

## Part A: Executive summary

### Introduction

This report describes the findings of the Team Leader Evaluator who visited Therapy Focus Inc on 29 March 2016 and completed a desktop audit, and collected additional materials for further remote auditing of Therapy Focus Inc's policies and procedures to assess compliance against the National Standards for Disability Services.

A preliminary meeting was held on 14 March 2016. An exit meeting was held on 10 May 2016.

The organisation uses the term 'people' to refer to people with disability, family member/s of people with disability, family, and carers. For the purposes of this report the term 'client' will be used to refer to service users.

**Note:** Under the Carer's Recognition Act 2004, a carer refers to a person who provides care or assistance to another person who is frail, has a disability, a chronic illness or a mental illness, without payment apart from a pension, benefit or allowance.

Service profile	
Service description	
The services provided	<p>The Disability Services Commission (the Commission) funds Therapy Focus to provide disability professional services.</p> <p>This includes:</p> <ul style="list-style-type: none"> <li>• Early childhood intervention</li> <li>• School aged services</li> <li>• Adult intervention</li> <li>• Community aids and equipment program</li> </ul>
The resources	<p>The Commission funding for the financial year 2015 to 2016 is \$15,700,000.</p> <p>Direct support staff - total number of employees is 174, of these 128 are full time and 46 are part time employees.</p> <p>The team includes the following professions: Speech therapist, physiotherapist, occupational therapist, social worker, psychologist, line manager, nurse, family connect worker, equipment funding team, manual tasks specialist, dietician and behavioural support specialist.</p> <p>Non-direct support staff - total number of employees is 49, of these 37 are full time and 12 are part time employees.</p> <p>The team includes the following positions:</p>

	Administration Manager, Administration Officer, Executive Manager, Regional Manager, Project Manager, CEO, IT Manager, IT team, Communication Manager, Communications team, Manager Business Sustainability, Manager Business Development, Manager Assets and Fleets, Workforce Manager, and Workforce team.
The people using services	The number of people receiving services funded by the Commission are (as of 12 April 2016): Early childhood intervention (0-6 years): 229 School age intervention (7-18 years): 1400 Adult intervention (18-65): 34 Forty-four per cent (44%) of people using the services have been diagnosed with Autism Spectrum Disorder as their primary disability, and 29 per cent (29%) with intellectual disability. Other primary disabilities include Global Developmental Delay, physical disabilities, and sensory and speech disabilities.

### Consultation

#### Statistics

Number of management and staff consulted	2
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### Quality Audit assessment against the Standards

The following scale has been used to measure performance against **each National Standard**

Met	Feedback, observed and written evidence clearly demonstrates that the service provider meets the requirements
Not met	Feedback, observed and written evidence clearly demonstrates that the service provider does not meet the requirements

Based on the documentation and information provided by staff and management; this organisation's performance has been assessed as:

#### Assessment against the Standards

Standard	Assessment
Standard 1: Rights	Met
Standard 2: Participation and inclusion	Met
Standard 3: Individual outcomes	Met
Standard 4: Feedback and complaints	Met
Standard 5: Service access	Met
Standard 6: Service management	Met

## Summary of findings

Please refer to Appendix 1: Definitions

### Good Practices (GP)

If/where noted during a Quality Audit, GPs refer to exemplary contemporary practices that demonstrate how services support people to achieve better individual outcomes. Examples of GPs inform the Commission's Board and enhance sector development. The following includes up to two (2) brief example/s of GPs implemented.

Business practice/s	<ul style="list-style-type: none"> <li>The organisation has developed 'Quality Circle' a tailored quality management system. Information contained in this intranet-based system is transparent and easily accessed by all staff. Utilisation of this site and its functions by staff appears to be high.</li> <li>The process and documentation of feedback and complaint management is transparent, and includes risk assessment and escalation components with clearly outlined delegations.</li> </ul>
Other good practices noted	<ul style="list-style-type: none"> <li>The organisation publishes a wide range of information on its website such as Board policies and charters, and independent evaluation reports; representing a high level of transparency.</li> <li>The organisation has an action plan in place that outlines how it is planning to meet identified gaps and service improvements in meeting the National Standards for Disability Services.</li> </ul>

### Required Actions (RA)

If/where noted during a Quality Audit, RAs focus on the minimum satisfactory level of service and refer to action necessary to address matters that have serious implications for the rights, safety, wellbeing and dignity of people with disability. They may also relate to legal requirements and duty of care issues as reflected in all the National Standards for Disability Services. RAs are a major gap in meeting Standards.

No	Standard	RA statement	Compliance date
1.		No Required Actions have been identified	

### Service Improvements (SI)

If/where noted during a Quality Audit, SIs identify actions to enhance practices in addressing outcomes for people with disability and enhance compliance with the National Standards for Disability Services. These matters are highlighted as continuous improvement activities, are reported on in the annual Self-assessment and may be noted in future Quality Evaluations.

No	Standard	SI statement
1.	1	Develop a system to ensure all staff receive ongoing and timely information and professional training in relation to organisational processes.
2.	2,3	Push reflection of, and respect for, culture and community beyond communication strategies into the space of a culturally diverse and holistic service approach.
3.	4,6	Explore further opportunities to provide systematic avenues for individuals, families and carers to contribute to service and support planning. This should encompass service improvement, delivery and review, including the development and review of policies and procedures.
4.	6	Consider expanding your library of procedures to cover the diverse work environments staff encounter.

### Other Matters (OM)

If/where noted during a Quality Audit, OMs refer to identified matters that are not within the scope of a Required Action/s or Service Improvement/s and therefore, do not have reporting requirements. The following includes up to four (4) brief example/s of OMs noted.

No	Standard	OM statement
1.	2,3	Some of the observations made in relation to outcomes under these Standards may be challenging for a professional service provider. However, the concept of holistic, person-centred services requires a look beyond the services provided towards a whole of life approach. Therapy Focus and its team are reflecting elements of this, and further exploration and expansion in this direction is encouraged. How this journey will evolve in the context of the service offering will be an interesting space to watch.
2.	6	The organisation may want to consider tightening its practices relating to document naming and control.