. community groups).

The department has identified and mapped common elements of the DSS to the four quality measures above and has incorporated compliance with the DSS into the assessment of the individual measures where appropriate. Certification against the DSS will be the primary method for assessing a provider against the quality measures 1, 3 and 4.

Service delivery is included under the DES quality framework as measure 2. This emphasises the requirement on providers to act with due care and diligence, to ensure that participants receive the services for which the provider is receiving payment. The department will assess this component through evidence of compliance with the Deed. Non-compliance (should any exist) will be detected through the normal program assurance, contract monitoring /management mechanisms. This will include monitoring the validity of claims and the provision of particular key services under the Deed.

In addition, issues identified in feedback from participants and employers through sources such as the Post Program Monitoring (PPM) survey and the DEEWR and Complaints Resolution Referral Service (CRRS) complaint management systems may also be taken into account when measuring provider performance against measures 1, 3 and 4.

Method for Assessing Quality in DES

Whilst certification against the DSS will be the primary method for assessing a provider against the quality measures 1, 3 and 4, any issues relating to these three measures that are identified by the department through its normal program assurance and contract management activity may be investigated further and may be taken into consideration in a provider's assessment against KPI 3.

For example, if a Contract Manager observes through routine desk top monitoring that the EPPs for a particular provider's participants are very similar and do not refer to an individual's circumstances and obligations then this will be taken into consideration by DEEWR when assessing a provider against KPI 3, even though Individualised EPP are an element of measure 3 – Engagement, which is assessed through conformity with the DSS.

Where an issue identified by DEEWR suggests a systemic problem that might indicate nonconformity with the DSS, the department can request the matter be considered as part of future certification or surveillance audits. Similarly, if the CRRS considers a complaint highlights a serious issue related the standards, this can be conveyed through FaHCSIA to the relevant quality certification body for consideration.

The quality framework will be closely aligned with the contract monitoring processes to ensure consistency in contract and quality management. The quality framework will not duplicate the contract monitoring or program assurance processes, but rather compliment them by measuring the quality of services through the normal contract monitoring and program assurance activities.

Conduct and Timing of Assessments

At the end of each Performance Period, in addition to a star rating, each provider will receive an assessment against KPI 3.

Three-yearly certification audits and annual surveillance audits against the DSS will occur as determined between the provider and their Certification Body. Other elements of the quality framework will be assessed by departmental staff through DEEWR's normal contract monitoring and program assurance activity.

Performance Management

Where any issues with the quality of a provider's service are identified, DEEWR undertakes to provide advice to providers as soon as possible and, where appropriate, give the provider reasonable time to respond to and address the issue, before taking further action in accordance with the provisions of the Deed.

Quality Measures

The following schematic provides a high level illustration of the four quality measures:



Measure 1. Provider Capability

Sub-measure 1.1 Organisational Health

Measurement

Conformity with the DSS

Certification against the DSS requires evidence to demonstrate corporate governance, business planning, management practices, continuous improvement, records management, risk management plans (including financial), staff recruitment, employment and training. The following standards address issues relating to organisation health:

Standard 4: Privacy, dignity and confidentiality

- KPI 4.1 The service provider complies with the Information Privacy Principles of the *Privacy Act 1988* in order to protect and respect the rights of individual service recipients. The service provider does not disclose personal information about service recipients without their informed consent.

Standard 8: Service management

- KPI 8.1 The service provider has management systems in place that facilitate quality management practices and continuous improvement.

Standard 11: Staff recruitment, employment and training

- KPI 11.1 The service provider identifies the skills and competencies of each staff member.
- KPI 11.2 The service provider ensures that its staff have relevant skills and competencies.
- KPI 11.3 The service provider ensures the provision of appropriate training and skills development for each staff member.

Measure 2. Service Delivery

Sub-measure 2.1 Quality of Service Delivery

Measurement

Program assurance and contract monitoring activities

The department will assess this component through evidence of compliance with the Deed. Non-compliance (should any exist), will be detected through the normal program assurance, contract monitoring /management mechanisms including the analysis of claims data on DEEWR's IT System.

Compliance with the following clauses will be monitored by Contract Managers as part of this measure:

- Prevention, detection, reporting and handling of fraud as well as review of the fraud control plan (Clause 26.2)
- Reporting changes in control to the department (Clause 49.6)
- Development and implementation of an Indigenous Employment Strategy (Clause 61.1) and a Disability Employment Strategy (Clause 60.1)
- Ensuring that criminal records checks are carried out in accordance with the provisions of the Deed (Clause 14)
- Annual financial assessment undertaken by the department (Clause 28.1).
- Deed requirements on records management, documentary evidence and access and security of data in DEEWR IT systems.

Compliance with the following Deed clauses will be monitored by Contract Managers through desktop monitoring:

- Minimum number of contacts (clause 89.1)
- Prepare and approve an Employment Pathway Plan (EPP) during the initial interview (clause 88.1)
- Timely servicing of participants e.g. time taken to commence a participant (clause 133.3(g))

Frequency of Assessment

This measure will be assessed on an ongoing basis. It will be included in formal six monthly performance discussions with Account Managers.

Measure 3. Engagement

Sub-measure 3.1 Individualised Employment Pathway Plans

Measurement

Conformity with the DSS

In order to meet the DSS an organisation must provide evidence to show the development of Individualised Employment Pathway Plans (the DSS Evidence Guidelines make reference to Intervention Plans, this will be updated to reflect the new EPP). The DSS covers the various elements of individualised EPPs in the following standards:

Standard 2: Individual needs

- KPI 2.1 Each individual's employment goals are established objectively to reflect his or her needs and personal goals.
- KPI 2.2 Each individual's employment goals are used as a basis for service provision, with the service provider undertaking a process of planning, implementation, review and adjustment to facilitate the achievement of these goals.
- KPI 2.3 Services are delivered to meet each individual's employment goals through pathways and plans that do not have unnecessary restrictions or constraints.

Standard 5: Participation and integration

- KPI 5.1 The service contributes to individual outcomes for service recipients that progressively builds opportunities for their participation and involvement in the community through employment.

The DSS Evidence Guidelines provide extensive examples of how pathway plans can be shown to be individualised, including:

- Plans reflect employment and career goals and include strategies for addressing the barriers to the achievement of these goals
- Plans have records of goal reviews
- Consumers' linguistic, religious and cultural needs are identified and integrated into plans
- Plans are sufficiently different to provide confidence that they have been tailored to each individual's employment goals
- Plans include strategies for addressing barriers that limit jobseeker's employment opportunities (e.g. self-confidence; communication skills, employment skills)
- Plans recognise and address systemic disadvantages that might be experienced by jobseekers/workers due to their cultural and linguistic backgrounds

Sub-measure 3.2 Active Engagement of Participants

Measurement

Conformity with the DSS

Certification against the DSS requires evidence that activities to engage participants take place and that the Intervention Plan (to be updated to EPP) is reviewed. Standards covering these issues are:

Standard 2: Individual needs

- KPI 2.1 Each individual's employment goals are established objectively to reflect his or her needs and personal goals.
- KPI 2.2 Each individual's employment goals are used as a basis for service provision, with the service provider undertaking a process of planning, implementation, review and adjustment to facilitate the achievement of these goals.

Standard 5: Participation and integration

- KPI 5.1 The service contributes to individual outcomes for service recipients that progressively builds opportunities for their participation and involvement in the community through employment.

Standard 10: Service recipient training and support

- KPI 10.1 The service provider provides or facilitates access to relevant training and support programs that are consistent with the employment goals and opportunities of each service recipient.

Measure 4. Client Experience

Sub-measure 4.1 Participant Experience

Measurement

Conformity with the DSS

Participant perceptions and feedback are an important element of the DSS audit. Nearly all the standards have a participant perception element measured through participant feedback on various aspects of the provider's operations. Service users are sampled as part of every certification and surveillance audit.

Post Program Monitoring Survey

The department will also use its existing Post Program Monitoring (PPM) survey to gain input relating to participant experience. The aim of the PPM survey is to collect information about the labour market and education status of job seekers who have participated in the DES program. In addition, information is collected on participants' experience, satisfaction and perception of value of the assistance they received as well as what services were provided. The PPM Survey is conducted on an ongoing basis with a new sample drawn each two weeks. Any issues identified through the survey on an exception basis may be taken into consideration in assessing this sub-measure.

Sub-measure 4.2 Stakeholder Engagement

Measurement

Conformity with the DSS

Certification against the DSS requires an organisation to demonstrate their engagement with relevant stakeholders to assist service recipients into employment. Standards addressing these include:

Standard 5: Participation and integration

- KPI 5.1 The service contributes to individual outcomes for service recipients that progressively builds opportunities for their participation and involvement in the community through employment.

Standard 6: Valued status

- KPI 6.2 The service promotes employment opportunities for service recipients to fulfil valued roles in the community.
- KPI 6.3 The service develops and maintains service recipients' skills relevant to their roles in the community.

Standard 10: Service recipient training and support

- KPI 10.1 The service provider provides or facilitates access to relevant training and support programs that are consistent with the employment goals and opportunities of each service recipient.

Sub-measure 4.3 Complaint Handling – Provider received complaints

This sub-measure focuses on the provider's customer feedback processes which are a requirement under Clause 30, 31 and 32 of the Deed.

Measurement

Conformity with the DSS

The DSS require organisations to have evidence of a complaints handling policy as well as established procedures and complaint resolution processes. This is covered in the following standard:

Standard 7: Complaints and disputes

- KPI 7.1 The service provider encourages the raising of complaints by service recipients regarding any areas of dissatisfaction with the service provider and the service.
- KPI 7.2 Service recipients have no fear of retribution in raising complaints.
- KPI 7.3 The service provider facilitates the resolution of complaints or disputes by service recipients regarding the service provider and the service.

These KPIs have extensive evidentiary requirements for complaints handling and dispute resolution such as records of complaints raised and actions taken.

Sub-measure 4.4 Complaint Handling – Departmental received complaints

This sub-measure focuses on a provider's handling of complaints received via the DEEWR Customer Service Line or the CRRS as required under clause 30 and 136 of the Deed.

Measurement

DEEWR's complaint management system

The department's complaints management system collects data on complaints that are received through the department's Customer Service Line. Complaints received by the department about disability employment services are directed to the CRRS in the first instance.

Complaints Resolution Referral Service (CRRS)

A national complaints handling and referral service is part of the National Quality Strategy for disability employment and rehabilitation services. Participants who are not satisfied with their service provider's internal complaints and disputes mechanisms can contact the CRRS. The CRRS is an independent organisation that works to resolve and investigate complaints about services funded under the *Disability Services Act 1986*. The CRRS operates through a free call hotline.

On an exception basis, issues identified through either the CRRS or the DEEWR Customer Service Line as being unresolved or having a serious or ongoing impact on the delivery of DES services may be taken into account when assessing this sub-measure. An example would be where a provider fails to cooperate with CRRS to resolve complaints. In such cases the department will contact the provider to request the matter be addressed. If not addressed appropriately within the specified timeframes, action may be taken under the default provisions of the Deed.

Information Source for Assessment

The table below summarises the information source for the assessment of each measure.

Measure	Sub-Measure	Information Source
1. Provider Capability	1.1 Organisational Health	<ul style="list-style-type: none">• Conformity with the DSS*
2. Service Delivery	2.1 Quality of Service Delivery	<ul style="list-style-type: none">• Program assurance and contract monitoring activities
3. Engagement	3.1 Individualised Employment Pathway Plans	<ul style="list-style-type: none">• Conformity with the DSS*
	3.2 Active Engagement of Participants	<ul style="list-style-type: none">• Conformity with the DSS*
4. Client Experience	4.1 Participant Experience	<ul style="list-style-type: none">• Conformity with the DSS *• Post Program Monitoring survey - exception basis
	4.2 Stakeholder Engagement	<ul style="list-style-type: none">• Conformity with the DSS*
	4.3 Complaint Handling – Provider received complaints	<ul style="list-style-type: none">• Conformity with the DSS*
	4.4 Complaint Handling – Departmental received complaints	<ul style="list-style-type: none">• DEEWR's complaint management system• Complaints Resolution Referral Service (CRRS) - exception basis

* Note that where relevant information becomes available through routine program assurance and contract monitoring activities this may also be taken into consideration in the assessment of this measure.

Future development of the Quality Framework

The department is committed to monitoring and reviewing the quality framework to ensure that it is achieving its aim of delivering high quality disability employment services and to minimise any perceived duplication between the independent quality audits and DEEWR monitoring of Deed compliance.

In addition, elements of the National Quality Strategy for disability employment and rehabilitation services will be reviewed during the life of the Deed. This document will be updated to reflect any changes to the Strategy impacting on the DES quality framework.