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**Family &
Community
Services**

Accreditation Systems Recognition Tool

International Organization for Standardization 9001: 2008

(ISO) 9001: 2008



Accreditation Systems Recognition Tool, International Organisation for
Standardisation (ISO) 9001: 2008

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Department of Family and Community Services
Ageing, Disability and Home Care
Level 7, 4-6 Bligh Street, Sydney NSW 2000
Phone: (02) 9377 6000
TTY: (02) 9377 6167 (for people who are deaf)
Translating and Interpreting Service: 13 14 50

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Overview

An important aim of the NSW quality reform program is the recognition of accreditations /certifications of other industry standards that service providers already have in place to reduce the administrative burden and need for duplicate reporting.

The development of a recognition tool is an innovative and practical way to acknowledge the diversity of the sector which ranges from small to very large providers with varying experiences of quality management systems and external assessments.

A recognition tool is advantageous for service providers who already have accreditation status with one or more of the industry standards, as this work will be recognised. It will simplify the process for service providers to demonstrate that they meet the practice requirements of the NSW Disability Services Standards (NSW DSS) and will streamline reporting requirements by recognising the findings of other external assessments as set out in this tool.

The recognition tool has 12 chapters, one for each quality management system or standard that has been mapped by Joint Accreditation Systems of Australia and New Zealand (JAS-ANZ). JAS-ANZ is the government-appointed accreditation body for Australia and New Zealand responsible for providing accreditation of conformity assessment bodies (CABs) in the fields of certification and inspection. Accreditation by JAS-ANZ demonstrates the competence and independence of these CABs.

Background

To assist ADHC to develop an appropriate recognition tool for the sector, JAS-ANZ was engaged to map 12 industry standards in use by the sector against the updated six NSW DSS to identify common components and gaps. The industry standards selected for the mapping exercise were based on the results of a sector survey conducted in 2011 to understand the extent and type of quality management activities and standards in use by the sector.

JAS-ANZ mapped each of these industry standards and quality management systems against each element of the practice requirements across the six NSW DSS and rated each according to its alignment to the NSW DSS. JAS-ANZ provided a three scale rating:

1. Where the industry standard met a NSW DSS element
2. Where the industry standard partially met a NSW DSS element
3. Where the industry standard didn't meet the NSW DSS element.

The industry standards mapped by JAS-ANZ can be accessed via the ADHC website at: http://www.adhc.nsw.gov.au/sp/quality/adhc_systems_recognition_tool

JAS-ANZ developed a standards comparison tool which forms the basis of ADHC's approach to recognising how other industry standards meet the NSW DSS.

It should be noted that as the elements in the NSW DSS are specific and designed to cover the full range of service types, not all elements will apply to all service providers. For example, the elements relating to children's services won't apply to service providers who only deliver services to adults.

NSW DSS

Central to NSW quality reform and the application of the ADHC recognition tool are the revised NSW DSS. This revised set of Standards is contemporary and supports service providers to transition to person centred and lifespan approaches in an individualised funding environment. The NSW DSS describe what service providers need to do to comply with the *Disability Inclusion Act 2014* (DIA) and *Disability Inclusion Regulation 2014* (Regulation) and meet their requirements under the Funding Agreement.

There are six NSW DSS:

1. Rights
2. Participation and inclusion
3. Individual outcomes
4. Feedback and complaints
5. Service access
6. Service management

NSW DSS practice requirements and elements

Within each of the six standards there are two or three practice requirements. The practice requirements describe how providers can put the principles of the DIA into practice and are designed to assist service providers to understand and comply with the DIA. For example NSW DSS 3: Individual outcomes Practice requirement 3.1 Service providers maximise person centred decision making.

Within each practice requirement there are a number of elements. The elements are the core activities required of a service provider to comply with the NSW DSS and are designed to assist service providers to understand what they need to build into their day to day practices and processes.

JAS-ANZ has conducted its mapping based on the NSW DSS elements.

Accreditation Systems Recognition Tool

This chapter of the recognition tool has been designed for use by service providers who have existing accreditation status with International Organization for Standardization (ISO) 9001: 2008.

The key purpose of the mapping is to enable service providers to understand how their current accreditation/certification status meet the NSW DSS and the areas that require further evidence or activity to fully meet the NSW DSS.

The tool was designed to guide service providers through the process of self assessment and to assist them to prepare for third party verification using the JAS-ANZ mapping.

Some of the NSW DSS elements may not apply to all organisations and service providers should identify the elements that are relevant as part of the self assessment process for their particular organisation.

ADHC is aware that a number of funded service providers have implemented ISO 9001 which is internationally recognised as a quality framework for effectively managing organisational business and meeting consumers' requirements. As ISO 9001 is suitable for any organisation looking to improve the way it operates and is managed regardless of size or sector, it is recognised that there will be gaps between ISO 9001 and NSW DSS given the specific intent of the disability standards.

Service providers are advised that when they are conducting a self assessment using the recognition tool, they need to be aware that the JAS-ANZ mapping and their subsequent scoring of the industry standards against the elements of NSW DSS, is based on JAS-ANZ's interpretation of the relevant industry standard. Service providers should also be aware that the JAS-ANZ mapping may not take into account the broader regulatory environment in which service providers operate including legislative requirements, particular industry standards guidelines or ADHC policy and guidelines.

How to use the recognition tool

The recognition tool has been designed for use by service providers who have existing accreditation status with the International Organization for Standardization (ISO) 9001:2008

It is recommended that service providers print a copy of the JAS-ANZ mapping and undertake a self assessment of JAS-ANZ rating/s against the NSW DSS using the guidelines outlined below.

Accreditation Systems Recognition Tool	
<p>GREEN indicates that JAS-ANZ has assessed that the ISO 9001 meet this element of the NSW DSS practice requirement. This means that as a service provider holding current Accreditation status, your organisation fully meets this element of the NSW DSS and no additional work is required in preparation for the Third Party Verification process.</p>	
<p>YELLOW indicates that JAS-ANZ has assessed the ISO 9001 as partially meeting this element of the NSW DSS practice requirement and some improvement is required. To conduct a self assessment service providers should:</p> <p>Read the NSW DSS element to identify whether the practice described in the element applies to the services provided:</p> <ul style="list-style-type: none"> • If the answer is YES, and you have policies and aligned practices in place that demonstrate you meet this element all you may need to do in preparation for your Third Party Verification is to have the relevant policy and practices available for the verifiers as evidence. It is also recommended that you have de-identified examples of the how these policy and practices have been used. • If the answer is YES, but you do not have policies and/or practices in place, you will need to act on this and implement appropriate policies and practices. You should access ADHC resources such as the Standards in Action, It's your business chapter on Quality Management and Key Performance Indicator (KPI) Guide that have been made available on the ADHC website. If the answer is NO, then this NSW DSS element does not apply to your service and you do not need to comply with this element. 	
<p>ORANGE indicates that JAS-ANZ has assessed that the ISO 9001 does not meet this element of the NSW DSS practice requirement and significant improvement is required to meet the NSW DSS. Service providers should self assess following the steps outlined in the yellow cell above.</p>	

JAS-ANZ mapping against the ISO 9001:2008

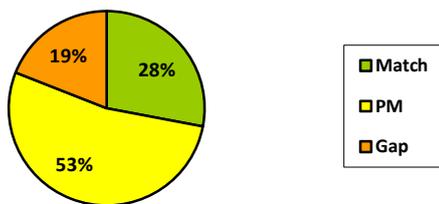
Overview

The JAS-ANZ mapping has been based on International Organization for Standardization 9001: 2008 (ISO 9001) published in 2008.

The ISO 9001 family of standards relate to quality management systems and are designed to help organisations ensure they meet the needs of customers and other stakeholders. The ISO 9001 is used across a range of industries, including human service organisations.

The target group does not specifically include people with a disability. This means that additional evidence will be required across all the NSW Disability Services Standards (NSW DSS).

Overall, the ISO 9001 provide a low percentage of matches with the updated NSW DSS as shown in the diagram below.



ISO 9001 refers to the 'customer', which in the case of NSW DSS is the person with a disability and 'products' which are 'services'. As the ISO 9001 is based on quality management principles, it underpins some of the quality management requirements of NSW DSS, however is not able to align with some of the more specific requirements.

ISO 9001 requires information for customers about the products, which matches one of the requirements for the NSW DSS 5: Service access, in relation to community engagement. However accessibility of information, communication strategies, and community engagement strategies alignment with the NSW DSS is limited.

ISO 9001 has some parallels with NSW DSS 3: Individual outcomes, particularly on ensuring that customer requirements are determined, satisfied and reviewed. However ISO 9001 standards are not specific to the person being at the centre of decision making and provided with necessary support, so alignment with NSW DSS is limited.

ISO 9001 does not have an equivalent standard to align with the NSW DSS 2: Participation and inclusion. Accordingly, service providers who have ISO 9001 will need to develop continuous improvement mechanisms to review processes, which would support some of the practice elements.

ISO 9001 requires arrangements for customer feedback, including customer complaints which work towards meeting some of the NSW DSS 4: Feedback and complaints elements.

ISO 9001 broadly matches most of NSW DSS 6: Service management elements due to it being a quality management framework. There is a strong commitment to continuous improvement in the ISO 9001 standards, which includes the involvement of stakeholders and compliance requirements.

ISO 9001 has a customer focus, though this is not specific to access and support in relation to understanding rights as required under NSW DSS: 1 Rights.

Extent of matches between ISO 9001 Standards and NSW DSS

The extent of matches between ISO 9001 and the NSW DSS is described below. There are 23 practice elements which are fully met.

Where some additional evidence may be required, it is largely due to the scope of services (including service delivery model, target group, legislative practice requirements) administered through ADHC. This explains why some of the evidence may be specific and not usually required for this particular standard.

The majority of additional evidence relates to 44 practice elements where there are partial matches to NSW DSS, which means existing systems can be adapted to fully demonstrate the additional evidence.

There are 16 practice elements which are gaps and have no commonalities with the existing ISO 9001 requirements.

The needs of people with a disability are not demonstrated in this industry standard and will need to be demonstrated in all the NSW DSS practice elements.

NSW Disability Services Standard 1: Rights

JAS-ANZ Analysis of ISO 9001

ISO 9001 enables an organisation to align or integrate its own quality management system with related management system requirements which should meet statutory and regulatory requirements. However, it does not have the same level of specificity as required by the NSW DSS 1: Rights. The 'customer' in the case of disability services is the person with the disability or consumer receiving support. Given the broad nature of the ISO standards, the target group is not specific to people with a disability.

The first set of NSW DSS 1: Rights practice elements requires that each person is aware of their rights and expects to have them respected. Although the target group for ISO 9001 is not specific to people with a disability, Clause 5.2 in ISO 9001 requires a customer focus and that customer requirements are met with the aim of enhancing customer satisfaction (ISO 9001 Clauses 7.2.1 and 8.2.1). However this is not specific to access and support, understanding rights, social participation, cultural rights, safety, self protective behaviours, upholding decision making, particularly around medical interventions, and equitable service provision for children with disabilities relating to rights and freedoms.

The second set of practice elements for NSW DSS 1: Rights refers to how service providers are to uphold, protect and promote the legal and human rights of each person. The ISO Quality management system requirements include documented procedures, policies and records which meet statutory and regulatory requirements. As above, ISO 9001 Clauses 7.2.1 and 8.2.1 apply. Additionally, ISO 9001 Clause 7.2 (Customer related processes) and ISO 9001 Clause 6.1 (b) apply which covers ensuring that resources are provided to enhance customer satisfaction by meeting customer requirements. However, this is not specific to support stakeholders when proceeding with allegations of abuse or neglect, safe environments, staff knowledge of reporting mechanisms, access to advocacy services, consents for medical interventions and observation of rights related to nutrition and behaviour management.

ISO 9001 requires a strong commitment to continuous improvement, and involvement of general stakeholders, though it is not specific about involvement of stakeholders in the development and review of equality and rights based policies.

Based on this analysis, NSW DSS 1: Rights practice element 4 is met.

NSW DSS 1: Rights practice elements 1, 2, 3, 5, 6, 7, 8, 9, 10, 11, 12, 13 and 14 are partial matches.

JAS-ANZ mapping of ISO 9001 against NSW DSS

Practice requirement 1.1:

Each person is aware of their rights and can expect to have them respected.

Practice elements	JAS-ANZ mapping result
1. Each person will have access to information and support to understand and exercise their legal and human rights.	Partly met
2. Each person will receive a service that maximises their choices for social participation and cultural inclusion.	Partly met
3. Each person will receive a service in an environment free from discrimination, abuse, neglect and exploitation.	Partly met
4. Each person will receive a service that reflects their right to privacy and have their personal records and details about their lives dealt with in an ethical and confidential manner in line with relevant legislation.	Meets NSW DSS
5. Each person can expect service providers to support and encourage self protective strategies and behaviours that take into account their individual and cultural needs.	Partly met
6. Each person can expect service providers to uphold their right to make decisions, including medical treatments and interventions, and when this is not possible, assisted or substituted (alternative) decision making is in line with the person's expressed wishes, if known and if not, with their best interests.	Partly met
7. Each child with a disability has the same rights and freedoms as all other children and service providers will take each child's best interests into account when providing services.	Partly met

Practice requirement 1.2:

Service providers are to uphold and promote the legal and human rights of each person.

Practice elements	JAS-ANZ mapping result
8. Services are provided in an environment free from discrimination, financial, sexual, physical and emotional abuse, neglect and exploitation.	Partly met
9. Service providers encourage and support access to advocacy services by people with a disability to promote their rights, interests and wellbeing.	Partly met
10. Service providers gain consent from each person with a disability or their person responsible or legal representative for medical treatments and interventions.	Partly met
11. Service providers provide opportunities for people with a disability to participate in the development and review of organisational policy and processes that promote strategies for equality and upholding human rights.	Partly met
12. Service providers take into account individual choice and the rights of each person and act in their best interests in relation to nutritional and behaviour management practices in line with relevant legislation, convention, policies and practices.	Partly met
13. Service providers have knowledge and skills to implement reporting processes on incidents of alleged or known discrimination, abuse, neglect or exploitation and know how to notify the relevant external authorities.	Partly met
14. Service providers offer appropriate support to the person and their family or carer when they raise or pursue allegations of discrimination, abuse, neglect or exploitation.	Partly met

NSW Disability Services Standard 2: Participation and inclusion

JAS-ANZ Analysis of ISO 9001

ISO 9001 is a framework standard that enables an organisation to align or integrate its own quality management system with related management systems requirements that theoretically, should meet statutory and regulatory requirements. However, it does not have the same level of specificity as required by NSW DSS 2: Participation and inclusion. This is because in the ISO 9001 framework, the 'customer' is generic and is not specific to people with a disability.

ISO 9001 Clause 5.2 (Customer Focus) warrants that top management ensures that customer requirements are determined and are met with the aim of enhancing customer satisfaction. ISO 9001 Clause 7.2.1 (Determination of requirements related to the product), a) through d) also determines, in this instance the product being the service provided to people with a disability, includes: consumer related requirements, regulatory and legislative requirements (in this instance the NSW DSS) and any other additional requirements deemed necessary by the organisation. ISO 9001 Clause 7.2.3 (Customer communication) is not specific to working with the customer or other stakeholders. ISO 9001 Clause 8.2.1 (Customer satisfaction) is the last customer or consumer focussed process resulting in evaluation of feedback.

ISO 9001 Clause 6.2 (Human Resources), specifically 6.2.2, (Competence, Training and Awareness) points a) through e), provides guidance on identification, delivery, evaluation, roles, responsibilities, record keeping and related processes. ISO 9001 Clause 8.5.1 (Continual Improvement) outlines mechanisms to review processes, which may support some of the required processes relating to the service provider developing methods to further develop community connections and increased value of its service recipients.

However, given the factors mentioned in the paragraphs above and the nature of ISO 9001, there are no specific references to connecting with community, specific training of staff, working with stakeholders to achieve meaningful participation, promoting inclusion, working with stakeholders to minimise barriers to participation or references to the criminal justice system.

Based on this analysis, NSW DSS 2: Participation and inclusion practice elements 1, 2, 3, and 8 are partially met.

NSW DSS 2: Participation and inclusion practice elements 4, 5, 6, 7 and 9 are gaps.

JAS-ANZ mapping of ISO 9001 against NSW DSS

Practice requirement 2.1:

Each person is actively encouraged and supported to participate in their community in ways that are important to them.

Practice elements	JAS-ANZ mapping result
1. Service providers support each person to make decisions about how they connect with their chosen community, respectful of their choices and plans including work, learning, leisure and their social lives.	Partly met
2. Training and support is provided to staff and volunteers so workers understand, respect and act on the interests and skill development of people with a disability over time.	Partly met
3. Service providers work with people with a disability and their community to promote opportunities and support their active and meaningful participation.	Partly met
4. Service providers, with the consent of the person with a disability, work with an individual's family, carer, significant other or advocate to promote their connection, inclusion and participation in the manner they choose.	Gap
5. For people exiting the criminal justice system, service providers actively support the person to develop their interests and activities in ways that consider the rights and welfare of the broader community.	Gap

Practice requirement 2.2:

Service providers develop connections with the community to promote opportunities for active and meaningful participation.

Practice elements	JAS-ANZ mapping result
6. Service providers actively seek information about other supports and services in their local community to enable people with a disability to achieve their goals and to minimise barriers to participation.	Gap
7. Staff and volunteers model respectful and inclusive behaviour when supporting people in their community as a way of promoting the uniqueness of each individual.	Gap
8. Service providers develop ways to maintain and further develop their local connections so that options for people with a disability to be included and valued are increased over time.	Partly met
9. Service providers actively seek connections with the community for people exiting the criminal justice system.	Gap

NSW Disability Services Standard 3: Individual outcomes

JAS-ANZ Analysis of ISO 9001

ISO 9001 enables an organisation to align or integrate its own quality management system with related management system requirements that should meet statutory and regulatory requirements. However, it does not have the same level of specificity as required by the Individual outcomes standard. This is because in the ISO 9001 framework, the 'customer' is generic and is not specific to people with a disability.

The first set of practice elements for NSW DSS 3: Individual outcomes calls for service providers to maximise person centred decision making. ISO 9001 Clause 5.2 (Customer Focus) aims to ensure that customer requirements are determined and are met with the aim of enhancing customer satisfaction (Clauses 7.2.1 and 8.2.1). ISO 9001 Clause 6.2.1 (Human Resources) also looks at personnel performing work according to requirements, and being competent based on appropriate education, training, skills and experience. However, this is not specific to service providers respecting the rights of service recipients and them being at the centre of decision making, informing and supporting all stakeholders to implement person centred approaches, supporting the service recipient to determine the level of stakeholder engagement in planning and decision making processes, recognising and respecting the views of stakeholders in planning and decision making processes, ensuring staff and volunteers are responsive and flexible to service recipient individual and cultural needs and that service providers make every effort to support a person and relevant stakeholders to make decisions prior to engaging a substitute decision maker.

The second set of practice elements for NSW DSS 3: Individual outcomes calls for service providers to undertake person centred approaches to planning to enable each person to achieve their individual outcomes. The ISO Quality Management system requirements include documented procedures, policies and records that meet statutory and regulatory requirements. As above, ISO 9001 Clauses 5.2, 7.2.1 and 8.2.1 apply. In addition, the Introduction covers the design and implementation of an organisation's quality management system which is influenced by a) its organisational environment, changes in that environment, and the risks associated with that environment, b) its varying needs, c) its particular objectives, d) the products it provides, e) the processes it employs and fits size and organizational structure. However, this is not specific to ensuring that service providers work with the person to develop and implement plans, adjust their plan where appropriate, ensure dignity of risk is abided by and work with other organisations and stakeholders.

ISO 9001 Clause 5.3 (Quality Policy) includes the requirement of a commitment to comply with requirements and continually improve the effectiveness of the quality management system and provides a framework for establishing and reviewing quality objectives. ISO 9001 Clause 5.6

(Management Review) ensures that management shall review the organisation's quality management system, at planned intervals, to ensure its continuing suitability, adequacy and effectiveness. This includes assessing opportunities for improvement and the need for changes to the quality management system, encompassing the quality policy and quality objectives. ISO 9001 Clause 7 (Product realization) also broadly supports the intent of practice element 10.DSS NSW 3: Individual outcomes.

Based on this analysis, NSW DSS 3: Individual outcomes practice element 10 is met.

All other elements are partial matches.

JAS-ANZ mapping of ISO 9001 against NSW DSS

Practice requirement 3.1:

Service providers maximise person centred decision making.

Practice elements	JAS-ANZ mapping result
1. Service providers respect the right of each person to be at the centre of decision making and to have responsibility, as much as possible, for each decision which affects them.	Partly met
2. Service providers support each person to determine the involvement of their family, carers and advocates in planning and decision making processes.	Partly met
3. Service providers respect the views of family and carers in planning and decision making processes. The person with a disability has the final say in the process.	Partly met
4. Staff and volunteers respond in innovative and flexible ways to each person's need for decision support which reflect their individual and cultural needs.	Partly met
5. Service providers make every effort to enable a person to make a decision or assist families, carers and advocates to come to an agreement before a substitute decision maker is engaged.	Partly met

Practice requirement 3.2:

Service providers undertake person centred approaches to planning to enable each person to achieve their individual outcomes.

Practice elements	JAS-ANZ mapping result
6. Service providers work together with the person to develop and implement a plan that identifies and builds on the person's strengths, aspirations and goals. Plans should draw on broader family, cultural and religious networks and community organisations.	Partly met
7. Service providers support each person, and (when necessary with consent) their family, carer or advocate to develop, review, assess and adjust their plan as their circumstances or goals change.	Partly met
8. Service providers recognise the importance of risk taking and enable each person to assess the benefits and risks of each option available to them and trial approaches even if they are not in agreement.	Partly met
9. Service providers work with other organisations and community groups to expand the range of service options available in their community.	Partly met
10. Service providers regularly review their person centred approaches to ensure the organisation has the capacity and capability to deliver flexible and responsive supports and services that meet individual needs and expectations.	Meets NSW DSS

NSW Disability Services Standard 4: Feedback and complaints

JAS-ANZ Analysis of ISO 9001

ISO 9001 is an international standard outlining quality management requirements for organisations providing 'products'. Where applicable, a 'product' may also be a service. ISO 9001 Clause 7.2.3 (Customer communication) specifies whether an organisation has arrangements in place for customer feedback, including customer complaints. In the ISO 9001 framework, the 'customer' is generic and is not specific to people with a disability.

The first set of practice elements for NSW DSS 4: Feedback and complaints addresses fairness. ISO 9001 does not fully meet the requirements of information, a safe environment, no negative consequences, support to complainants, privacy and confidentiality.. ISO 9001 Clause 5.2 (Customer focus) requires a customer focus and that customer requirements are met with the aim of enhancing customer satisfaction (Clauses 7.2.1 (Determination of requirements related to the product and 8.2.1 Customer satisfaction). However there is no comparable ISO standard to privacy and confidentiality. ISO 9001 Clause 7.2.1 infers that customer related processes would address the requirement for information throughout the decision making process, though this is not specific to complaints.

The second set of practice elements for NSW DSS 4: Feedback and complaints addressing information and support has gaps in relation to accessibility of information and advocacy support. Clause 7.2.1 Implies that customer related processes and ISO 9001 Clause 7.2.3 (customer communication) would provide details of the complaints process though this is not specific.

The third set of practice elements for NSW DSS 4: Feedback and complaints addressing service management of complaints meets the policy and process requirements and continuous improvement requirements. The ISO Quality Management system requirements include documented procedures, policies and records, which meet statutory and regulatory requirements. There is a strong commitment to management review, continuous improvement, monitoring, analysis and planning throughout this Standard. This includes the status of corrective actions (in ISO 9001 Clause 8.5.2) as part of management review, which incorporates complaints as an agenda item. ISO 9001 Clause 8.2.1 has a focus on input from customers in measuring the performance of the quality management system though not specific to participation in review of policies and how outcomes are reported.

Based on this analysis, NSW DSS 4: Feedback and complaints practice elements 14, 17 and 19 are met.

NSW DSS 4: Feedback and complaints practice elements 1, 6, 7, 12, 16, 18, and 21 are partial matches.

NSW DSS 4: Feedback and complaints practice elements 2, 3, 4, 5, 8, 9, 10, 11, 13, 15 and 20 gaps.

JAS-ANZ mapping of ISO 9001 against NSW DSS

Practice requirement 4.1:

Each person is treated fairly by the service provider when making a complaint.

Practice elements	JAS-ANZ mapping result
1. Service providers inform each person of their right to complain and work with the person, their families and carer to try and resolve the issue.	Partly met
2. Service providers provide a safe environment for each person to make a complaint.	Gap
3. Service providers ensure that there are no negative consequences or retribution for any person who makes a complaint.	Gap
4. Service providers support participation in the complaint handling process of any person wanting to make a complaint and work with the person to identify the desired goal.	Gap
5. Service providers treat each person making a complaint in a manner that protects their privacy and respects confidentiality.	Gap
6. Service providers are committed to and demonstrate fair and timely resolution of complaints.	Partly met
7. Each person is kept informed at all stages of the decision making process concerning their complaint and the reasons for those decisions.	Partly met
8. Service providers inform each person of their right to complain to an external body.	Gap

Practice requirement 4.2:

Each person is provided with information and support to make a complaint.

Practice elements	JAS-ANZ mapping result
9. Each person has continuous and easy access to meaningful and culturally relevant information about the service provider's complaint policy and processes.	Gap
10. Each person has the opportunity to have a chosen support person such as an advocate to assist or represent them during the process.	Gap
11. Each person making a complaint is supported by the service provider, in a way which reflects their individual, cultural and linguistic needs to assist them to understand and participate in the complaint handling process.	Gap
12. Each person determines how, when and where the complaint will be made.	Partly met
13. Each person has the opportunity to nominate the person they want at the service as the key contact regarding the complaint.	Gap

JAS-ANZ mapping of ISO 9001 against NSW DSS

Practice requirement 4.3:

Each service provider has the capacity and capability to handle and manage complaints.

Practice elements	JAS-ANZ mapping result
14. Service providers have a written complaints policy and associated processes which reflect relevant legislation, standards and sector policy.	Meets NSW DSS
15. Service providers ensure that policies and processes include ways of responding to the cultural and linguistic needs of individuals.	Gap
16. Staff and volunteers are trained in complaint handling and demonstrate understanding and capacity to implement complaint handling.	Partly met
17. Service providers record and analyse trends from complaints to drive organisational policy development and continuous improvement.	Meets NSW DSS
18. Service providers support each person to participate in the review and development of local complaint handling policy and processes and report outcomes to them and their families, carers or advocates.	Partly met
19. Board and/or management committee meetings should include a standing agenda item on complaint handling, with trends presented and implications for service planning discussed.	Meets NSW DSS
20. Service providers need to be aware that some complaints need to be managed in a particular way, either because the person making a complaint has specific rights of review or because the complaint includes allegations that must be reported to an external body. For example, criminal allegations should be reported to the police.	Gap
21. Service providers inform each person of their right to make a complaint (where relevant) to the Ombudsman about the provision of a service by a service provider under the <i>Community Services (Complaints, Review and Monitoring) Act 1993 (NSW)</i> .	Partly met

NSW Disability Services Standard 5: Service access

JAS-ANZ Analysis of ISO 9001

The ISO 9001 provides a broad framework for a sound quality management system that incorporates a customer focus. As such, it lacks the necessary specificity to meet all of the elements of the NSW DSS. Given the broad nature of the ISO standards, the target group is not specific to people with a disability.

The first set of practice elements for NSW DSS 5: Service access requires service providers to have information about their services available to clients. ISO 9001 Clause 5.2 (Customer Focus), ensures that customer requirements are determined and are met with the aim of enhancing customer satisfaction. ISO 9001 Clause 7.2.3 (Customer Communication) ensures that information is communicated effectively with customers in relation to product (service) information, enquiries etc. ISO 9001 Clauses 8.5.2 (Corrective action) and 8.5.3 (Preventive action), meet the responsive and proactive requirements of NSW DSS 5 practice element.1. ISO 9001 Clause 7.2.1 (Determination of the requirements related to the product) requires organisations to determine requirements specified by the customer, including the requirements for delivery and post-delivery activities, requirements not explicitly stated by the customer but considered necessary, statutory and regulatory requirements applicable to the product, and any additional requirements considered necessary by the organisation. However, there is no reference to information being available in accessible formats or communication strategies for people with culturally diverse needs or disability.

The second set of practice elements for NSW DSS 5: Service access, calls for service providers to have processes for service access clearly defined. As above, ISO 9001 Clause 7.2.1 (Determination of the requirements related to the product) requires organisations to determine requirements for delivery and post delivery of service activities and Clause 7.1 (Planning of product realization) asks organisations to plan these activities as a requirement, resulting in the output being the organisations operating methods. Additionally, ISO 9001 Clause 7.2.2 (Review of requirements related to the product) ensures that policies, procedures and information are regularly reviewed along with Clause 8.4 (Analysis of data) and ISO 9001 Clause 8.5.1 (Continual improvement). However, there is no specific requirement to ensure that processes are easy to understand and that people are treated fairly. Similarly, there is insufficient direct mapping to ensure that people with a disability, families and carers are included in the review of documentation such as policies and procedures. to identify and minimise barriers to fair and equal access to services.

The third set of practice elements for NSW DSS 5: Service access calls for service providers to cooperate with other organisations to increase support options. ISO 9001 Clause 7.2.1 (Determination of the requirements related to the product) outlines the requirements that must be determined by the

organisation. However, this does not indicate understanding of the broad range of supports and services available to meet the needs of the NSW DSS target group and stakeholders, or ensure service providers work with community and other stakeholders to maintain referral services and community engagement. ISO 9001 Clause 7.2.3 (Customer communication) covers the requirements for consumer communication related to feedback, enquiries and product information, but it is not specific to ensuring service providers when recommending / referring to other services, provide information and support to the target group.

Based on this analysis, NSW DSS 5: Service access practice element 1 is met.

NSW DSS 5: Service access practice elements 2, 3, 4, 5, 6, 7 and 8 are partial matches.

There were no gaps for this standard.

JAS-ANZ mapping of ISO 9001 against NSW DSS

Practice requirement 5.1:

Service providers make information available about their services.

Practice elements	JAS-ANZ mapping result
1. Service providers are both proactive and responsive in providing people with a disability, their families and carers information about the features and capacity of the services they offer.	Meets NSW DSS
2. Service providers' information about their services is in formats that can be readily accessed and easily understood by the diverse mix of people within their community.	Partly met
3. Service providers use communication strategies that enable people with cognitive and/or sensory needs and diverse cultural styles to know how to access the service.	Partly met

Practice requirement 5.2:

Service providers have clearly defined processes to access services.

Practice elements	JAS-ANZ mapping result
4. Service providers develop and apply easy to understand, consistent and transparent access processes so that each person is treated fairly and according to their assessed need.	Partly met
5. Service providers regularly review their information, policies and practices for service access in consultation with people with a disability, their families and carers to identify and minimise barriers that may impact on a person's fair and equal access to services.	Partly met

Practice requirement 5.3:

Service providers' work with other organisations to increase each person's support options.

Practice elements	JAS-ANZ mapping result
6. Service providers understand the broad range of supports and services available to meet the needs of people with a disability, their families and carers in the community.	Partly met
7. Service providers work with local community and other mainstream and specialist organisations to maintain community engagement and referral networks.	Partly met
8. Service providers provide information and support to the person when recommending or referring other services or activities.	Partly met

NSW Disability Services Standard 6: Service management

JAS-ANZ Analysis of ISO 9001

ISO 9001 is an international standard outlining quality management requirements for organisations providing 'products'. Where applicable, a 'product' may also be a service. Given the broad nature of the ISO standards, the target group is not specific to people with a disability.

NSW DSS 6: Service management practice requirement 6.2 is largely met apart from accessibility to stakeholders, the involvement of people with a disability in overall service planning, and community engagement with business planning.

NSW DSS 6: Service management practice requirement 6.1 broadly matches ISO 9001 Standard 8 (Measurement, analysis and improvement).

ISO 9001:2008 is a generic standard, however if applied correctly, and with the focus being disability service rather than 'product', it would generally meet NSW DSS 6: Service management. ISO 9001 references to management have been interpreted by JAS ANZ to cover the governing body. Additionally ISO 9001 has a strong commitment to continuous improvement, involvement of general stakeholders and compliance requirements.

Based on this analysis, NSW DSS 6: Service management practice elements 1, 2, 3, 4, 5, 6, 7, 8, 10, 11, 13, 16, 17, 18, 19, 20 and 21 are met.

NSW DSS 6: Service management practice elements 9, 12, 14 and 15 are partial matches.

JAS-ANZ mapping of ISO 9001 against NSW DSS

Practice requirement 6.1:

Each person receives quality services which are effectively and efficiently governed.

Practice elements	JAS-ANZ mapping result
1. The corporate governance body of an organisation is comprised of members who possess or can acquire appropriate knowledge, skills and training to fulfil all responsibilities which are clearly defined, documented and disclosed.	Meets NSW DSS
2. The corporate governance body of an organisation is equipped and fulfils all responsibilities for strategic planning and developing visionary direction for the organisation based on person centred approaches and future industry needs.	Meets NSW DSS
3. The corporate governance body of an organisation is able to exercise objective and independent judgement on corporate affairs which is separate to decision making on operational matters.	Meets NSW DSS
4. The corporate governance body of an organisation is accountable to stakeholders and demonstrates high ethical standards acting in their best interests.	Meets NSW DSS
5. The corporate governance body of an organisation monitors the effectiveness of the organisation's governance policies and practices and makes changes as needed.	Meets NSW DSS
6. The corporate governance body of an organisation ensures the integrity of the organisation's accounting and financial reporting systems and that appropriate systems of control are in place for risk management, financial and operational control (including fire safety and appropriate insurance), and compliance with legislation and funding requirements.	Meets NSW DSS
7. The corporate governance body of an organisation ensures the organisation has a quality management system and internal controls are in place to comply with relevant standards.	Meets NSW DSS
8. The corporate governance body of an organisation uses feedback from stakeholders and the community to inform and develop continuous improvement strategies.	Meets NSW DSS
9. The corporate governance body of an organisation regularly reviews its policies to reflect contemporary practice and feedback from people with a disability and other key stakeholders.	Partly met
10. The corporate governance body of an organisation recruits, supports and monitors senior management positions in line with the vision and values of the organisation and probity requirements.	Meets NSW DSS
11. The corporate governance body of an organisation has strategies in place for communication with staff to promote continuous improvement and a collaborative, responsive organisation.	Meets NSW DSS

JAS-ANZ mapping of ISO 9001 against NSW DSS

Practice requirement 6.2:

Each person receives quality services that are well managed and delivered by skilled staff with the right values, attitudes, goals and experience.

Practice elements	JAS-ANZ mapping result
12. Service providers have written policies and associated processes which reflect relevant legislation, standards, funding requirements and sector policy that are accessible to all stakeholders.	Partly met
13. Service providers have processes to monitor compliance with relevant legislation and policy and to continuously improve organisational performance.	Meets NSW DSS
14. Service providers encourage and support people with a disability, their families and carers to participate in the planning, management and evaluation of the service.	Partly met
15. Service providers inform stakeholders how feedback has been used to improve service management and delivery.	Partly met
16. Service providers have a workforce planning and recruitment strategy in place to ensure the organisation has a skilled, engaged and responsive workforce.	Meets NSW DSS
17. Service providers have processes in place for succession planning of leadership staff and other key positions.	Meets NSW DSS
18. Recruitment practices meet all probity requirements and ensure the right workforce is recruited and maintained to deliver the range of services provided by the organisation to meet service delivery outcomes.	Meets NSW DSS
19. Service providers provide regular staff and volunteer training, support and supervision to flexibly meet the needs of people they support.	Meets NSW DSS
20. Service providers create and maintain accessible and safe physical environments in accordance with all fire safety requirements and occupational health and safety legislative and policy requirements.	Meets NSW DSS
21. Service providers implement the organisation's strategic and business plans utilising good practices including community engagement initiatives.	Meets NSW DSS