



HUMAN SERVICES SCHEME PART 2

ADDITIONAL COMMON REQUIREMENTS FOR BODIES CERTIFYING HUMAN SERVICES IN QUEENSLAND

HSQF Scheme

Issue 9, 13 September 2021

Authority to Issue

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0 Introduction

0.1 Foreword

This scheme provides a mechanism for monitoring the quality and safety of services being delivered by human service organisations in areas such as child and family, community services, disability, and some health care.

This scheme has been developed by JAS-ANZ in consultation with relevant Queensland Government departments.

The Department of Seniors, Disability Services and Aboriginal and Torres Strait Islander Partnerships acts as contact point in matters relating to this scheme, and thus serves as the current Queensland Government Scheme Administrator (QGSA).

The *Human Services Scheme* (HS Scheme) (Part 1) – *Common requirements for bodies certifying Human Services* and this HSQF Scheme (Part 2) – *Additional requirements for bodies certifying Human Services in Queensland*, and the schedules to Part 2 together set down the requirements for certification bodies (CBs) seeking JAS-ANZ accreditation to certify human service organisations whose services satisfy the requirements of this scheme.

If there is a conflict between HS Part 1 and HAS Part 2, the requirements in Part 2 shall take precedence. If there is a conflict between a schedule and HS Part 2, the requirements in the schedule shall take precedence.

0.2 Transition policy for human service organisations

CBs shall follow the requirements in *HSQF—Transition Process for certification to the Human Services Quality Standards* available on the JAS-ANZ Shared CAB portal.

1 Scope

No additional requirements.

2 Normative references

Child Protection Act 1999

Domestic and Family Violence Protection Act 2012

Human Services Quality Framework (HSQF) and any current related supplementary documents (available on the HSQF website)

Human Services Quality Framework User Guide – Certification and any current related supplementary documents (available on the HSQF website)

Human Services Quality Standards 2012 (HSQS)

HSQF—Audit Report Template

HSQF—Notifiable Issues

HSQF—Providing opportunities for participation by people using services

IAF MD 1 - IAF Mandatory Document for the Audit and Certification of a Management System Operated by a Multi-Site Organization (*latest version as applied*)

IAF MD 2 - IAF Mandatory Document for the Transfer of Accredited Certification of Management Systems (*latest version as applied*)

Information Privacy Act 2009

ISO 9001 Quality management systems – Requirements

HSQF—Transition Process for certification to the Human Services Quality Standards

Working with Children (Risk Management and Screening) Act 2000

3 Terms and definitions

P2_3.1 The following definitions also apply to this scheme:

Audit team	An audit team may consist of one or more persons and must include an audit team leader. Where the audit team consists of one person, that person shall meet all the audit team requirements. The audit team must comprise two or more persons if the audit duration is 6 days or more.
Certification standards	The HSQS and any other standards which a human service organisation seeks certification to where JAS-ANZ accreditation criteria apply, such as ISO 9001.
Certification date	The date certification is granted.
Department	The relevant department funding the service stream and/or service type in scope for certification.
Funded by	Includes funding under a service agreement or other mechanisms such as: individual client agreement, fee-for-service, or other contract/s.
Human service organisation	Has the same meaning as ‘client’ in HS Part 1.
Multi-stream human service organisation	A human service organisation delivering services funded by more than one department, and/or under more than one service stream funded by one or more departments.
Ongoing support	Support that is or has been ongoing, regardless of frequency. One-off phone calls or requests for information where consumer contact details have not been recorded are not ongoing support.
Person using services	Has the same meaning as ‘consumer’ in Part 1.
Queensland Government Scheme Administrator (QGSA)	The department responsible for administering the scheme, sometimes acting on behalf of another department subject to agreements between departments.
Service stream	Broad categories of service delivery in-scope of the HSQF, such as but not limited to: Community Services, Child and Family, Domestic and Family Violence.
Service type	A care, support activity, class of supports or service provided by a human service organisation approved or required by a department to comply with the HSQF. Service types are normally categorised by the department funding the service, service stream and activity. A list of in-scope service types is outlined in the <i>Human Services Quality Framework</i> and any current related supplementary documents (available on the HSQF website).
Working with Children Check	In Queensland, under the <i>Working with Children (Risk Management and Screening) Act 2000</i> , certain people working with children are required to undertake criminal history screening and receive a positive prescribed notice (blue card,) or an exemption notice from the responsible Queensland Government agency.

4 General requirements

4.1 Legal and contractual matters

4.1.2 Certification agreement

P2_4.1.2.1 The certification agreement shall also enable the CB to conduct an out of cycle audit at any time if requested by the QGSA.

P2_4.1.2.2 The CB shall also require the human service organisation to inform it when it ceases to provide its services for any reason (e.g. it ceases to have persons using its services).

4.5 Confidentiality

P2_4.5.1 The CB shall also treat information in accordance with the *Child Protection Act 1999*, the *Information Privacy Act 2009* and the *Domestic and Family Violence Protection Act 2012*.

P2_4.5.2 The CB can ask the human service organisation to de-identify records (including the files of people using services) to allow sampling if the need arises, for example, to investigate complaints or when there is a lack of consent for file access.

5 Structural requirements

No additional requirements

6 Resource requirements

6.1 Certification body personnel

6.1.1 General

P2_6.1.1.1 The CB shall have documented criteria and records to demonstrate the cultural competence of all audit team members undertaking audits of:

- clients delivering human services to Aboriginal peoples and Torres Strait Islander peoples;
- clients delivering human services to people from culturally and linguistically diverse backgrounds.

P2_6.1.1.2 All audit team members shall undertake the training specified by the QGSA, before auditing to the certification standards unsupervised. The CB may contact the QGSA to obtain details of the training.

P2_6.1.1.3 All audit team members shall undergo a National Police Check (Australia) at least every three years, and where required, comply with the requirements of the Working with Children Check.

P2_6.1.1.4 The CB shall provide appropriate training and support to all audit team members to function effectively in the audit team. A supervising auditor or audit team leader shall always provide ongoing supervision to maintain the necessary level of communication and support to technical expert(s).

P2_6.1.1.5 The CB shall evaluate the competence of any technical expert(s) to interview the persons using services without other members of the audit team present, before authorising them to so do. The CB shall keep records of this evaluation.

7 Process requirements

7.3 Application review

- P2_7.3.1 Where a human service organisation seeks to be certified to the HSQS (for this scheme) and another certification standard, it shall be audited in accordance with the separate accreditation requirements of the HSQS and the other certification standard.
- P2_7.3.2 Where a site only offers services under one scheme, then the CB shall only apply the requirements of that scheme.
- P2_7.3.3 Where a site provides services under multiple schemes, then the CB shall split the persons using the service into separate populations for each scheme, sampling each population according to the rules of the relevant scheme.
- P2_7.3.4 In any case, when auditing a human service organisation, all specific requirements for each certification standard applied for shall be addressed.
- P2_7.3.5 The CB shall notify the QGSA in writing within 25 working days of:
- a) contracting to provide certification services to a human service organisation, and
 - b) the proposed date(s) of a scheduled audit.

7.4 Evaluation

- P2_7.4.1 When planning an audit, the CB shall ask the human service organisation about any changes to sites, outlets, services, or the number of people using services, to ensure it has allocated enough time and resources for the audit.
- P2_7.4.2 The CB shall consider any information provided by the QGSA before and during an audit, including any concern/s of the relevant department that may require special attention during the audit.
- P2_7.4.3 If the CB identifies a notifiable issue it shall follow the process documented in *HSQF—Notifiable Issues* available from the JAS-ANZ website. In any case, certification shall not continue until advised by the QGSA.
- P2_7.4.4 Auditors shall use the *Human Services Quality Framework User Guide - Certification* and any current related supplementary documents (available on the HSQF website) when assessing compliance with the HSQS.
- P2_7.4.5 Where a human service organisation has failed to demonstrate compliance with the HSQS, the CB shall notify the QGSA as soon as possible of the details of any major nonconformity identified by the CB. This includes where the human service organisation is undergoing an initial certification audit.
- P2_7.4.6 CBs shall use either the *HSQF—Audit Report Template*, available on the JAS-ANZ 'Shared CAB's Resources' portal, for written reports of certification/recertification and maintenance audits, or their own report templates, providing they address all the requirements in the *HSQF—Audit Report Template*. Reports of follow-up audits or re-audits shall be documented according to the applicable requirements in Part 1.
- P2_7.4.7 The CB shall provide the draft written report, including agreed proposed corrective actions (if applicable) to the human service organisation for comment/endorsement within:
- a) 25 working days of the completion of the on-site component of the audit for multi-stream or multiple site and/or outlet human service organisations;

- b) 25 working days for multi-stream single site and/or outlet human service organisations, and
- c) 10 working days for single stream and single site and/or outlet human service organisations.

- P2_7.4.8 The CB shall allow the human service organisation 10 working days from receiving the draft written report in which to provide a response to the CB.
- P2_7.4.9 The CB shall provide the final written report (incorporating any amendments) to the human service organisation and the QGSA within 5 working days of the certification decision.
- P2_7.4.10 If an auditor considers that a human service organisation's processes for periodically reviewing compliance with the prescribed requirements of relevant legislation, regulation or policy are inadequate, the auditor shall progress the issue as a major nonconformity to HSQS Standard 1.1, as well as to any other relevant standard indicator.
- P2_7.4.11 In addition to raising any applicable major nonconformities against individual indicators, the CB shall raise a major nonconformity where there are:
- a) three or more nonconforming indicators in the same standard, or
 - b) three or more nonconforming standards overall.
- P2_7.4.12 The CB's procedures shall ensure that in the instance of a nonconformity or major nonconformity:
- a) the CB shall discuss any findings of nonconformity with the human service organisation at the closing meeting and provide written notification of nonconformities to the organisation **as soon as is practicable** after the closing meeting;
 - b) the CB shall require the human service organisation to present a corrective action plan to it within 5 working days of written notification of the nonconformity;
 - c) the CB shall undertake a desktop review of the implemented corrective actions within three months and shall, if necessary, conduct an on-site follow-up for a major nonconformity;
 - d) notifiable issues or other serious matters would normally require an on-site follow-up or re-audit within three months;
 - e) major nonconformities shall be downgraded or closed within three months of initial written notification of the nonconformity, or prior to the certification expiry date. (For a certified human service organisation, failure to downgrade or close a major nonconformity within three months shall result in automatic suspension of certification);
 - f) nonconformities shall be closed out within 12 months of initial written notification at a follow-up or re-audit; otherwise the nonconformity shall be escalated to a major nonconformity;

- g) if a nonconformity has been escalated to a major nonconformity, failure to close out the major nonconformity within 3 months shall result in automatic suspension of certification (i.e. a nonconformity that has been escalated to a major nonconformity shall not be downgraded back to a nonconformity);
- h) if a major nonconformity has been downgraded to a nonconformity, failure to close out the nonconformity within 12 months from the date of issue of the original finding shall result in automatic suspension of certification (i.e. a major nonconformity downgraded to a nonconformity shall be closed out within the remaining nine months and not be escalated to a major nonconformity again), and
- i) where the certification is to the HSQS plus the additional requirements of any other certification standard, the CB shall follow-up on the other certification standard's related findings under the relevant certification standard's accreditation requirements.

P2_7.4.13 If the CB raises a major nonconformity, it shall investigate whether a systemic failure exists which could affect delivery of services funded by more than one department.

If the CB is confident that the nonconformity is restricted to services funded by only one department, it may allow the human service organisation to deal with the major nonconformity by reducing its certification scope to exclude all services funded by that department.

This action is a last resort and is only available to the human service organisation if it cannot close the major nonconformity within 3 months, or prior to the certification expiry date, as applicable.

P2_7.4.14 The CB shall conduct a follow-up audit in the most cost-effective manner that ensures that major nonconformities have been properly downgraded or closed. This may entail a desktop review of documentation, supplemented by telephone interviews of staff and people using services, to verify that the HSQS have been met.

P2_7.4.15 Where the CB has raised a major nonconformity or nonconformity, it shall audit the relevant standard at the next scheduled audit (maintenance or recertification) to ensure that the processes developed as part of the corrective action plan have been put into practice.

P2_7.4.16 The CB shall send a copy of the new certificate to the QGSA when it transfers certification of a human service organisation from another CB, together with a copy of the associated report of the on-site visit. If the decision to transfer certification was not based on a site visit, the CB shall provide the following information to the QGSA:

- a) the date of the review leading to the decision to transfer certification;
- b) the name of the previous CB, and
- c) the date of the next scheduled audit.

Note: the requirements of HS Part 1 and IAF MD 2 also apply for transferring certification.

7.7 Certification documentation

P2_7.7.1 Certification documents shall include the name of the human service organisation's legal entity, and may also include the registered trading name/s. In all cases, certification documents shall clearly show that the **services** delivered by the human service organisation are certified, not only the management system.

- P2_7.7.2 Certification documents shall state the service type/s for which the human service organisation is certified, sorted by the department funding the service type and then the service stream.
- P2_7.7.3 The CB shall issue a single certificate to cover all certified services delivered by the human service organisation.
- P2_7.7.4 The date of recertification shall not normally be more than three months prior to the date of the expiry of initial certification or recertification or extend one month beyond the expiry date.
- P2_7.7.5 The CB should maintain the recertification date as the three-year anniversary of the previous certification or recertification date.
- P2_7.7.6 If the CB considers varying the certification cycle, it shall first seek agreement from the QGSA. If agreed by the QGSA, the CB shall maintain the revised certification cycle.
- Reasons for variation may include transition of new service types into the scope of certification, alignment of multiple certifications, or in the event of a natural disaster or other unforeseen events.
- P2_7.7.7 CBs shall send a copy of the current certification documentation to the QGSA. Certification documentation, including the JAS-ANZ Certified Organisations Register, shall include all service outlets. If advised by the human service organisation for specific services, certification documentation shall not identify the street address or other details which may reveal the physical location of outlets (e.g. supported accommodation sites that are people's homes).
- ## 7.9 Surveillance
- P2_7.9.1 The three-year certification cycle shall commence from the certification date with at least one mid-cycle maintenance audit and a recertification audit at least three months before certification expires.
- P2_7.9.2 CBs should plan the audit cycle so that on-site visits are scheduled as close as possible to 18 months apart.
- P2_7.9.3 Where the CB has concerns about the human service organisations' capacity to meet the HSQS on an ongoing basis, the CB may seek agreement from the QGSA to increase or vary the audit frequency.
- P2_7.9.4 Activities at maintenance audits shall also include:
- a) auditing core HSQS 1, 3 and 4, and
 - b) auditing at least one other standard, chosen according to the results of the previous audit, complaints or significant change, with the CB justifying the choice in the audit report.
- P2_7.9.5 CBs may split the mid-cycle maintenance audit to align with annual audits required under other certification standards, if requested by the human service organisation.
- P2_7.9.6 CBs may divide minimum activities required at maintenance audits during split audits (i.e. two standards per annual maintenance audit) to ensure all core HSQS and one other standard have been audited prior to recertification.

7.11 Termination, reduction, suspension or withdrawal of certification

P2_7.11.1 Human service organisations may temporarily lose all persons using services, and therefore may not meet all the requirements of the certification standards at their next audit. The CB shall allow the human service organisation to voluntarily suspend its certification while not in receipt of departmental funding and/or without persons using its services. The human service organisation may resume certification when it regains departmental funding and/or has persons using its services. The CB may withdraw certification if requested by the human service organisation.

P2_7.11.2 If a human service organisation delivers certified services funded by more than one department, the CB shall allow it to deal with a major nonconformity if confirmed as confined to services funded by only one department, by removing all services funded by that department from the scope of certification.

This action is a last resort and is only available to the human service organisation if it cannot close the major nonconformity within 3 months, or prior to the certification expiry date, as applicable.

P2_7.11.3 If the certification is suspended, the CB shall ensure the actions required to achieve full conformity occur within six months of the decision to suspend, or certification shall be withdrawn.

7.12 Records

P2_7.12.1 The CB shall record how it ensured people using services or their guardians provided their consent for the auditor to access their files; or where this was not possible or practicable (e.g. the person using services could not provide the consent and had no guardian to provide the consent), how the human service organisation allowed access to the files of people using services in accordance with applicable legislation.

7.13 Complaints and appeals

P2_7.13.1 The CB shall notify the QGSA within 48 hours if a complaint is raised or an appeal is lodged by a human service organisation as a result of an audit or certification decision.

8 Management system requirements

No additional requirements

Annex A – Audit duration

- P2_A.1 CBs shall ensure that audit duration is adequate to allow auditors to do horizontal and vertical analyses (i.e. sample across all service types and drill down into each of those service types) of the human service organisation. This should include each service type within each separate service stream, funded by each department, across service locations. While multi-service stream organisations will have a level of efficiency which will enable audit duration to be reduced, audit duration should also reflect the size and diversity of the human service organisation.
- P2_A.2 The audit duration shall take account of the type and number of services delivered by the human service organisation.
- P2_A.3 The CB shall ensure the audit duration is adequate to conduct an effective audit, which in turn allows a valid certification decision to be made; but is not excessive or prohibitive for the human service organisation in terms of time and cost.
- P2_A.4 When, in exceptional circumstances, technical experts work alone, that time shall not be counted as contributing to the audit duration, unless the technical expert is also a qualified auditor or audit team leader.

Note: where certification also includes any other certification standard, the CB shall also follow processes for determining audit durations under the relevant schemes/standards.

Annex B – Certification of clients with multiple sites and/or outlets

B.2 Application

P2_B.2.1 Human service organisations with multiple sites and/or outlets include all organisations where services are delivered at more than one site/outlet, regardless of whether services provided at that site/outlet are funded by one or more departments or fall within one or more funding streams.

Note: The requirements of HS Part 1 Annex B and IAF MD 1 also apply, except as otherwise indicated in this Annex.

B.5 Sampling

B.5.1 Methodology

P2_B.5.1.1 The selection criteria should also include sites and/or outlets representing service activities and the complexity of the activities undertaken.

P2_B.5.1.2 The CB shall consider the human service organisation's structure when determining the sample. The sample shall adequately represent urban, regional and rural/remote locations.

Note: where certification also includes another certification standard, the CB shall also follow processes for sampling under the relevant schemes/standards.

B.5.2 Size of sample

P2_B.5.2.1 Each service type funded by a department and within each service stream is considered a separate population. The CB shall apply the sampling formula to each population, except that it shall sample all service streams and types funded by each department at every audit.

P2_B.5.2.2 Where services are delivered directly from a central office, the population of persons using the services shall be treated as a separate site.

B.5.3 Audit duration

P2_B.5.3.1 Reductions (but not more than two days) can be applied to reflect the effectiveness of the human service organisation's self-assessment processes, and evidence submitted verifying compliance with the certification standards. The size of outlets and the combination and complexity of the services provided are other factors which may be considered.

P2_B.5.3.2 The audit duration may be reduced where other JAS-ANZ accredited certification is held which covers all the human service organisation's sites and/or outlets.

Note: audit duration requirements in Annex A also apply.

Annex C – Audit planning and consumer sampling

C.1 Consumer sampling principles

P2_C.1.1 Except where instructed otherwise by the QGSA in the interests of specific consumers using specific services, the CB shall sample people using services and receiving each different type of support service delivered by the human service organisation. The CB shall ensure organisations try to engage as many people using services as possible to do face-to-face interviews (where appropriate).

P2_C.1.2 CBs shall sample people using services who have received ongoing support, where the human service organisation has contact details. CBs may use other innovative ways to involve people or verify information where support is not ongoing.

Where the CB deems the total number of consumers receiving a service over the last 12 months per service type to be excessive, the CB may determine an appropriate sampling approach.

P2_C.1.3 The sample shall also reflect the full range of people using services and the programs offered by the service type outlet.

Noting that consumers have the right not to be involved, the CB should aim for a minimum of 5, and a maximum of 20 consumers per site.

Where a single site human service organisation (or any site of a multi-site human service organisation) delivers multiple service types, the CB shall always sample consumers from every service type. The time spent auditing the different service types (and hence the number of consumers sampled per type), should be commensurate with the number of consumers for each service type.

In extenuating circumstances, the sample can be extended or reduced. However, in all cases the CB shall justify the sample size in the audit report.

Note: where certification also includes any other certification standard, the CB shall also follow processes for determining consumer sampling under the relevant scheme/standards.

P2_C.1.4 When planning an audit, the CB shall also refer to the *HSQF—Providing opportunities for participation by people using services* for more information on methods of participation.

P2_C.1.5 Feedback provided by people using services shall remain anonymous and will be de-identified in the audit report. Where a notifiable issue is identified, specific information may be reported to the human service organisation, the QGSA and the person using the service through the process specified in the *HSQF—Notifiable Issues*.

C.2 Consumer file sampling

P2_C.2.1 Where consumer files exist, the CB shall aim to review a minimum of the square root of the number of files for consumers at each outlet, rounded up to the next whole number, at every audit. The CB shall always sample files from every service type. The number of files sampled per type should be proportional to the number of consumers for each service type. Where a mid-cycle maintenance audit is split into two visits, the sample may be split across those two surveillance activities. Where the CB deems it necessary, the sample can be extended or reduced, and the CB shall justify the sample size in the audit report.

P2_C.2.2 Where human service organisations deliver services where no consumers are attached to the organisation, sampling consumer files is not applicable for those services. In this case CBs shall sample whatever documents or records are available to cross-check information gathered in interviews of external stakeholders.

Annex D – Code of ethics for certification in the human services sector

No additional requirements



HSQF SCHEME PART 2

SCHEDULE 1

SPECIFIC REQUIREMENTS FOR BODIES CERTIFYING HUMAN SERVICES
FUNDED BY THE DEPARTMENT OF CHILDREN, YOUTH JUSTICE AND
MULTICULTURAL AFFAIRS

Issue 3, 13 September 2021

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Schedule 1: Specific requirements for bodies certifying human services funded by the Department of Children, Youth Justice and Multicultural Affairs

0 Introduction

0.1 Foreword

Schedule 1 - *Specific requirements for bodies certifying human services funded by the Department of Child Safety, Youth and Women* forms part of HSQF Scheme (Part 2) – *Additional requirements for bodies certifying Human Services in Queensland*.

Schedule 1 has been jointly developed by JAS-ANZ, the Queensland Government Department of Communities, Disability Services and Seniors, and the Department of Children, Youth Justice and Multicultural Affairs.

If there is a conflict between Part 2 and Schedule 1, the requirements in Schedule 1 shall take precedence.

For brevity, if there are no additional requirements in Schedule 1 under a heading which appears in Part 2, the heading is not repeated in Schedule 1.

3 Terms and definitions

P2_S1_3.1 The following definitions also apply to Schedule 1:

Care service	See Child Protection Placement Services.
Child protection placement services	Also referred to as child safety care services, these are services funded by the Department of Children, Youth Justice and Multicultural Affairs to provide care to children and young people in the custody or guardianship of the Director-General of the Department of Children, Youth Justice and Multicultural Affairs. There are two models of care – family based (includes intensive foster care, intensive foster care with direct care, foster and kinship care and foster and kinship care with direct care) and non-family based care (includes safe houses, supported independent living, therapeutic residential care and residential care).
Department	The Queensland Government Department of Child Safety, Youth and Women
Fee-for-service child protection placement service	The department funds some child protection placement services under an individual care agreement for a specific child rather than a service agreement. Placements under this arrangement are often short term and this can lead to periods of time where the service does not have current placements.
Licensing	The Department licenses care services to ensure that the care provided to children and young people in the custody or guardianship of the Director-General meets the Statement of Standards. The licensed care sites and outlets delivered by the human service organisation are individually listed on the organisation’s licence.
Statement of Standards	The standards of care outlined in section 122 of the <i>Child Protection Act 1999</i> .

Schedule 1: Specific requirements for bodies certifying human services funded by the Department of Children, Youth Justice and Multicultural Affairs

4 General requirements

4.1.2 Certification agreement

P2_S1_4.1.2.1 The CB shall also confirm with the department the sites and outlets in-scope of licensing for human service organisations delivering child protection placement services.

P2_S1_4.1.2.2 The CB shall not require human service organisations funded by the department to provide fee-for service child protection placement services to children in care to inform the CB when they cease to provide fee-for service child protection placement services to children in out-of-home care.

Note: The department undertakes regular monitoring of compliance with legislative requirements by care services listed against a licence. The CB may request copies of the inspection reports and any associated compliance actions from a care service listed against a licence.

4.5 Confidentiality

P2_S1_4.5.1 The CB shall obtain the department's consent before disclosing information about a child in the custody or guardianship of the Director-General of the department.

P2_S1_4.5.2 The CB can disclose to the department any concerns about a child in the custody or guardianship of the Director-General of the department, without seeking consent from the human service organisation or child.

6 Resource requirements

6.1.1 General

P2_S1_6.1.1.1 Before conducting an audit of child protection placement services, all audit team members, including any technical experts or trainee auditors, shall demonstrate that they meet the requirements of the Working with Children Check.

7 Process requirements

7.4 Evaluation

P2_S1_7.4.1 Where an audit report covers services in-scope of licensing, CBs shall ensure that the report addresses the mandatory child protection placement service requirements listed in the *Human Services Quality Framework User Guide – Certification*.

P2_S1_7.4.2 For human service organisations delivering child protection placement services in-scope of licensing, the CB shall send the draft Stage 2 audit report to the QGSA, in addition to the final audit report. The QGSA will advise the CB within 10 working days from receipt of the draft Stage 2 audit report where the department requires further information on a specific issue for the purpose of informing a regulatory licensing decision. The CB shall provide the requested information in the final report to clarify any concerns.

7.6 Certification decision

P2_S1_7.6.1 At maintenance or surveillance audit, where human service organisations providing fee-for-service child protection placement services do not have any current placements, certification shall continue until the next recertification audit.

Schedule 1: Specific requirements for bodies certifying human services funded by the Department of Children, Youth Justice and Multicultural Affairs

7.7 Certification documentation

P2_S1_7.7.1 Certification documentation, including the JAS-ANZ Certified Organisations Register, shall identify the inclusion of, but shall not identify the address or any other details, which may reveal the physical location of any women's shelter or outlets where children and young people in a child protection placement service reside.

7.9 Surveillance

P2_S1_7.9.1 Where the human service organisation provides child protection placement services in addition to other human services, the CB shall advise the QGSA if it intends to split the audit following a request by the human service organisation; including the proposed dates of the first annual audit, the HSQS to be audited and sites/outlets to be included.

7.11 Termination, reduction, suspension or withdrawal of certification

P2_S1_7.11.1 At recertification, where human service organisations providing fee-for-service child protection placement services do not have any current placements, the scope of certification shall be reduced to remove that service type.

Annex B – Certification of clients with multiple sites and/or outlets

B.5 Sampling

B.5.2 Size of sample

P2_S1_B.5.2.1 There are two models of service delivery for child protection placement services: non-family based and family-based care; which the CB shall sample as separate populations. Each service type delivered under these models is also considered to be a separate population and shall be sampled separately. In any case, the CB shall ensure that the sample adequately represents all service models and service types delivered by the human service organisation.

P2_S1_B.5.2.2 For human service organisations which deliver non-family-based child protection placement services, the **CB shall audit 100%** of outlets within the scope of licensing at certification and recertification audits. However, the CB may also sample outlets at maintenance audits.

Annex C – Audit planning and consumer sampling

C.1 Consumer sampling principles

P2_S1_C.1.1 Children and young people residing in child protection placement services or their families shall not be directly approached for feedback. For foster/kinship care services, the carers are the people using services and they shall be included in the direct feedback.

P2_S1_C.1.2 Non-family based child protection placement service sites and outlets are the child's home and the CB shall show appropriate respect in arranging visits, and seek the child's permission (where relevant and required) to enter the child's bedroom to assess conformity to the certification standards. If a child is not available to grant permission, the CB shall seek permission from the service.

Schedule 1: Specific requirements for bodies certifying human services funded by the Department of Children, Youth Justice and Multicultural Affairs

C.2 Consumer file sampling

P2_S1_C.2.1 For children and young people placed in a child protection placement service, CBs shall sample files to ensure the service currently meets, and will meet in the future, the *Statement of Standards*. It is therefore directly related to the protection and wellbeing of children and young people.



HSQF SCHEME PART 2

SCHEDULE 2

SPECIFIC REQUIREMENTS FOR BODIES CERTIFYING HUMAN SERVICES
FUNDED BY THE DEPARTMENT OF SENIORS, DISABILITY SERVICES AND
ABORIGINAL AND TORRES STRAIT ISLANDER PARTNERSHIPS

Issue 3, 13 September 2021

Authority to Issue

0 Introduction

0.1 Foreword

Schedule 2 - *Specific requirements for bodies certifying human services funded by the Department of Seniors, Disability Services and Aboriginal and Torres Strait Islander Partnerships* forms part of HSQF Scheme (Part 2) – *Additional requirements for bodies certifying Human Services in Queensland*.

Schedule 2 has been jointly developed by JAS-ANZ and the Queensland Government Department of Communities, Disability Services and Seniors.

If there is a conflict between Part 2 and Schedule 2, the requirements in Schedule 2 shall take precedence.

For brevity, if there are no additional requirements in Schedule 2 under a heading which appears in Part 2, the heading is not repeated in Schedule 2.

2 Normative references

Disability Services Act 2006

Instruction Note for Auditor - Restrictive Practices in Disability Services

3 Terms and definitions

P2_S2_3.1 The following definitions also apply to this scheme:

Department	The Queensland Government Department of Communities, Disability Services and Seniors
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4 General requirements

4.5 Confidentiality

P2_S2_4.5.1 The CB shall also treat information in accordance with the *Disability Services Act 2006*.

6 Resource requirements

6.1 Certification body personnel

6.1.1 General

P2_S2_6.1.1.1 For audits of organisations delivering disability services, the audit team shall include a person who understands a disability consumer's perspective and has demonstrated ability to communicate effectively with people with disability, their families and carers. For example:

- a) a person with disability;
- b) a family member or carer of a person with disability, and
- c) a person with at least 12 months' work experience in the disability sector.

Note: this person may be engaged as a technical expert, or if appropriately qualified, an auditor or audit team leader.

7 Process requirements

7.4 Evaluation

P2_S2_7.4.1 Auditors shall comply with *Instruction Note for Auditors - Restrictive Practices in Disability Services* when auditing human service organisations that apply restrictive practices under the Disability Services stream.

P2_S2_7.4.2 The CB will follow HSQF Part 2, when dealing with nonconformities and major nonconformities.



HSQF SCHEME PART 2

SCHEDULE 3

SPECIFIC REQUIREMENTS FOR BODIES CERTIFYING HUMAN SERVICES
FUNDED BY THE DEPARTMENT OF JUSTICE AND ATTORNEY-GENERAL

Issue 1, 13 September 2021

Authority to Issue

0 Introduction

0.1 Foreword

Schedule 3 - *Specific requirements for bodies certifying human services funded by the Department of Department and Attorney-General part of HSQF Scheme (Part 2) – Additional requirements for bodies certifying Human Services in Queensland.*

Schedule 3 has been jointly developed by JAS-ANZ, the Queensland Government Department of Seniors, Disability Services and Aboriginal and Torres Strait Islander Partnerships, and the Department of Justice and Attorney-General.

If there is a conflict between Part 2 and Schedule 3, the requirements in Schedule 3 shall take precedence.

For brevity, if there are no additional requirements in Schedule 3 under a heading which appears in Part 2, the heading is not repeated in Schedule 3.

3 Terms and definitions

P2_S3_3.1 The following definitions also apply to Schedule 3:

Department	The Queensland Government Department of Justice and Attorney-General
Specialist domestic and family violence (DFV) sector	Services and practitioners whose primary role is working with people who are experiencing or are at risk of experiencing DFV, or are perpetrators of DFV.
Technical expert	A support to the audit team that has at least two years' practice experience working in the specialist DFV sector, possesses the relevant qualifications for the role they are undertaking, and have a sound understanding of the role and responsibilities of a technical expert.

6 Resource requirements

6.1.2 Management of competence for personnel involved in the certification process

P2_S3_6.1.2.1 For audit teams undertaking audits of human service organisations delivering services in the Domestic and Family Violence (DFV) service stream, any audit team members engaged with that part of the audit must be able to demonstrate and maintain evidence of DFV competency through having completed DFV practice training developed for auditors as specified by the QGSA.

P2_S3_6.1.2.2 Where these competencies are not held by the audit team, then a technical expert may be used to supplement the audit team.

Annex B – Certification of clients with multiple sites and/or outlets

B.5.2 Size of sample

P2_S3_B.5.2.1 For human service organisations which deliver services in the DFV service stream across multiple sites and/or outlets (including perpetrator intervention services and women's shelters), the CB shall ensure that 100% of sites/outlets are sampled at least once during the three-year certification cycle.