# Organisational Health Check: Reflection and Action

This tool has been adapted from the Safeguarding Vulnerable People Workbook released by NDS in 2016. It can be used by disability service providers to evaluate whether their organisation’s culture supports the delivery of high quality, safe services. A culture that prioritises the safety of people strengthens an organisation’s capacity to identify acceptable and unacceptable behaviour towards people with disability. It can increase willingness amongst staff to act and respond appropriately to the mistreatment of people with disability.

**Aim:** This tool is designed to reflect on the maturity of an organisation’s commitment to safeguarding, the governance and accountability measures that are in place, including systems and practices used by the organisation in ensuring high quality and safe services. It also identifies areas for continuous improvement and develop actions to follow.

Please note some practices listed may not be applicable or relevant to your organisation. This tool is intended to support continuous improvement and it does not include every single organisational practice. It does not replace existing measures to monitor safeguarding practices.

| Instructions |  |
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| 1 | Decide who in the organisation will complete the health check and who will be involved in providing information to support the review. We suggest a group of stakeholders with different roles including people with disability, families, direct support staff, managers, executive team and Board members. |
| 2 | Consult with your quality and safeguarding champions, staff and supervisors and gather evidence of safeguarding activities from across the organisation. Examples of evidence of safeguarding practices include policies and procedures referring to safeguarding, quality reviews, complaints, serious incidents or feedback from managers, staff and people with disability and their families. |
| 3 | Analyse the results to identify specific strengths in practice and areas for targeted improvement in your standard and advanced practices. |
| 4 | Add any identified actions to your organisation’s Continuous Improvement Plan. You can find a free template for a Continuous Improvement Plan on the NDS website. [**Continuous Improvement Plan link**](https://webcache.googleusercontent.com/search?q=cache:sEM-3FrXZQ8J:https://www.nds.org.au/images/resources/national-standards-toolkit/Continuous-improvement-plan.docx+&cd=2&hl=en&ct=clnk&gl=au) |

| **Organisational Commitment to Safeguarding** | **Evidence of Activity** | **Gaps** | **Action to Address Identified Gaps** |
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| **Standard Practices** |  |  |  |
| 1. The organisation is committed to safeguarding and makes public information about safeguarding activities. For example, Safeguarding policy and quality evaluation results are published on the organisation’s website. |  |  |  |
| 1. Safeguarding policies and practices are implemented consistently across the organisation. |  |  |  |
| 1. Organisational safeguarding tools, resources and practice guidelines are introduced to staff at multiple time points, not just at induction. |  |  |  |
| 1. Safeguarding is a standing agenda item at Board, senior management and staff meetings. |  |  |  |
| 1. Safeguarding practices are monitored and evaluated by a working group including all stakeholders including people with disability, families, direct support staff, managers, executive team and Board members. |  |  |  |
| 1. The organisation actively seeks feedback from staff about their understanding and awareness of good safeguarding practice. |  |  |  |
| 1. Feedback from people with disability, families and carers is used to improve processes and systems in the organisation. |  |  |  |
| 1. There are clear records of staff training, concerns, incidents and other safeguarding related information. |  |  |  |

| **Organisational Commitment to Safeguarding** | **Evidence of Activity** | **Gaps** | **Action to Address Identified Gaps** |
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| **Advanced Practices** |  |  |  |
| 1. Safeguarding is a core consideration that is included in the organisation’s strategic and operational planning documents. |  |  |  |
| 1. Safeguarding best practice is discussed and documented as part of regular support and supervision sessions or team meetings. |  |  |  |
| 1. Staff and customer surveys include questions to test peoples understanding of safeguarding and invite feedback on ways to improve service quality or safeguards. |  |  |  |
| 1. Case statistics on quality and safeguarding such as complaints and incident reports are presented to the Board and are used to inform policy decisions/education and training. |  |  |  |

| **Responsibilities and Accountability** | **Evidence of Activity** | **Gaps** | **Action to Address Identified Gaps** |
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| **Standard Practices** |  |  |  |
| 1. There is a guide for the Board describing their role and responsibility that includes a section on quality and safeguarding. |  |  |  |
| 1. Board members are given training to ensure they understand their responsibilities around quality and safeguarding. |  |  |  |
| 1. There is organisational policy on quality and safeguarding and it is implemented consistently across the organisation. |  |  |  |
| 1. Definitions and delegation of safeguarding responsibilities to staff are clear and staff members are held accountable. |  |  |  |
| 1. Staff appraisals include a discussion about individual staff person’s responsibilities, as per the organisational policy and procedures. |  |  |  |
| 1. A staff member ensures safeguards are developed or reviewed in collaboration with the individual and are recorded in safeguarding plans |  |  |  |
| 1. Safeguards are routinely reviewed in addition and also when there is a change in and person’s circumstances or a newly identified risk. |  |  |  |
| 1. Organisational procedures require individual safeguarding arrangements are linked to an individual’s plan. |  |  |  |

| **Responsibilities and Accountability** | **Evidence of Activity** | **Gaps** | **Action to Address Identified Gaps** |
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| **Advanced Practices** |  |  |  |
| 1. Job descriptions include safeguarding requirements and accountabilities relevant to each role. |  |  |  |
| 1. Operational Plans outline safeguarding requirements, accountabilities and expected outcomes |  |  |  |
| 1. Staff development needs on quality and safeguarding are assessed as part of a Performance Development System where staff contributions are identified on a regular basis informally and formally at least every quarter. |  |  |  |
| 1. The organisation monitors safeguarding practices in a planned and deliberate way on a regular basis. |  |  |  |
| 1. De-identified good and bad practice safeguarding examples are promoted and shared throughout the organisation. |  |  |  |

| **Systems and Practices** | **Evidence of activity** | **Gaps** | **Action to address identified gaps** |
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| **Standard Practices** |  |  |  |
| 1. Executives and Managers actively model and promote safeguarding practices. |  |  |  |
| 1. The organisation supports quality and safeguarding champions at all levels and across all functions of the organisation. |  |  |  |
| 1. Staff are aware of relevant policies and procedures about how business systems specific to their roles. |  |  |  |
| 1. Are they easily accessible both in written form and electronically? |  |  |  |
| 1. Appropriate training is provided to consistently implement policy, procedure and practices. |  |  |  |
| 1. Staff are provided with opportunities to ask questions and seek information on how to ensure and maintain safe services. |  |  |  |
| 1. There are clear procedures for people with disability, their families and carers and staff to provide feedback, raise concerns or make formal complaints without fear of retribution. These procedures are actively promoted. |  |  |  |
| 1. All concerns from people with disability, their family and carers and staff are taken seriously and are addressed. |  |  |  |
| 1. Feedback, concerns, complaints and serious incidents are recorded appropriately and stakeholders informed of actions taken. People with disability, families and Carers should be notified of outcomes in a timely manner. |  |  |  |
| 1. People with disability and families are involved in development and review of policies, practices and procedures. |  |  |  |
| 1. Continuous review is a core component of all organisational policy, practice and service delivery. |  |  |  |

| **Systems and Practices** | **Evidence of Activity** | **Gaps** | **Action to Address Identified Gaps** |
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| **Advanced Practices** |  |  |  |
| 1. The organisation applies the principles of co-design when developing new policies and procedures or designing or revising services. |  |  |  |
| 1. Feedback from people with disability, their family and carers and staff is collected regularly from all levels of the organisation in order to identify any gaps in knowledge and practice. This may include focus groups, interviews and written feedback. |  |  |  |
| 1. Feedback, concerns, complaints and serious incidents are analysed to identify trends and areas for service development and improvement. |  |  |  |
| 1. All identified trends or gaps are documented and addressed. |  |  |  |
| 1. Systems and processes are in place to measure the impact/effectiveness of organisational policies, procedures and practices. |  |  |  |