



**Australian Government**  
**Department of Social Services**

# DES Quality Framework – Summary of Consultation Feedback

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# DES Quality Framework: Summary of Feedback on Draft Discussion Paper 2022

A Discussion Paper detailing a draft of the DES Quality Framework (the Framework) was open to public consultation from 19 December 2022 to 13 March 2023.

## Submissions Received

In total, 61 unique submissions were received from individuals, DES providers (providers), DES Peak bodies (peaks), Disability Representative Organisation (DROs) and Disability Stakeholder Groups.

Feedback sources	
DES Providers	28
DROs	4
DES Peaks	4
Other Orgs	14
Individuals	11
<b>Total</b>	<b>61</b>

Responses received from individuals were not representative of the cohort with only 11 submissions received from nine different individuals. Based on submission responses, only four individuals identified as being past or current DES participants (participants).

## Overall Themes – Summary

The overall themes were:

- A need to clarify the definition of Quality as it applies to the DES service.
- Uncertainty around some quality elements where the link to quality improvement is less obvious. In particular, submissions noted an apparent disconnect between Quality Element 4: Feedback and Complaints and Quality Element 5: Formal Assurance and a participant centred model of quality.
- Simplifying Elements 4 and 5 by potentially combining to make the intent clearer. That is, the use of existing feedback and assurance data and reviewing other Commonwealth agencies with principle based quality frameworks, to create proactive drivers of quality (and not to create additional compliance processes).

## Specific Feedback on the Quality Elements

Based on the feedback the five Quality elements were redefined into four and feedback has been grouped under the revised four elements.

### Quality Element 1 - Participants' Rights

Peaks and DROs support increased participant awareness and understanding of their rights, the feedback made the following suggestions:

- The development of information products such as 'Know your Rights' that are designed with stakeholders to align information products with the National Standards for Disability Services (NSDS) Evidence Guide.
- As some providers are also registered for the National Disability Insurance Scheme (NDIS) there is an opportunity to align elements with the NDIS practice standards.
- Refreshing available existing information for the program and encouraging more proactive use to align information to expectations and goals of the participants' individual program.
- Leveraging existing NDIS modules to provide participants with information of their rights and understanding of available career development, education and training that is available in Easy Read formats.

Providers also suggested aligning existing NSDS audit information to inform this element.

### Quality Element 2 - Understanding Quality

- Peaks noted that the current structure under the DES Grant Agreement already supports this Element. However, there was concern that this information is not used effectively to assess quality.
- DROs suggested quality indicators be designed to measure actual needs and expectations of individual jobseekers to align the DES Grant Agreement with individual quality indicators.
- Transparency and clear communication in the Employment Services Assessment (ESAt) process, along with additional indicators for employers to provide a better understanding of the DES Program, were key topics in provider feedback. Eleven of the 16 organisations commenting on transparency of ESAts were from providers

### Quality Element 3 - Provider Capability

Feedback in this Element is similar to that for Element 2, with strong support for using and enhancing existing resources such as the NSDS audit. A large number of submissions noted the significant volume of existing survey data - noting that many providers conduct their own regular participant surveys and called into question the need for a new survey - variations of the phrase "survey fatigue" were prevalent.

Other key themes were:

- Reference to existing compliance activities and the requirement for clear communication of expectations and obligations that will be measured for quality.
- Providing clear and updated guidelines to outline obligations and expectations.
- Providing 'best practice' case studies to share with providers to help them meet obligations for the DES Program.
- The need for clarity and simplicity and to consider which of the additional measures and supports may be overly complex creating further administrative burden.

#### Quality Element 4 - Connecting Data and Quality

Many providers flagged the rich sources of existing data and information – primarily the audit information collected under NSDS audits. Aligned to the idea of getting more mileage out of existing data and information was the theme of minimising additional regulatory and compliance burden.

Feedback in the submissions also indicated broad support for developing an improved system for collection of information and data in regard to complaints and feedback is necessary for continuous improvement.

#### Additional Theme - Qualified support for earned autonomy

Transparency of the assessment of earned autonomy was voiced with three submissions being wary of this process. How this is measured should be discussed through the targeted engagement sessions to clarify how this would be measured.

Application based earned autonomy was also seen as having the potential to disadvantage smaller providers with one submission questioning the notion of 'application based' earned autonomy. It was suggested an 'automatic' threshold which could trigger greater flexibility for providers.

# DES Quality Framework: Summary of Feedback from Targeted Engagement Workshops – June 2023

In June 2023, nine targeted consultation workshops were conducted with providers, peaks and DROs, with 78 organisations attending the workshops.

The workshops focused on:

- sharing previous feedback gathered from submissions on the Discussion Paper released in December 2022
- presenting key changes proposed to the quality elements, and
- testing and refining a revised structure of the Framework which included amending the quality elements, outcomes and indicators.

## *Limitations:*

The timeframes associated with this engagement did not allow for:

- all DRO representatives to be consulted; instead, DRO perspectives were limited to nine organisations of 17 invited
- direct consultation with DES participants (participants); instead, participant perspectives were limited to a review of research reports available to the Department
- a complete Framework to be tested with the workshop participants; instead, conceptual thinking on the Framework and its associated outcome and indicator areas were tested.

## Key themes

The key themes from the workshops with providers, peaks and DROs were:

- While there was general support from stakeholders for the development of the Framework, there were questions raised about the adequacy of the time for development to support the delivery of a quality, final product. This included that there had been limited opportunity for participants to contribute to development, limited time provided for stakeholders to provide feedback and the lack of opportunity for providers to view a version of the full Framework before it is released.
- The central focus of the Framework should be on improving participant outcomes through the delivery of quality services. Clear links to participant outcomes should be identified for each quality element.
- That the proposed outcomes and indicators in the discussion paper mirrored those that providers were already contractually required to meet. Questions were raised regarding what value would be gained from providers being re-assessed on similar outcomes and indicators, and what additional burden this might put on providers. It was suggested that an approach relying heavily on existing NSDS would not support quality improvement, and that the focus of the Framework should be on improving participant outcomes through the delivery of quality services, rather than introducing additional layers of compliance-focused metrics.

- Systemic challenges (for example the interface between providers and other system stakeholders and mutual obligation requirements) within the current DES Program would make it difficult to fairly assess providers against the proposed outcome and indicator areas. This is driven by the tension between provider obligations and participant choice.
- In the absence of outcome measures being available for the workshops, providers were concerned that feedback and complaints data would be relied on to measure provider performance. Several key questions were raised in relation to the use of feedback and complaint data. This included whether complaints would be considered in relation to provider size and location, the content of the complaint or feedback, and the reporting culture of an organisation.
- Considerations in relation to implementation and measurement related to NSDS audit consistency, the need for supporting tools and best practice information, access to timely feedback from the Department and clear communication about any phased implementation for the Framework.

## Specific Quality Elements

### Quality element 1: Participants' rights

In relation to participants' rights, stakeholders suggested the following be considered:

- Any specific indicators regarding responsiveness to cultural needs should also recognise other culturally and linguistically diverse people, beyond Aboriginal and Torres Strait Islander cultures.
- The second indicator for outcome area 1 (associated with involving families, friends, carers and advocates) should be modified, as participants must approve any attempts to involve their support networks in DES Program related activities, and this should be recognised throughout all Framework indicators.
- Social outcomes and measures could be included as part of the indicators for participant rights, for example, access to education, housing and health services.
- DROs were of the view that the meaning of 'respect' and 'dignity' should be defined by participants themselves as the terms will mean different things for different people. For example, the definition of 'respectful communication' will differ for people with various health needs.
- DROs were of the view that the Framework should mention the right of participants to accessible and understandable information and communication methods, as the accessibility of job applications is often poor. DROs were also of the view that there needed to be accessible, easily understandable information regarding participant rights to empower participants to make complaints regarding abuse or discrimination.
- DROs were of the view that 'supported decision-making' should replace any instances of 'active decision-making' in this element.

## Quality element 2: Understanding quality

In relation to understanding quality, stakeholders indicated the following:

- The indicators provided for the quality element reflect what many providers are already doing in the way they deliver services, and there is a need to consider the impact/burden of measurement to adequately capture and evidence it.
- Providers will not be able to fulfil every request made by participants, and any complaints should be evaluated in the context of the compliance history and circumstances of participants.
- An approach or definition for 'reasonable and necessary' would need to be developed in a DES Program context prior to the inclusion of reasonable and necessary type indicators.
- Education may be required to support participant understanding of the scope of the DES Program, to manage expectations in relation to what needs and goals are applicable to what providers are funded to deliver.
- DROs commented on the fact that there was no mention of successful placement for participants in open employment. DROs were of the view that this element needed to better address this, as it is the purpose of DES services.
- DROs were of the view that this element should account for how providers respond to and action complaints and feedback from participants. Providers' records regarding the completion of training modules, complaint/feedback reports and providers' responses, participant feedback mechanisms and stakeholders' experiences could be used as potential measures for indicators under this element.

## Quality element 3: Provider capability

In relation to provider capability, stakeholders indicated the following:

- Stakeholders did not support frontline staff being held accountable for service delivery outcomes, as they rely on management for support and guidance.
- Stakeholders did not support the use of the word 'qualified' for two reasons: there are currently no minimum qualifications required for the DES workforce and that qualifications did not necessarily equate to skill. DROs noted that staff need to have a contemporary understanding of disability and disability rights, as well as the knowledge and skills to support participants.
- Providers discussed challenges in involving participants in the development and review of policies and procedures, as many of these are set under contractual agreements. Peaks and providers suggested that participant involvement be focused on designing service practices.



## Quality element 4: Connecting data and quality

In relation to connecting data and quality, stakeholders indicated the following:

- In the absence of measures for review during consultation, providers were concerned feedback and complaints data would be relied on to measure provider performance. A number of concerns were raised in relation to using feedback and complaint data, including:
  - The size and location (rural and remote or urban) of providers can result in significant variations in the volume and type of feedback and complaints received.
  - Complaints and feedback often relate to issues providers have no control over (such as mutual obligations). This can result in complaints being unresolved or participants making additional complaints.
  - The volume of complaints could be skewed based on the reporting culture of an organisation. For example, in an organisation where participants are encouraged to provide feedback and are provided with information on how to make complaints, the provider could experience greater numbers of complaints.
- The Framework should encourage a continuous improvement approach to feedback and complaints, as opposed to punitive approach. It was claimed that breaches are often not well managed by the Department, which is a disincentive for staff reporting incidents or admitting fault.
- Some providers noted areas of overlap within this element and discussed the possibility of removing it and redistributing its unique aspects to other elements, while other providers suggested narrowing the focus of this element to focus on feedback and complaints only.
- DROs indicated that data relating to successful employment placement could be utilised in this element.
- DROs were of the view that the context surrounding data values should be considered before they are used to justify future decision-making for the DES Program. For example, a decrease in complaints may indicate that many participants are not able to use the new complaints pathway rather than an improvement in service delivery.
- DROs indicated that it would be beneficial to include an indicator regarding the accessibility of data reporting mechanisms for participants.

## Departmental engagement and role in implementation

Providers and peaks expressed a range of views regarding the role of the Department in relation to Framework implementation. Specifically, findings related to:

- **‘Departmental engagement’ as an indicator of performance:** While most providers welcomed an increased level of engagement with the Department, the lack of clarity regarding how it would be measured caused uncertainty. Providers expressed a need for meaningful, regular, ongoing, and consistent engagement with Departmental representatives, including local contract managers, in order to meet requirements under such an indicator.

- **Focus of Departmental engagement:** Some providers noted that past engagement with the Department has typically centred on issues or challenges, with limited or no focus on quality, strengths, or positive practice. It was their expectation that if engagement would be measured, this should be a primary focus for the Department.
- **Implementation:** Providers noted that, in implementing the Framework, providers would benefit from increased Departmental engagement including regular site visits, timely access to data and stability in local contract managers. Some providers wanted to understand more about who would be responsible for undertaking measurement activities, and when the Department would introduce additional capacity if it was to be ‘insourced’.

## DES Participant Perspectives on DES Program Quality

A review of a range of documents and reports relating to participant perspectives on quality and effectiveness of the DES Program, indicated that:

- The experience of finding and maintain employment, and engaging with providers and employers, can be challenging for people with a disability.
- Many participants indicated that the support services delivered by providers are inflexible and generic.
- There needs to be a greater emphasis on the quality of job placements, personalised and tailored supports, training and development for staff regarding participant interests and aspirations.
- Participants require a holistic approach to service delivery, including pre-transition, on-the-job and ongoing training and advocacy supports.
- There is a need for providers to consider a participant’s accessibility requirements and support employers to ensure their job application processes and workplace environments are accessible.
- There is a lack of clarity regarding what services are offered through the DES Program and a lack of connectivity and collaboration between different providers and other interfacing stakeholders.

## Further developing the Framework

During the consultation period, the Department continued to evolve its thinking in relation to the Framework in addition to feedback from workshops. This resulted in a number of key changes to the Framework, which was presented as part of the workshops, including:

- Refining the introduction to define ‘quality’ and articulate how the Framework will drive quality services.
- Reframing outcome statements to unlink them from the NSDS, and instead focus on driving quality and continuous improvement for participants and employers.

- Removing references to indicators and instead, for each element, providing outcome statements and elements of good practice.

In further developing the Framework, the consultations indicated that the Department should consider:

- **Specifically defining ‘quality’ in a DES context and the overall objective of the Framework.** There are multiple dimensions that could be considered in defining quality, for example, efficiency, effectiveness, accessibility, equity and safety. The overall objective and purpose of the Framework, i.e., quality improvement verse regulation and compliance, will need to be defined to support the development of indicators and measures.
- **The participant outcomes which the DES Program seeks to achieve, and by which quality will ultimately be measured.** The central focus of the Framework should be on improving participant outcomes through the delivery of quality services. Clear links to participant outcomes should be identified for each quality element. This should be primarily about assisting participants achieve employment outcomes, but also include broader social and economic outcomes.
- **The relationship between the NSDS audit certification process and provider measurement under the Framework.** The Department will need to clearly articulate how NSDS data/outcomes and information from other certification assessments will be utilised to assess quality across each of the four elements.
- What data and evidence will be used by providers to complete self-assessments, including how participant and employer perspectives will be captured. The Framework should be flexible in terms of the types of evidence sought and the ways in which evidence can be provided. In determining how participant and employer perspectives will be captured, it is important to consider the range of needs and communication preferences a participant may have, and to recognise interest levels and existing engagement obligations, feedback mechanisms that are quick and efficient.