

# NDS Quality and Safeguards Sector Readiness Project

## Factsheet: Audit Reports

Following the completion of a NDIS quality audit, providers will receive an audit report which outlines whether the provider complies with each of the NDIS Practice Standards that have been assessed.

This factsheet provides information on:

- **Audit findings and ratings**
- **Corrective action plans**

This resource is aimed at providers who are new to the provision of NDIS supports and services. The information in this resource is general in nature and is a starting point. It should be used and adapted to meet the size and scope of your organisation and the supports you provide.

## Audit findings and ratings

Each outcome and indicator for each relevant Practice Standard assessed will be issued a rating.

<p><b>Conformity with elements of best practice</b></p>	<p>Best practice evidence can clearly be demonstrated for the outcome and indicators of the practice standard. Evidence would include continuous improvement of the related systems, processes and outcomes associated with the criteria.</p>
<p><b>Conformity</b></p>	<p>Is where evidence can clearly demonstrate that the outcomes and indicators for the Practice Standard have been met. Evidence could include evidence seen in practice, training records, and visual evidence.</p>
<p><b>Non-conformity</b></p>	<p>Is when the quality auditor has identified an area where the provider does not meet the standard.</p>
<p><b>Minor non-Conformities</b></p>	<p>A minor non-conformity is where a risk/s has been identified, which if it occurred, could impact the safety of a person with disabilities. Common situations in which minor non-conformities are identified include:</p> <ul style="list-style-type: none"> <li>• An appropriate process (policy, procedure or guideline) is in place, but there is not supporting documentation.</li> <li>• A documented process is in place, but there is no evidence that it has been implemented, evaluated or reviewed.</li> </ul>
<p><b>Major non-conformities</b></p>	<p>A major non-conformity is identified in situations where the provider cannot evidence that appropriate policies, procedures, systems and structures are in place to meet a practice standard outcome and indicators, and/or the gap in meeting the outcome presents a high risk.</p> <p>Three minor non-conformities within the same practice standard may result in a major non-conformity.</p>

## Corrective Actions Plans

A corrective action plan is plan developed by a provider if they receive a non-conformity. It describes the actions they will take to address non-conformities that have been identified through the audit.

If any non-conformities are identified, a corrective action plan must be submitted to the quality auditor within seven calendar days.

**Where a minor non-conformity is identified**, a corrective action plan is required to reduce the likelihood of risks occurring or impacting the safety of people with disability.

Providers have 18 months to address any minor non-conformities. These will be reviewed as part of the mid-term audit or recertification audit (whichever comes first).

If a minor non-conformity is not addressed within the 18 months, it will be escalated to a major non-conformity.

Verification or Certification can be recommended where minor non-conformities have been identified, if the provider has submitted an acceptable corrective action plan.

**Major non-conformities must be addressed within three months.** A follow-up audit will be completed to ensure the major non-conformity has been addressed. This may be a desktop audit or may require an onsite audit, depending on the major non-conformity. An onsite follow up or re-audit would normally be required for any critical risks or other serious matters.

At the next audit, the quality auditors will check that the corrective actions to address the major non-conformities continue to be effective.

A re-registration application cannot proceed until all major non-conformities have been addressed or downgraded to minor non-conformities. Failure to address any major non-conformities will result in the re-registration application being unsuccessful.



### Tips for resolving non-conformities:

1. Don't panic! Many providers receive non-conformities. Take them seriously but view them as an opportunity to improve.
2. Work together with your auditor to establish what you need to do to resolve them. If you are unsure ask for more information.
3. Don't ignore them. Try to action your corrective action plan as soon as possible.

**Please note:** This resource was reviewed in August 2023 by the NDS Quality and Safeguards Sector Readiness Project. The resource is general in nature and is provided as a guide only. NDS believes that the information contained in this publication is correct at the time of publishing, however, NDS reserves the right to vary any of this publication without further notice. The information provided in this publication should not be relied upon instead of other legal, medical, financial, or professional advice. Please always refer to online documents for the latest versions including the NDIS Practice Standards and advice to providers on the Code of Conduct.

