



ROADMAP FOR ALCOHOL & OTHER DRUGS SERVICES IN WESTERN AUSTRALIA:

*To Move from the WA Alcohol and Other Drugs Quality Framework
to Quality Improvement Council Accreditation & Standards Program*



Australian Government

Department of Health and Ageing



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SECTION ONE: OVERVIEW

Background

These guidelines are part of a longer journey to embrace quality improvement in the NGO Drug and Alcohol sector in WA that began in 2002. The Western Australian (WA) Alcohol and Other Drugs (AOD) Sector Quality Framework (QF) was developed to support continuous quality improvement (CQI) of services at the individual agency level and across the sector as a whole. It was based on principles of collaboration, systems thinking, transparency and voluntary involvement. The auspicing agency for the QF was the peak body for the sector, the Western Australia Network of Alcohol and Other Drug Agencies (WANADA) which was funded to undertake this work by the Drug and Alcohol Office, Department of Health WA. The framework focuses strongly on the quality of services and their relationship with the client, their family and their carers to ensure positive outcomes for consumers. The developmental approach taken to the implementation of this framework has seen all services take on some aspect of the framework commensurate with their resources and capacity. The QF has been embraced by the sector and is an incremental and developmental program, where services undertake self assessment and then peer review against the WA AOD QF.

The Roadmap project has been initiated by WANADA at this point in time in response to an expectation from the Office for Aboriginal and Torres Strait Islander Health (OATSIH) that all OATSIH funded Drug and Alcohol services are to be accredited by 2011. These services have already begun their quality journey using the sector driven Quality Framework.

At the time of commencement of this project eight drug and alcohol services were affected by this requirement. However, it was recognised that other non OATSIH funded drug and alcohol services in WA may also want to make the transition from the Quality Framework to the more formal process of Quality Improvement Council (QIC) Standards and Accreditation Program. This roadmap would allow them to build on the work done for the Quality Framework and provide a guided transition to formal national accreditation, with its associated benefits and recognition.

This Roadmap will need to be read in conjunction with the WA AOD Sector Quality Framework and the QIC Standards and Evidence Guides. It is not a stand alone document. For Drug and Alcohol services that have not used the Quality Framework previously, it is advisable to go directly to the QIC standards; the WA AOD Sector Quality Framework is not a prerequisite for QIC. Agencies that do not wish to progress to accreditation, and have no funder requirement to do so, may continue with their quality journey using the WA AOD Sector Quality Framework. This roadmap is only designed to help agencies transition from the WA AOD Quality Framework to QIC Accreditation.

Introduction

This roadmap is a guide for those agencies that have to navigate between the WA AOD Sector Quality Framework and QIC Standards and Accreditation Program. It will explore the structural differences, comparing different structures in both systems, similarities and differences in expectations in terms of processes and finally a more detailed comparison of standards.

Project Overview

Goal:

- The production of a document that assists agencies to navigate from the WA AOD Sector QF to QIC Accreditation. The document would be made available through the public domain on both WANADA, DAO, OATSIH and QMS websites to ensure maximum accessibility to the relevant target groups.

Target Group:

- Primary target group is the OATSIH funded AOD agencies in WA
- The Roadmap will also assist Quality Facilitators working with AOD agencies in their journey to accreditation
- A secondary target group is other OATSIH funded or AOD organisations.

A Shared Journey

The AOD QF has introduced clear Performance Expectations for the AOD services in WA with a view to strengthening client services and supporting best practice. This framework is unique to WA and demonstrates the AOD sector's existing commitment to quality improvement and best practice. The QF appears to have used QIC and other frameworks in its development so there are already existing synergies between the two programs. These will be highlighted throughout this document.

QIC also evolved from a sector development program for Community Health services, originally developed by the peak body the Australian Community Health Association. These standards were referred to as the Community Health Accreditation and Standards Program (CHASP). QIC was then designed as an accreditation program aimed at building a culture of continuous quality improvement, with a view to strengthening both organisational systems and processes. This would ensure strong, stable and sustainable organisations that provide quality, client focused services and programs, based on best practice.

The values that underpin both programs are similar with a commitment to:

- Client centred services
- Holistic care, inclusive of carers, families and communities
- Best Practice
- Cultural sensitivity and awareness (Cultural Safety)
- Access and equity
- Non prescriptive guidelines
- Developmental rather than punitive approach
- Consumer rights and responsibilities
- Accountability to consumers, volunteers, staff, community, stakeholders and funders
- Continuity of care
- Sustainable organisations
- Multidisciplinary teamwork

Both programs share the same **principles** of operation including collaboration, systems thinking, transparency and voluntary participation.

Both programs have a **common purpose** which is to assist programs and services development, to better meet the needs of consumers and improve outcomes.

The desired **outcomes** are also shared. These include:

- Increasing the effectiveness of service interventions
- Developing consumer focused responsive services
- Contributing to the use of best practice approaches to service delivery
- Improving consumer and staff safety
- Improving accountability to the community , consumers and funders
- Encouraging collaboration and partnership to better meet community and consumer needs
- Approaching change in a positive and managed way
- Improving workforce satisfaction and sustainability

As a further demonstration of compatibility and commonality in 2008 QIC endorsed the WA AOD Quality Framework for use in conjunction with the QIC Core Standards. This recognises that the Quality Framework has sector support and is acknowledged by funders and the AOD sector as accepted good practice in relation to AOD Service Delivery in WA. QIC does have an existing set of standards for the Alcohol Tobacco and Other Drugs sector, however where Peak bodies and funders have subsequently developed and required agencies to use alternative standards, QIC looks to minimize duplication for the agency concerned and reflect the local context in which agencies are operating. Where QIC endorses a set of sector standards they can then be used to replace the QIC service delivery module that would otherwise be used to measure and assess service quality. In mapping the standards to QIC, all of Performance Expectation 3, Evidence Based Practice, fully replaces the QIC Service Delivery module. This will be further highlighted in the mapping below.

SECTION TWO: SIMILARITIES AND DIFFERENCES BETWEEN QIC AND AOD QF

Table 1: Content and Structure

The following table simply compares the broad content and structure of the documented resources for the two Quality systems demonstrating some similarities and some differences.

| Table 1: Comparing the Content & Structure of the QIC Standards & AOD Quality Framework | | |
|--|--|--|
| QIC Standards | WA AOD Sector QF | Comment |
| <p>Folder Content:</p> <p>QIC has two folders:</p> <p>QIC Standards:</p> <ol style="list-style-type: none"> 1. Overview 2. Standards 3. Explanatory Notes 4. Glossary <p>QIC Quality Journal (QJ):</p> <ol style="list-style-type: none"> 1. Introduction 2. QJ Proforma (& CD) 3. Evidence Guide 4. Review Resources | <p>Folder content:</p> <ol style="list-style-type: none"> 1. Performance Expectations 2. Self Assessment 3. Guidelines & Support 4. Policies and Procedures | <p>QF sections relate to the manual structure - the PE's are outlined, followed by a section on guidelines and support for meeting the PE's and the Self Assessment Tool in electronic format, as well as sample policies and procedures in the last section.</p> <p>QIC has a two folder system, one The QIC Standards, providing the background, purpose, standards, summary and glossary.</p> <p>The second folder is the Quality Journal containing the Evidence Guide and includes an electronic copy of the Quality Journal on CD. This is the self assessment tool for QIC.</p> |

Table 1: Comparing the Content & Structure of the QIC Standards & AOD Quality Framework

| QIC Standards | WA AOD Sector QF | Comment |
|---|--|---|
| <p>Sections of Standards</p> <p>Core Section:</p> <p>1. Building Quality Organisations (7 standards)</p> <p>2. Providing Quality Services and Programs (6 standards)</p> <p>3. Sustaining Quality External Relationships (4 standards)</p> <p>Service Delivery Modules:</p> <p>QIC has two options for NGO AOD Agencies in WA:</p> <p>QIC Alcohol, Tobacco & Other Drugs Module (8 standards)</p> <p>QIC Endorsed AOD QF PE 3 is used as service delivery module (8 PE's)</p> | <p>Broad Performance Expectations</p> <p>1. Rights and Responsibilities (2 expectations)</p> <p>2. Consumer Focused Practice (5 expectations)</p> <p>3. Evidence Based Practice (8 expectations)</p> <p>4. Staffing, Development & Support (5 expectations)</p> <p>5. Organisational Governance and Management (8 expectations)</p> | <p>QF has 5 broad Performance Expectations, which are further unpacked by specific performance expectations under each broad heading.</p> <p>QF has a focus on quality services, and less emphasis on corporate systems (ie Performance Expectation 5, covers 7 Core QIC Standards)</p> <p>QIC has three sections in the Core that provide the broad framework for the 17 Core Standards that apply to any organisation regardless of service type.</p> <p>Additionally there is a Service Delivery Module that focuses specifically on the Service Type, in this case AOD. QIC has an ATOD module but has also endorsed the WA AOD Sector Quality Framework for use in conjunction with the QIC Core. This means that in addition to the QIC Core Standards the agency uses PE 3 as their service delivery module, which is then used to verify adherence to good practices in relation to service delivery.</p> |

Table 1: Comparing the Content & Structure of the QIC Standards & AOD Quality Framework

| QIC Standards | WA AOD Sector QF | Comment |
|---|---|--|
| <p>Core Standards (17) & Service Standards either Alcohol Tobacco & Other Drugs Module (ATOD) (8) or PE3 as a service module, which has been QIC Endorsed (8)</p> | <p><i>Specific Performance Expectation</i> (2-8 per Broad PE)</p> | <p>QIC Standards and the Specific PE’s structurally equate to one another, though their scope differs greatly. QIC Standards are broader, requiring systems in place for each standard; Specific PE’s refer to components of a system.</p> <p>QIC also has a requirement for a Service Delivery Module (which contains a number of standards) to assess and guide the specific service type (in this case Alcohol and other Drugs) This is complementary to the Core Section Two. There are two options for AOD services in WA, the ATOD Module and the QIC Endorsed Broad Performance Expectation, in this case PE 3. For the purpose of this project we will focus on PE3 as the complimentary set of service standards to minimize the work load for services already engaged in the QF.</p> |
| <p>Evidence Questions (4-8 per standard)</p> <p>Evidence Guide</p> <p>Pocket Guide to completing the Quality Journal</p> | <p>Guidelines and Support to meet Performance Expectations</p> | <p>In the QF the Guidelines and Support use a PDCA framework to give examples of how the agency might meet the performance expectations. It is not a traditional use of PDCA. It uses the PDCA framework as a way to reflect on the whole PE, in an equivalent way to a systems approach; in addition to using PDCA as a tool to guide individual acts of continuous improvement.</p> <p>QIC Evidence Questions are designed to help the service unpack what they need to have in place to demonstrate the standard is being met.</p> <p>Both these processes help to unpack what the Standard or Performance Expectation is looking for from the agency.</p> <p>In addition QIC has a separate folder which provides guidance on self</p> |

Table 1: Comparing the Content & Structure of the QIC Standards & AOD Quality Framework

| QIC Standards | WA AOD Sector QF | Comment |
|--|--|---|
| | | <p>assessing using a systems approach. There are evidence guides for each of the core standards that provide a generic example of how you might complete the self assessment.</p> |
| <p>The Quality Journal</p> | <p>The Self Assessment – Annual Snapshot and Record of Continuous Quality Improvement</p> | <p>Both programs have an electronic self assessment tool that is enclosed in the folders.</p> <p>The Quality Journal is completed by the agency either as a word document or through a web based online system.</p> <p>The Snap Shot is completed as a way of identifying areas for improvement and is often done with the support of a Project Officer from WANADA who is able to provide up to 20 hours support for agencies.</p> |
| <p>PDCA is a framework that services are encouraged to use to demonstrate they are engaged in continuous quality improvement against each standard. This is a requirement of accreditation.</p> | <p>A PDCA Template is also made available for use to record individual CQI projects to improve processes.</p> <p>PDCA is used as a framework to guide how performance expectations are implemented; this closely reflects a systems approach.</p> | <ol style="list-style-type: none"> 1. QF uses the PDCA framework to document an example of how to go about meeting the Performance Expectations in the Guidelines and Support Section. The prompts within this PDCA framework closely reflect elements of a systems approach. 2. QF also encourages Agencies to undertake CQI using the PDCA Template once they have self assessed and identified areas for improvement. This process is recorded internally and can provide evidence of engaging in CQI to improve aspects of the system. <p>There is considerable commonality with QIC in using both PDCA and a Systems Approach in the QF.</p> <p>In QIC PDCA is used as a framework for structuring and recording CQI initiatives in relation to aspects of each standard (see Point 2. above).</p> |

Table 1: Comparing the Content & Structure of the QIC Standards & AOD Quality Framework

| QIC Standards | WA AOD Sector QF | Comment |
|--|---|--|
| | | <p>A systems approach (reflected to some extent in the <i>Guidelines and Support</i> section of the QF under the PDCA banner) is required to achieve a met rating for each standard in QIC.</p> <p>QIC discusses PDCA and the systems approach as separate but necessary processes for all standards.</p> <p>NB. Both standards are encouraging the concepts of a systems approach and PDCA.</p> |
| <p>Systems Approach: explicitly underpins the expectations for meeting each QIC standard; it is reflected in the rating system and is the basis on which agencies self assess in the Quality Journal</p> | <p>Systems Approach: is acknowledged as being an underlying principle of the AOD QF. It is also apparent in both the guidelines and support examples and the self assessment document.</p> | <p>This commonality is particularly important as it makes the transition from the QF to QIC much easier, with the main task being to make the systems approach more explicitly understood for those making that transition. This needs to be written up as part of the QIC Quality Journal (Self assessment tool). A Pocket Guide to completing the Quality Journal is also available to provide further guidance on completing the Quality Journal using a Systems Approach.</p> |

Table 2: Process Comparison

This table explores the processes involved in the cycle of engagement from contracting, through self assessment to external assessment and feedback and ongoing action plans for Continuous Quality Improvement.

| Table 2: Comparing Processes of the QIC Program and AOD Quality Framework. | | |
|---|---|---|
| Processes | QIC Standards | AOD Quality Framework |
| Contracting and Engagement | <ol style="list-style-type: none"> 1. Individual agencies contract with QMS for the QIC Accreditation Program OR 2. Funders fund QMS directly for the accreditation cycle for a group of agencies/sector. <p>NB. Contracts must be for a three year term.</p> | WANADA have the funding and manage the contract for Peer Review of all 90 services engaged with the AOD QF. |

Table 2: Comparing Processes of the QIC Program and AOD Quality Framework.

| Processes | QIC Standards | AOD Quality Framework |
|--|---|---|
| <p>Self Assessment and Preparation Phase</p> | <p>Internal Review</p> <p>Stage One:</p> <ul style="list-style-type: none"> ▪ Select Review Contact ▪ Training (Manager/Review Contact) ▪ Planning Self Assessment approach ▪ Self Assessment (take one) in Quality Journal ▪ Gaps identified and action plan developed <p>Stage Two:</p> <ul style="list-style-type: none"> ▪ Action all Items critical to achieving accreditation ▪ Update Quality Journal ▪ Internal Auditing (Client and Program records, Site, Fire Safety, Consumer and community Participation, Clinical/Practice Governance) ▪ Evidence collected and collated ▪ Evidence that CQI is occurring in relation to each of the standards (requirement for Accreditation) | <p>Self Assessment - Annual Snapshot and Record of Continuous Quality Improvement</p> <p>Agency begins Self Assessment as the first part of their engagement with the QF.</p> <p>Onsite support is available to agencies via WANADA to assist directly with self assessment.</p> <p>The Self Assessment document has a number of sample tools for collected data/evidence to monitor practices and demonstrate policy is being put into practice.</p> <p>Self Assessment and Guidelines and Support Section both encourage systems approach in relation to PE's</p> <p>It also has a PDCA template to use for recording CQI processes in relation to priority improvements, identified as part of self assessment.</p> |
| <p>External Assessment:</p> | <p>External Review</p> | <p>Peer Reviews</p> |

Table 2: Comparing Processes of the QIC Program and AOD Quality Framework.

| Processes | QIC Standards | AOD Quality Framework |
|--|--|--|
| <ul style="list-style-type: none"> ▪ Team ▪ Interviews ▪ Documents ▪ Observation ▪ Analysis ▪ Report | <p>2-4 reviewers, one coordinator and community sector/ AOD Peer Reviewers.</p> <p>3-4 days on site</p> <p>Peer Reviewers (not all WA , could be from other states)</p> <p>External Review processes include interviews, observation, document analysis, feedback onsite and written report.</p> <p>Interviews include representative group of staff, consumers, stakeholders, volunteers, contractors, management, Board/Council members.</p> | <p>One Peer/ One Review Coordinator</p> <p>Length of Review 1- 2 days</p> <p>Peer Reviewers recruited by WANADA; all WA</p> <p>Similar processes to QIC but scope of PE under peer assessment is determined by participating agency.</p> |
| Feedback | Draft Report for comment within 8 weeks | Draft Report for comment |
| Action Plan | Complete action plan within 12 weeks of receiving report m must be signed off by QMS. | No clear process |
| Monitoring over three year cycle | 6 monthly Progress Reports to QMS | Internal monitoring and organizational reporting. Agency required to report six monthly to DAO and OATSIH on their progress in relation to the QF. |

SECTION THREE: DETAILED STANDARDS COMPARISON

Making Sense of the Standards Comparison Table

The QIC Standards are listed in the left hand column and all PE's that relate to that QIC standard are in the next column. The third column identifies additional content that will need to be considered to meet the QIC standard. QIC standards are listed as headings only and the AOD QF PE's are summarized, with only the key points that link to the QIC standard listed. Agencies will have to utilise the Roadmap in conjunction with the original QIC and AOD QF documents. The last column is an area for future development and expansion when time and resources allow, and can be used to highlight good practice in those areas and hints and tips that may be useful to organisations developing their systems.

Two main areas were focused on in analysing the QF and its equivalence to QIC. One was whether the **content** in the QF covered all aspects of the QIC standard and the second was if a **systems approach** could be demonstrated within the PE and/or the associated QF Support documents (Self Assessment and Guidelines and Support Document).

A Systems Approach

A Systems Approach is evident in Guidelines and Support section of the AOD QF. However these are voluntary guidelines and may or may not be used by agencies to meet the Performance Expectations. The QF Self Assessment also reflects some of the system criteria in the questions that it asks, however again this is also just a guide. Performance Expectations, in many instances, do not make explicit all content areas identified in the QIC Standard, and this combined with the voluntary nature of the Performance Expectations makes it difficult to confirm equivalence with the QIC Standard. The QF relies on agency's knowledge and/or reviewers' expertise to flesh out the system and consider what may be necessary to have in place. This makes consistency and equivalence of assessment difficult.

The following criteria each have to be in place to demonstrate a sustainable system under QIC:

Documented refers to the guiding documents (Policies and procedures, strategic, annual, operational/business plans, Service Agreements, Constitution, Operational Charts, Terms of Reference etc) that are used to inform management, staff, volunteers and governing body to ensure consistent and transparent system management. In relation to the QF this is partially addressed by the QF and its reference to policies and procedures but again because it often does not make explicit the specific system requirements, there are significant gaps.

Integration is demonstrating that policies and procedures are reflected in practice. Some tools/templates exist in the QF Self Assessment and questions asked will assist in providing evidence of this aspect of the systems approach.

Communicated refers to ensuring the people who need to know about the system (ie all staff, consumers, volunteers, stakeholders, referring agencies etc) do know and understand it. This is addressed in the Self Assessment questions in some instances.

Evaluated is where the system is monitored to see if it is achieving its goals and to look for opportunity for improvement. There are some evaluative processes referred to in the QF Self assessment; however QIC also has some System Audits that vary from compulsory to optional. The Client Records Audit (compulsory), The Program Records Audit (compulsory where relevant), The Consumer/Community Participation Audit (voluntary), the Clinical/Service Governance Audit (trial status), Fire Safety Audits (no prescribed tool provided) and the Site Inspection Audits are the main processes actively encouraged and in some cases compulsory, providing opportunities for QI in those systems. However in addition it is expected the agency will utilise their own tools to further undertake evaluation and monitoring of their systems, eg, Staff surveys, consumer satisfaction surveys, suggestions boxes, feedback forums, "Have your Say" brochures, stakeholder forums etc.

Delegation of responsibility for ensuring the system is implemented; although this is often built into the Guidelines and Support Section, it is not always consistent. If the Guidelines and Support section address responsibility and are followed as standard practice and reflected in evidence (job descriptions, policies, organisational charts, Terms of Reference) this will help to demonstrate a sustainable system. However, this area is frequently not addressed and as there are often multiple PE's to one QIC Standard, it is suggested that responsibility be considered against the total QIC standard, rather than each sub element, as represented by the specific PE's.

The acronym **DICED** is used to help people remember the five elements of a system:

Documented, **I**ntegrated, **C**ommunicated, **E**valuated, **D**elegated. See example against Core 1.2 in Standards Comparison Table.

Understanding both the focus on **Content and Systems**, prior to reading the table below will be helpful.

Table 3: Standards Comparison Table

This Table examines each QIC standard and identifies the AOD QF PE's that relate to the standard and in some instances reference is made to QF P&P templates, G&S and SA sections that may contribute to meeting the QIC standard. It goes on to identify where further action is required in terms of either content or a systems criteria and gives some practical hints and tips for what this might all look like in practice.

| Section One: Building Quality Organisations | | | |
|---|--|--|--|
| QIC Standard | WA AOD Sector QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
| 1.1 Leadership & Management | <p>PE 5.2 Roles of Responsibilities of Board and management documented and supported by P&P (reviewed)</p> <p>PE 5.7 Organisational Planning documented, implemented and reviewed; based on both demographic and service data and consultation with consumers, staff, stakeholders, funding bodies</p> <p>PE 2.1 Consumer Involvement at all levels of organisation</p> <p>Systems Approach</p> | <p>Content of QIC standard covered by QF: Partial 😊</p> <p>Systems criteria addressed by QF: Partial 😊</p> <p>Additional Areas of Content for QIC:</p> <p>Detail required:</p> <p>Policy and procedure framework.(this is built in all the way through the QF but not explicitly as a broad framework- so just check if you have all bases covered)</p> <p>Strategic (3-5year) and operational (annual) plans should be monitored and reported on to Board and management regularly. (This is broadly covered by PE 5.7 but reporting processes are not explicit)</p> <p>Participative structures should allow formal</p> | <p>P&P in all major areas covered by the QIC standards in section one, two and three ensures a comprehensive policy framework.</p> <p>Clinical Governance P&P ensures a high level focus on safety and quality of services.</p> <p>Policies and procedures tailored to your organisation and developed in consultation with those most affected by them are most likely to be used. (Templates are a great start but make them</p> |

Section One: Building Quality Organisations

| QIC Standard | WA AOD Sector QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
|--------------|--|--|--|
| | <p>reflected in Self assessment tool and Guidelines should be followed in full in the above areas to assure a systems approach is evident.</p> <p>3.5 Clinical Pathway planning</p> <p>Holistic therapeutic approach</p> | <p>and informal input into planning and decision making from staff, consumers and stakeholders. (This is broadly covered by PE 2.1)</p> <p>Possible Gap in content:</p> <p>Management systems should embed CQI, foster innovation and manage change across all levels of the organisation. NB. QF PDCA template in Self Assessment process supports this but it is compulsory in QIC.</p> <p>Systems Approach:</p> <p>It appears most of the content is covered and the systems approach is reflected in the Self Assessment Questions and Guidelines, if these are followed as expected rather than optional then equivalence can be assumed.</p> | <p>meaningful to you, don't just copy them)</p> <p>Policies don't need to be long but should be linked to procedures which are the "how to" part of policies.</p> <p>Policies should be reviewed regularly (1-3 years) with a system in place to monitor this. (QIC & QF)</p> <p>See QF P&P Templates for sample P&P including Clinical Governance Policy, and Record of PDCA template.</p> <p>Templates are also included in the QF Self Assessment tool and will be useful as evidence that P&P (what you say you do) matched practice</p> |

Section One: Building Quality Organisations

| QIC Standard | WA AOD Sector QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
|-----------------------------------|--|--|--|
| | | | <p>(what you actually do)</p> <p>QIC also has a number of audit tools, most relevant to this standard is the Clinical Governance Audit tool (trial status) and Consumer Participation Audit</p> <p>A quality committee &/or designated position and Action plan can be the guiding process for your Quality system.</p> |
| <p>1.2 Human Resources</p> | <p>PE 5.5 Human Resources HR P&P</p> <p>PE 5.2 Defined Roles and Responsibilities re governance and management and supported by P&Ps.</p> <p>PE 4.1 Staff Credentials</p> | <p>Content of QIC standard covered by QF: Partial 😊</p> <p>Systems criteria addressed by QF: Partial 😊</p> <p>Additional Areas of Content for QIC:</p> <p>Detail required:</p> <p>HR Policies/guiding documents should cover all aspects of the QIC standard. The areas to</p> | <p>HR P&P generally would include:</p> <ul style="list-style-type: none"> ▪ Recruitment, selection, appointment and exiting, verification, registration, license etc and police check as required ▪ Staff and volunteers |

Section One: Building Quality Organisations

| QIC Standard | WA AOD Sector QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
|--------------|---|--|--|
| | <p>Staff have AOD knowledge, generic counselling skills, &/or cross cultural training, and use of empowerment framework</p> <p>PE 4.2 Personnel and Team Development</p> <p>P&P (reviewed regularly)</p> <p>PE 4.3 Management Development and Support</p> <p>Supports professional development of managers</p> <p>PE 4.4 OS&H</p> <p>OSH P&P (reviewed)</p> <p>PE 4.5 Equal Opportunity</p> <p>EO P&P</p> | <p>be covered by P&P are not spelt out in QF.</p> <p>Job descriptions should include qualifications, reporting lines and selection criteria (implicit in QF with reference in the Self Assessment)</p> <p>Gaps in content:</p> <p>HR records should be maintained and managed confidentially</p> <p>Workforce Planning should occur in line with organisational planning.</p> <p>CQI system around HR should include monitoring Staff satisfaction eg. Surveys,</p> <p>Systems Approach:</p> <p>Systems approach is evident in Guidelines document and partly in the Self Assessment; the PE does not make explicit all areas identified in the QIC Standard on HR.</p> <p>The following is an example of the questions to ask yourself when using a QIC systems approach:</p> <p>Documented - QF PE 5.5 requires HR P&P's</p> | <p>are recruited in line with the skills relevant to the work/service they are providing</p> <ul style="list-style-type: none"> ▪ Employment processes should ensure information on remuneration, employment conditions, industrial relations and payroll ▪ Orientation/Induction P&P ▪ Orientation kit should include key organisational documents, program of orientation to follow, key personnel & stakeholders meetings, checklists, policy manual review, safety and security |

Section One: Building Quality Organisations

| QIC Standard | WA AOD Sector QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
|--------------|-----------------------------|--|--|
| | | <p>but it is not explicit about areas requiring documentation in the HR System. The P7P Template adds further detail (see also Tips, Good Practice and Practical Hints)</p> <p>Integration - some tools/templates exist in the Self Assessment and questions are asked which will provide evidence of this.</p> <p>Communicated - this is addressed in the Self Assessment questions for PE 5.5, but needs to go across all PE's relevant to this QIC Standard.</p> <p>Evaluated-there are some evaluative processes referred to in the Self assessment but a staff satisfaction survey would provide an opportunity to demonstrate overall system QI.</p> <p>Delegation - responsibility for various aspects of the HR System is addressed in the Guidelines Section, but as there are small gaps in content it is not clear in all instances where responsibility lies, this would need to be confirmed through examination of evidence (eg. job descriptions, policies, organisational charts, Terms of Reference).</p> | <p>procedures and associated sign off etc</p> <ul style="list-style-type: none"> ▪ Supervision P&P ▪ Performance review and development P&P ▪ Training and development P&P/Training Program for staff and volunteers ▪ Mandatory training system ▪ Disciplinary and grievance P&P ▪ Organisational chart showing accountabilities ▪ Employee Assistance program Manual/policy ▪ OSH P&P ▪ Equal Opportunity P&P <p>HR Policies should</p> |

Section One: Building Quality Organisations

| QIC Standard | WA AOD Sector QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
|-------------------------------------|--|---|--|
| | | | <p>reference Volunteers and students where relevant (separate Volunteer policies/manual may be necessary)</p> <p>CQI Activities could include: staff surveys, feedback, climate survey, supervision, performance reviews if used to improve HR practices and system.</p> |
| <p>1.3 Physical Resource</p> | <p>PE 4.4 OS&H compliance QF Policy and Procedure Template on OSH</p> <p>Guidelines and Support PE 5.3 includes as examples of P&Ps for Financial Management an Asset Register .</p> | <p>Content of QIC standard covered by QF: Partial 😊</p> <p>Systems criteria addressed by QF: Partial 😊</p> <p>Additional Areas of Content for QIC:</p> <p>Gaps in Content:</p> <ul style="list-style-type: none"> Facilities and equipment planned and | <p>Asset register kept, could combine with a maintenance schedule for equipment that requires maintenance.</p> <p>Person responsible for Asset register should not be person who requests</p> |

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| QIC Standard | WA AOD Sector QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
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| | | <p>reviewed and adequate to meet goals</p> <ul style="list-style-type: none"> • Assets monitored • Disposal Records kept • System to maintain facilities and equipment • Purchasing and procurement practices documented • Worksite inspections undertaken (referred to in QF Policy and Procedure Template for OSH see page 68 but may not be picked up) • A QIC Site inspection audit is also a requirement for all physical sites, this goes beyond OSH work site inspections and an audit tool is provided by QIC for this purpose. • Action Plans developed and monitored through to close out of actions (see OSH) • Hazard and near miss reporting (referred to in QF OSH Policy and Procedure Template page 67 and 68 but may not be | <p>purchases to ensure transparency and accountability</p> <p>Insurance coverage including workers compensation, public liability and property should be up to date.</p> <p>Replacement Schedule is in place for vehicles and other significant equipment. This is reflected in financial planning.</p> <p>Purchasing policy should reflect environmental considerations.</p> <p>Emergency procedures, including fire and evacuation, are documented and clearly visible to all concerned and staff have training in</p> |

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| | | <p>picked up, also raised in Self Assessment questions for 5.4 Risk Management)</p> <ul style="list-style-type: none"> • Security of facilities actively managed • Environmentally friendly practices across organisation (this is not just about OHS) <p>Systems Approach:</p> <p>Once again the systems approach is evident in the Self Assessment and Guidelines Section but the PE does not explicitly cover all content of this QIC standard, so a comprehensive system can not be confirmed. Use system questions in relation to the standard to determine if you fully comply.</p> | <p>emergency procedures.</p> <p>OSH worksite inspections occur regularly and Action Plan is followed through</p> |
| <p>1.4 Financial Management</p> | <p>PE 5.3 Financial Management</p> <p>P&P cover delegations and responsibilities of Board and staff</p> <p>PE 5.1 Compliance with Constitution and Service Agreement</p> | <p>Content of QIC standard covered by QF: Partial 😊</p> <p>Systems criteria addressed by QF: Partial 😊</p> <p>Additional Areas of Content for QIC:</p> <p>Gaps in content:</p> <p>Financial accountability includes Recording and Reporting to and monitoring by Governing</p> | <p>Financial systems should include such things as:</p> <p>Cash flow management</p> <p>Planned and transparent budget and expenditure processes</p> <p>Payment systems</p> <p>Debtor management</p> |

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| | <p>PE 5.1 Self Assessment asks about External Financial Audit, SA 5.3 asks about forward planning strategies for financial management.</p> <p>Systems approach reflected in SA and Guidelines and Support (G&S) for PE 5.3.</p> | <p>body/funders (see Guidelines and Support Section for 5.3 and Self Assessment 5.1)*</p> <p>Awareness and use of Accounting standards* (refer Guidelines and Support for reference to meeting industry standards re financial policy and procedures)</p> <p>Audited financial statement/report and evidence of action where required (see Self Assessment 5.1) *</p> <p>Business/operation plans are linked to budget.</p> <p>Systems Approach:</p> <p>The QF does not explicitly cover all content of this QIC standard, so a comprehensive system can not be assumed.</p> <p>NB. *Many areas are covered in different parts of the QF (eg. Template P&P, Guidelines or SA).</p> | <p>Investment planning and management</p> <p>Asset register</p> <p>Governing Body usually has a Treasurer and may have a finance sub committee.</p> <p>Board monitors budget and CEO/Finance Officer reports monthly on Income and expenditure, against budget.</p> |
| <p>1.5 Knowledge Management</p> | <p>PE 5.6 Data Management:</p> <p>P&P to guide collection, integrity, transparent and open use.</p> | <p>Content of QIC standard covered by QF:</p> <p>Partial 😊</p> <p>Systems criteria addressed by QF:</p> <p>Partial 😊</p> | <p>P&P that guide the sharing of information gained from external training and conference attendance are good practice in this area</p> |

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| | <p>Self assessment applies Systems Approach to data management.</p> <p>Level of data being referred to is client usage data not broader analysis of sector, demographics, community of interest etc</p> | <p>Additional Areas of Content for QIC:</p> <p>Gaps in content:</p> <p>Knowledge Management in QIC includes:</p> <ul style="list-style-type: none"> ▪ Research data ▪ Data collection on usage(See G&S PE 5.6 Page 33) ▪ Sector trends ▪ Internal and External Communication ▪ Paper based Filing System: <ul style="list-style-type: none"> ○ Client Records ○ Program Records ○ HR Records ○ Contractor Records ○ Volunteer Records ○ Administrative Records ▪ Electronic Filing structure and system <p>(nb. QF P&P Privacy Template Page 14 addresses aspects of privacy for electronic and hard copy files)</p> | <p>A communication plan helps to ensure a systematic approach to internal and external communication etc</p> <p>Journals & association memberships assist in keeping up to date with research and sector developments.</p> <p>Some organisations have a network register, which is a record of who is representing the organisation on what network.</p> <p>QIC has a Client and Program record audit tool to guide good practice.</p> |

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| | | <ul style="list-style-type: none"> ▪ Privacy and confidentiality of all hard copy and electronic records (as above) ▪ Evidence based research ▪ System for Document Control ▪ IT Protocols and Infrastructure ▪ Management and funder reporting requirements defined <p>Systems Approach:</p> <p>The QF takes has a focus on data management rather than the broader concept of knowledge management and as such a comprehensive systems' approach for this QIC standard is not covered by the QF.</p> <p>NB. In addition, auditing requirements exist in QIC for both Client and Program Records.</p> | <p>An intranet system can help with document control, so only final and authorised documents are up loaded.</p> |
| <p>1.6 Risk Assessment and Management</p> | <p>PE 5.4 Risk assessment P&P for assessment and management of identified risk (reviewed)</p> <p>See also Template Organisational Risk</p> | <p>Content of QIC standard covered by QF: Partial 😊</p> <p>Systems criteria addressed by QF: Partial 😊</p> <p>Additional Areas of Content for QIC:</p> | <p>Many organisations treat risk as equating to OSH but an integrated risk management plan is much more and helps you to manage all the various</p> |

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| | <p>Management Policy.</p> <p>PE 4.4 OS&H</p> <p>OSH P&P (reviewed)</p> | <p>Gaps in content:</p> <p>Risk assessment and management plan needs to cover all dimensions of risks both corporate and clinical. (see QF policy templates on Organisational Risk Management page 82 and Clinical/Practice Governance on page 56)</p> <p>OSH system including safety procedures, infection control, Incident reporting system and worksite inspection and hazard reporting should be a part of a good risk management system. (see QF G&S PE 5.4 page 30 and P&P Template for OHS page 81)</p> <p>Risk should be considered when developing new services, programs and tendering for new contracts. (see also QF Org Risk Management P&P template page 83)</p> <p>Risk management overlaps with CORE Standard 1.7 on legislative compliance as legal compliance is a significant risk to be managed.</p> <p>Systems Approach:</p> | <p>elements of risk.</p> <p>Risks can include OSH, Clinical/Service, Financial, Reputation, Insurances, Contracts/Brokerage, Infection Control, Complaints and Feedback.</p> <p>OATSIH have a comprehensive Risk Assessment Form that may be usefully used to develop your Risk Management Plan.</p> <p>Clinical Risk can also be supported by a Clinical Governance Audit and Risk Register</p> <p>QIC has developed a Clinical Governance Audit tool to assist organisations manage safety and quality of services.</p> |

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| | | <p>The definition of the system requirements for risk in the QF covers many areas of the QIC standard but in different places and therefore close attention is required to ensure a comprehensive systems approach.</p> <p>The system for risk management should include monitoring by the Council / Board and management team and by service managers /senior practitioners.</p> | <p>Complaints Register and complaints management system should also be part of risk management.</p> <p>ISO have a specific standard for Risk Management that is a definitive reference.</p> |
| <p>1.7 Legal and Regulatory Compliance</p> | <p>PE 4.4 OHS compliance and P&P</p> <p>PE 4.5 EO legislation compliance and P&P</p> <p>Note: QF Policy Templates build in reference to relevant legislation. This is good practice and will encourage reference to relevant legislation across</p> | <p>Content of QIC standard covered by QF: Partial 😊</p> <p>Systems criteria addressed by QF: Partial 😊</p> <p>Additional Areas of Content for QIC:</p> <p>Gaps in content:</p> <p>An overall legislative framework or register is not explicitly required in the QF and each organisation will have slight variation of which legislation they must work within.</p> <p>Staff should have orientation to legislative</p> | <p>Membership of Peak or sector related bodies, professional associations that offer legislative updates to members.</p> <p>A register of legislation/acts is maintained (EEO, OSH, Privacy, State Records Act, Companies Act, Associations Act, Aged Care Act, etc.)</p> <p>Format of P&P's ensures</p> |

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| QIC Standard | WA AOD Sector QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
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| | <p>many areas not specified within PE's.</p> | <p>responsibility, electronic or hard copy access to relevant acts and legislation and mandatory training; Management should have a good understanding of legislative framework and responsibilities.</p> <p>Responsibility should be clearly delegated for meeting legislative and associated reporting requirements and this reflected in Job Descriptions. QF Policy Templates reinforce this by referencing relevant legislation. Compliance should be actively managed for all legislative responsibilities.</p> <p>Systems Approach: QF does not cover all content areas of the QIC standard and therefore further attention is required to ensure a comprehensive systems approach.</p> | <p>reference to legislation where relevant.</p> |

Section Two: Providing Quality Services and Programs

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
|---|--|--|---|
| <p>2.1 Identifying and meeting community Needs</p> | <p>PE 2.2 Consumer Need and Satisfaction Survey and Consultation To improve outcomes</p> <p>PE 5.7 Organisational Planning Process Feedback, projected needs, data, trends and service data</p> <p>Self assessment asks questions about data and trends used in planning</p> | <p>Content of QIC standard covered by QF: All ☺</p> <p>Systems criteria addressed by QF: Partial ☺</p> <p>Additional Areas of Content for QIC:</p> <p>Possible Gaps in content:</p> <p>This is mainly specifying what may be implicit in the QF but needs to be made explicit.</p> <p>Up to date data on community of interest</p> <p>Comparison of data on service usage with community of interest profile to identify barriers to access/planning priorities.</p> <p>Needs assessment process and outcomes documented and reflected in strategic or operational plans.</p> <p>Evidence that this analysis of data is used to improve/address services/access/unmet needs.</p> <p>Systems Approach:</p> | <p>Services should be based on clearly identified need.</p> <p>Monitor the profile and needs of the community in which you operate.</p> <p>Respond to changing community needs within service agreements or via negotiations which reflect this change.</p> <p>Working with other community partners to meet unmet needs.</p> |

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| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
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| | | <p>QF covers all content areas of the QIC standard and therefore the system requirements are largely covered.</p> <p>How responsibility is assigned for managing and overseeing this system is not clearly specified in QF documentation.</p> | |
| <p>2.2 Planning services and focusing on Positive Outcomes for clients</p> | <p>PE 3.1 Entry Criteria, staff expertise and services matching needs.</p> <p>PE 3.3 Assessment and service matching consumer focused, informed choice</p> <p>PE 3.4 Inter Agency Referral referral, shared care, case management, minimize duplication</p> <p>3.5 Clinical Pathway planning</p> | <p>Content of QIC standard covered by QF:</p> <p>All 😊</p> <p>Systems criteria addressed by QF:</p> <p>Partial 😊</p> <p>Note: Documenting and reviewing service/care plans and program plans and auditing of same is not explicitly addressed in the QF but it is assumed that this is intended as it is implied in the Clinical Pathways Planning. This is required in QIC and client records and program records are audited.</p> <p>Systems Approach:</p> <p>The System is assumed to be equivalent if the</p> | <p>Services are client focused and based on identified need.</p> <p>Agency collaborates with other agencies to meet range of consumer needs.</p> <p>Client care/service plans and program plans are documented and evaluated.</p> <p>Barriers to access are understood and addressed (cost, opening times, physical layout, transport</p> |

Section Two: Providing Quality Services and Programs

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
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| | <p>Holistic therapeutic approach</p> <p>PE 3.6 Service Approach</p> <p>Informed by evidence and practice wisdom</p> <p>PE 2.1 Consumer Involvement at all levels</p> <p>Including in service planning and delivery</p> <p>PE 2.2 Consumer Need and Satisfaction Survey and Consultation</p> <p>Assess consumer need and satisfaction through survey and consultation to improve outcomes</p> <p>PE 2.4 Non-discriminatory practice and Equitable Access</p> <p>Review access barriers</p> | <p>questions in the self assessment and the Guidelines for the associated PE's are followed. Nb. QIC client and where relevant, program record audits must be undertaken as part of system monitoring.</p> <p>Clinical/Practice Governance Audit is also a likely requirement for this section of standards. (currently in trial phase)</p> | <p>etc).</p> <p>Service priorities set with input from consumers and community.</p> <p>Services are responsive to diversity.</p> <p>Services are based on evidence and good practice.</p> <p>Consumer outcomes are measured and used to improve services.</p> |

Section Two: Providing Quality Services and Programs

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
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| | <p>Respect for diversity</p> <p>Coordination and collaboration to improve access</p> <p>PE 3.8 Outcome Review</p> <p>Measures changes in consumer functioning and informs service planning.</p> | | |
| <p>2.3 Ensuring Cultural Safety & Appropriateness</p> | <p>PE 2.3 Respectful and non judgmental work practices P&P.(See also G&S PE 2.3 Page 8)</p> <p>PE 2.4 Barriers to access addressed including ATSI, CALD, parents with school aged children, disabled and their families, young people, people with co-morbidities, different genders and sexual orientation. Includes staff training re diversity and</p> | <p>Content of QIC standard covered by QF:</p> <p>All 😊</p> <p>Systems criteria addressed by QF:</p> <p>All 😊</p> <p>Note: A Cultural Safety Audit Tool is under consideration at this point and may be available and/or a requirement in the future.</p> | <p>A Cultural Safety Audit would identify opportunities for improvement.</p> <p>ACHWA conduct Cultural Safety Training through affiliates in each state and Territory.</p> <p>Cultural safety addressed in care plans</p> <p>Consumer Profile is compared to community of interest.</p> <p>Respect and cultural</p> |

Section Two: Providing Quality Services and Programs

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
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| | <p>collaboration with key stakeholders in these areas.</p> <p>Self assessment has a systems approach to this area.</p> | | <p>safety are demonstrated in service plans.</p> <p>Agency maintains links with Indigenous and CALD groups.</p> <p>Staff and volunteers have access to professional development on diversity & cultural safety.</p> |
| <p>2.4 Confirming Consumer Rights</p> | <p>PE 1.1 & 1.2 Consumer Rights & Responsibilities</p> <p>Documented and consumers informed;</p> <p>G&S PE 1.2 Page 4 & P&P Templates Page 8-27 Including:</p> | <p>Content of QIC standard covered by QF: Partial 😊</p> <p>Systems criteria addressed by QF: Partial 😊</p> <p>Additional Areas of Content for QIC:</p> <p>Possible Gaps in content:</p> | <p>Consumers are informed of their rights and responsibilities in verbal and written forms and reminders are given at client reviews.</p> <p>Client should have a copy of/sign off their service</p> |

Section Two: Providing Quality Services and Programs

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
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| | <p>Consumer Rights & Responsibilities Statement</p> <p>Privacy & Confidentiality Policy</p> <p>Consumer Complaints Policy</p> <p>Complaints Record Form</p> <p>Advocacy Policy</p> <p>Advocacy Authority Form.</p> | <p>Consumer rights are referred to broadly in the QF PE 1.1 and 1.2 and areas of Privacy and Complaints are addressed in P&P Templates.</p> <p>Ensure Complaints management system is in place and linked to Board Reporting and QI System.</p> <p>Ensure Privacy legislation is understood and systems in place to comply and inform consumers.</p> <p>Systems Approach:</p> <p>QF does not explicitly cover all content areas in PE's but reference to P&P templates will ensure a comprehensive system is achieved.</p> | <p>plan or care plan.</p> <p>Client Records should record discussions & provision of client rights information to clients</p> <p>Client Record Audits occur at least every 6 months and include compliance with this provision.</p> <p>Complaints information to clients should outline processes for both formal and informal complaint and feedback to the agency.</p> |
| <p>2.5 Empowering Consumers</p> | <p>PE 2.1 Consumer participation structures and P&P (reviewed).</p> <p>PE 2.2 Assess consumer need and satisfaction through survey and consultation to improve outcomes.</p> | <p>Content of QIC standard covered by QF:</p> <p>All 😊</p> <p>Systems criteria addressed by QF:</p> <p>All 😊</p> <p>Systems Approach:</p> <p>Following Guidelines or Self Assessment</p> | <p>Consumer and/or advocate participate in developing service plan.</p> <p>Consumers are supported to access services.</p> |

Section Two: Providing Quality Services and Programs

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
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| | <p>PE 2.4 Barriers to access addressed including ATSI, CALD, parents with school aged children, disabled and their families, young people, people with co-morbidities, different genders and sexual orientation. Includes staff training re diversity and</p> <p>collaboration with key stakeholders in these areas.</p> | <p>expectations for the relevant PE should ensure QIC system requirements are addressed.</p> <p>Note: A Consumer and Community Participation Audit is a non compulsory tool provided as part of QIC to assist in providing evidence of strong consumer participation processes. Other processes may be used however.</p> | <p>Consumers participate in developing, reviewing and planning services.</p> <p>The agency's management monitors the impact of consumer involvement on quality of services.</p> |
| <p>2.6 Coordinating Services & Programs</p> | <p>PE 2.5 Client Number Management & Referral</p> <p>P&P address timely access, waiting times &/or referrals</p> <p>PE 3.4 Inter Agency Referral</p> <p>referral, shared care, case</p> | <p>Content of QIC standard covered by QF:</p> <p>All 😊</p> <p>Systems criteria addressed by QF:</p> <p>All 😊</p> <p>Note: Structures need to support internal coordination of services.</p> <p>Systems Approach:</p> | <p>Multidisciplinary Team work/Shared care practices are evident.</p> <p>Client Focused service planning</p> <p>Team meetings and staffing arrangements support staff to</p> |

Section 2 AOD Specific: AOD Quality Framework Performance Expectation 3.1 – 3.8 (Supplementary to Section 2)

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation <i>A systems approach has been applied to PE 3.1 – 3.8</i> | Tips, Good Practice & Practical Hints |
|-------------------------------------|---|--|---|
| <p>PE 3.1 Entry Criteria</p> | <p>3.1 Entry Criteria</p> <p>Clear entry Criteria</p> <p>Staff expertise</p> <p>Service matching needs</p> | <p>Note: All Content is complete for this section of standards as PE 3 represents the Endorsed Service Delivery Standards for NGO AOD agencies in WA.</p> <p>Systems criteria addressed:</p> <p>Documented:</p> <p>Where is the criteria documented? For consumers? For referrers? For staff? Is it reflected in broader policy and procedure?</p> <p>Integrated:</p> <p>How can you show that the entry criteria are applied consistently and appropriately?</p> <p>Communicated:</p> <p>How do consumers and staff know about the criteria for entry?</p> <p>Evaluated:</p> <p>How is the appropriateness and effectiveness of this criteria monitored?</p> <p>Delegated:</p> <p>Who ensures the entry criteria is clear and appropriate and applied?</p> | <p>Examples include:</p> <p>List of admission criteria</p> <p>Contractual obligations</p> <p>Expected withdrawal syndrome.</p> <p>Psychiatrically and physiologically stable and in the care of someone.</p> <p>Signage at front gate.</p> <p>QF Support Templates:</p> <p>Delivery of Service Policy.</p> <p>Consumer satisfaction assessment.</p> <p>Staff feedback.</p> <p>Stakeholder feedback</p> <p>Consumer engagement checklist</p> |
| <p>PE 3.2 Delivery of</p> | <p>3.2 Delivery of Service</p> | <p>Systems criteria addressed:</p> | <p>Examples include:</p> |

Section 2 AOD Specific: AOD Quality Framework Performance Expectation 3.1 – 3.8 (Supplementary to Section 2)

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation <i>A systems approach has been applied to PE 3.1 – 3.8</i> | Tips, Good Practice & Practical Hints |
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| Service | P&P's on Assessment, engagement, case management, clinical pathways planning, referral and access for diverse communities. | <p>Documented: PE 3.2 specifies requirement for documentation – so there is no gap here.</p> <p>Integrated: Are the documented policies and procedures reflected in practice?</p> <p>Communicated: How are assessment, engagement case management and clinical pathway planning and referral and access strategies communicated to those who need to know?</p> <p>Evaluated What monitoring and feedback mechanisms are in place for service delivery?</p> <p>Delegated: Are Service Delivery responsibilities clearly documented in job descriptions? Including Governance and management of service delivery function?</p> | <p>Service charter</p> <p>Section of Policy manual devoted to Service Delivery</p> <p>Case conferences/ allocation meetings</p> <p>Assessment procedures</p> <p>Case management procedures</p> <p>Referral agreements/MOU</p> <p>QF Support Templates:</p> <p>Delivery of Service Policy Clinical/Practice.</p> <p>Governance Policy.</p> <p>Partnership and Enhanced Integration Policy.</p> <p>Consumer satisfaction assessment.</p> <p>Staff feedback.</p> <p>Consumer engagement checklist.</p> |
| PE 3.3 Assessment & Service Matching | PE 3.3 Assessment and service matching | <p>Systems criteria addressed:</p> <p>Documented: Are assessment guidelines, tools</p> | <p>Examples are:</p> <p>Admission/discharge</p> |

Section 2 AOD Specific: AOD Quality Framework Performance Expectation 3.1 – 3.8 (Supplementary to Section 2)

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation <i>A systems approach has been applied to PE 3.1 – 3.8</i> | Tips, Good Practice & Practical Hints |
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| | Comprehensive Assessment and Information for consumer, informed choice re treatment options, consumer focused service plan which matches needs | <p>and service matching processes fully documented and reviewed?</p> <p>Integrated: How do you know that the documented policies and procedures are followed in practice?</p> <p>Communicated: How are the staff informed of the approach, including P&P's to assessment and service matching? How are consumers informed about treatment options?</p> <p>Evaluated How do you monitor the effectiveness and get feedback on satisfaction related to assessment and service matching?</p> <p>Delegated: Who is responsible for Assessment and service matching?</p> | <p>assessment. Medical assessment. Behavioral Assessment. Voluntary referral. Referral from agency. Interagency agreements. Face to face observation assessment. Formal sign in check against entry criteria. In-house assessment. QF Support Templates: Delivery of Service Policy Consumer engagement checklist Also refer QF Appendix B: WA Comprehensive Diversion Program Quality Considerations PE 3</p> |
| PE 3.4 Inter agency Referral | PE 3.4 Inter Agency Referral Referral, shared care, | Systems criteria addressed: Documented: Is there guiding documentation reflective of the | Examples include: Front desk manual Interagency phone list |

Section 2 AOD Specific: AOD Quality Framework Performance Expectation 3.1 – 3.8 (Supplementary to Section 2)

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation <i>A systems approach has been applied to PE 3.1 – 3.8</i> | Tips, Good Practice & Practical Hints |
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| | case management, minimize duplication | <p>Guidelines and Support section for PE 3.4?</p> <p>Integrated:</p> <p>Does the practice match the guiding documentation?</p> <p>Communicated:</p> <p>Are staff informed of the requirements and have access to relevant referral information e.g. relevant agencies (see Guidelines and Support Section for PE 3.4)</p> <p>Evaluated</p> <p>Are you applying checking process consistent with Guidelines and Support PE 3.4?</p> <p>Delegated:</p> <p>Is responsibility delegated for managing referrals?</p> | <p>Phone call policy</p> <p>Referral charter/ proforma</p> <p>Obligation charter</p> <p>Duty of care charter</p> <p>Release of information form/consent form.</p> <p>Feedback & streamline strategy b/w referring agencies.</p> <p>Accompany client to other service.</p> <p>QF Support Templates:</p> <p>Partnership and Enhanced Integration Policy</p> <p>Feedback to Referring Organisation Form</p> <p>Referral and Transfer of Information Form</p> |
| PE 3.5 Clinical Pathways Planning | 3.5 Clinical Pathway planning Clinical pathway plan developed, Holistic | Systems criteria addressed: Documented: What documentation is used to guide Clinical Pathway Planning? | Examples include: Assessment and referral processes which include the client's choice of |

Section 2 AOD Specific: AOD Quality Framework Performance Expectation 3.1 – 3.8 (Supplementary to Section 2)

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation <i>A systems approach has been applied to PE 3.1 – 3.8</i> | Tips, Good Practice & Practical Hints |
|--------------------------------|---|--|---|
| | therapeutic approach including case management, shared care and through care. | <p>Integrated: How do you know evidence based pathways are used in practice?</p> <p>Communicated: How are staff and consumers informed of Clinical pathway planning?</p> <p>Evaluated How are P&P around clinical pathways monitored and reviewed? How is continuity of care monitored? What improvements have been made and how?</p> <p>Delegated: Is responsibility assigned for ensuring clinical pathway planning?</p> | <p>treatment option</p> <p>Regular meetings with client on treatment</p> <p>Regular service access for client.</p> <p>QF Support Templates: Delivery of Service Policy Partnership and Enhanced Integration Policy Clinical/Practice Governance Policy</p> |
| PE 3.6 Service Approach | PE 3.6 Service Approach Informed by evidence and practice wisdom Clinical/practice Governance principles | <p>Systems criteria addressed:</p> <p>Documented: Is clinical/practice governance policy in place as per QF Guidelines?</p> <p>Integrated How do you know service principles and goals</p> | <p>Examples include: Harm Minimisation/reduction (eg rec. by Royal Commission - Deaths in Custody)</p> |

Section 2 AOD Specific: AOD Quality Framework Performance Expectation 3.1 – 3.8 (Supplementary to Section 2)

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation <i>A systems approach has been applied to PE 3.1 – 3.8</i> | Tips, Good Practice & Practical Hints |
|--------------|-------------------|---|--|
| | Consumer driven | <p>are being implemented appropriately? Is training adequate to ensure staff can apply these to practice?</p> <p>Communicated: What processes are in place to inform staff of practice principles and service goals for interventions?</p> <p>Evaluated Are checking mechanisms in place as discussed in QF Guidelines and Support? Are policies and procedures reviewed regularly, using feedback?</p> <p>Delegated: Who is responsible for ensuring the agreed and documented Service Approach is applied?</p> | <p>7L approach Healthy lifestyle approach Social learning Prevention treatments Culturally secure approach Relapse Prevention Anger management Motivational Interviewing Thorley Balls Interaction Model Stages of Change Cognitive Behavioral Therapy (CBT) Pro's and Con's Goal Setting</p> <p>QF Support Templates: Delivery of Service Policy Template Clinical/Practice Governance Policy Appendix B: WA Comprehensive Diversion Program Quality</p> |

Section 2 AOD Specific: AOD Quality Framework Performance Expectation 3.1 – 3.8 (Supplementary to Section 2)

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation <i>A systems approach has been applied to PE 3.1 – 3.8</i> | Tips, Good Practice & Practical Hints |
|---|---|---|---|
| | | | Considerations PE 3 |
| <p>PE 3.7 Harm Reduction Information</p> | <p>3.7 Harm Reduction Information</p> <p>Information and support to at risk consumers</p> <p>Monitoring of risk throughout service provision</p> | <p>Systems criteria addressed:</p> <p>Documented:</p> <p><i>What is your guiding document/s around this, have you developed a Harm Reduction P&P as suggested in the Guidelines and Support section of the QF?</i></p> <p>Integrated:</p> <p><i>The Consumers Engagement checklist referred to in the Guidelines and Support section may be one way of monitoring if Harm Reduction processes are integrated into practice. How else do you know if Harm reduction practices are being put into practice?</i></p> <p>Communicated:</p> <p><i>How is the expected practice communicated to staff and how are consumers informed of harm reduction?</i></p> <p>Evaluated</p> <p><i>Is the Checking component of the Guidelines and Support section for this PE being applied? Do you have other ways of evaluating the</i></p> | <p>Examples are:</p> <p>Harm reduction policies and procedures</p> <p>Pamphlets, posters on drinking, drugs, safe sex etc.</p> <p>Counselling on risky behaviors.</p> <p>Supply demand reduction policy.</p> <p>School drug awareness program.</p> <p>Parent workshops in agency and community.</p> <p>Alcohol and pregnancy programs.</p> <p>Drug and alcohol workshops.</p> <p>Driver education programs.</p> <p>QF Support Templates:</p> <p>Harm Reduction Policy</p> |

Section 2 AOD Specific: AOD Quality Framework Performance Expectation 3.1 – 3.8 (Supplementary to Section 2)

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation <i>A systems approach has been applied to PE 3.1 – 3.8</i> | Tips, Good Practice & Practical Hints |
|-------------------------------------|--|--|--|
| | | <p>effectiveness of your approach around Harm Reduction?</p> <p>Delegated: How is responsibility delegated for ensuring this system is operating well?</p> | |
| <p>PE 3.8 Outcome Review</p> | <p>PE 3.8 Outcome Review Measures changes in consumer functioning and informs service planning.</p> | <p>Systems criteria addressed: Documented: What documentation exists to guide outcome review? Integrated: How do you know practice is consistent with guiding documentation? Are you monitoring consumer completed performance indicator tools? Communicated:</p> | <p>Examples are: Reduced alcohol/drug consumption indicators Improved health and hygiene indicators /changes. Increased persons applying for jobs. Increase in motor vehicle licenses issued.</p> |

Section 2 AOD Specific: AOD Quality Framework Performance Expectation 3.1 – 3.8 (Supplementary to Section 2)

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation <i>A systems approach has been applied to PE 3.1 – 3.8</i> | Tips, Good Practice & Practical Hints |
|--------------|-------------------|---|---|
| | | <p>How is the need for and process of outcome review communicated to staff? Evaluated</p> <p>What performance measurement tools are used? Delegated:</p> <p>How are consumer outcomes monitored by management, Governance body, Funders? Delegated:</p> <p>How is this delegated? Who has responsibility for ensuring consumer outcomes are measured and monitored?</p> | <p>Drink diary resource. Monitoring log on AOD use (in case notes). Reduced alcohol/drug consumption indicators.</p> <p>QF Support Templates: Consumer satisfaction assessment considerations</p> |

Section Three: Sustaining External Relationships Quality

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
|---|--|--|--|
| <p>3.1 Service Agreements and Partnerships</p> | <p>PE 5.1 Constitution/Service Agreements in place and compliance monitored (also see PE 5.1 G&S Page 27)</p> <p>PE 5.8 Partnership agreements /P&P to guide inter-agency & intersectoral collaboration for better consumer outcomes (see also G&S PE 5.8 page 35)</p> <p>Partnership and Enhanced Integration P&P Template Page 85</p> | <p>Content of QIC standard covered by QF: Partial 😊</p> <p>Systems criteria addressed by QF: Partial 😊</p> <p>Additional Areas of Content for QIC: Contract dispute mechanisms should be in place for partnerships and service agreements;</p> <p>Responsibility for contract management process should be clearly delegated;</p> <p>Where services are brokered or contracted a review/monitoring process should be in place.</p> <p>Systems Approach: Systems criteria should be applied to all areas to ensure a comprehensive system</p> | <p>Standard templates developed for contracted or Brokered services;</p> <p>Memorandum of Understanding;</p> <p>Partnership Agreements including relevance to org goals, values fit, risk assessment, conflict management etc.</p> <p>Service agreements/ partnerships reviewed regularly and fit with org goals and values</p> <p>Contract dispute mechanisms are in place</p> <p>Contracted services reviewed.</p> |
| <p>3.2 Collaboration and</p> | <p>PE 5.8 Partnership</p> | <p>Content of QIC standard covered by QF:</p> | <p>Collaboration with other</p> |

Section Three: Sustaining External Relationships Quality

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
|--|---|--|---|
| Strategic Positioning | <p>agreements /P&P to guide inter-agency & inter-sectoral collaboration for better consumer outcomes</p> <p>Partnership and Enhanced Integration P&P Template Page 85 (see also G&S PE 5.8)</p> | <p>Partial ☹️</p> <p>Systems criteria addressed by QF:</p> <p>Partial ☹️</p> <p>Additional Areas of Content for QIC:</p> <p>Consideration given to strategic positioning of organisation as part of long term planning and strategies should be in place.</p> <p>Systems Approach:</p> <p>Systems criteria should be applied to all areas to ensure a comprehensive system.</p> | <p>agencies leads to better use of resources, better outcome for consumers and avoids duplication;</p> <p>Participation in peak bodies and regional or sector networks can help to stay abreast of developments and be assist in strategic positioning of organisation.</p> |
| 3.3 Incorporating and Contributing to Good Practice | <p>PE 3.6 Service reflects evidence based practice and clinical governance principles and individualized.</p> | <p>Content of QIC standard covered by QF:</p> <p>All 😊</p> <p>Systems criteria addressed by QF:</p> <p>All 😊</p> <p>Systems Approach:</p> <p>Use QIC Standards to ensure system is comprehensive.</p> | <p>Staff attending and or presenting at AOD conferences.</p> <p>Membership of Professional Associations.</p> <p>Access to sector and professional journals, information and research and timely use</p> |

Section Three: Sustaining External Relationships Quality

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
|--|---|---|--|
| | | | <p>of this to inform practices.</p> <p>Analysis of trends and developments in AOD field.</p> <p>Using industry benchmarks to review practices.</p> <p>Mentoring, supervision used to share and develop skills.</p> |
| <p>3.4 Community and Professional Capacity Building</p> | <p>PE 2.1 Policies, Procedures and structures to support Consumer Involvement at all levels of the Organisation.</p> <p>PE 2.2 Development, Utilization and review of a Consumer Needs and Satisfaction Survey Tool</p> | <p>Content of QIC standard covered by QF: Partial 😊</p> <p>Systems criteria addressed by QF: Partial 😊</p> <p>Additional Areas of Content for QIC:</p> <p>Community development to improve determinants of wellbeing, identify needs & plan new services;</p> <p>Shares information with community;</p> <p>Participate in professional, sector, regional and</p> | <p>Community development aimed at improving determinants of wellbeing, identifying needs & planning new services.</p> <p>Sharing information with community;</p> <p>Participate in professional, sector, regional and peak bodies.</p> |

Section Three: Sustaining External Relationships Quality

| QIC Standard | AOD QF Equivalent | Further Action Required For QIC Accreditation | Tips, Good Practice & Practical Hints |
|--------------|--|--|--|
| | <p>and Consultation Processes.</p> <p>PE 2.4 Non-discriminatory Practice and Equitable Access</p> <p>Links with other agencies in the provision of services for a diversity of populations groups.</p> <p>Consumer Participation</p> <p>P&P Template Page 29. (see also G&S PE 2.1, 2.2 & 2.4)</p> | <p>peak bodies.</p> <p>Systems Approach:</p> <p>Systems criteria should be applied to all areas to ensure a comprehensive system.</p> | <p>Works with other agencies/special needs groups to better meet consumer needs.</p> |

ABBREVIATIONS

| | |
|----------------|---|
| AOD | Alcohol and Other Drugs |
| ATOD | Alcohol Tobacco and Other Drugs |
| CQI | Continuous Quality Improvement |
| DAO | Drug and Alcohol Office, Government of Western Australia |
| G&S | Guidelines and Support Section of the Alcohol and Other Drugs Quality Framework |
| OSH | Occupational Safety and Health |
| PDCA | Plan Do Check Act |
| PE | Performance Expectation |
| P&P | Policy and Procedures |
| QF | Quality Framework |
| QIC | Quality Improvement |
| QMS | Quality Management Services |
| SA | Self Assessment Section of the Alcohol and Other Drugs Quality Framework |
| WANADA | Western Australian Network of Alcohol and other Drugs Agencies |