



Australian Government  
Department of Social Services

# Families and Children Activity Administrative Approval Requirements



## Standard 1: Values and ethical framework

The organisation has a clear ethical framework which is reflected in a statement of values and purpose, a code of ethics/conduct and other documents. The ethical framework includes a non-discriminatory/equitable approach to service provision. There is a code of ethics/conduct that clearly sets out expectations of appropriate conduct by staff, management and volunteers.

The Statement of Values and Purpose is supportive of the aims for the Families and Children Activity (FaC).

Management and staff have the opportunity to contribute to the development and ongoing review of the Statement of Values and Purpose and code of ethics/conduct. Management and staff are aware of the organisation's values, purpose and code of ethics/conduct, and it is communicated to consumers and other stakeholders.

### Attributes

1. The statement of values and purpose:
  - reflects the organisation's position in the community;
  - is consistent with the aims of the FaC Activity.
2. The service has a clear ethical framework which is reflected in the statement of values and purpose, a code of ethics/conduct and other documents  
The ethical framework includes a commitment to a non-discriminatory and equitable approach to service provision.  
The code of ethics/conduct (and other documents) clearly sets out expectations of appropriate conduct by staff, volunteers and Board/committee members in relation to:
  - having a positive and respectful approach to clients and other staff, including behaviour that excludes harassment or abuse;
  - confidentiality/privacy;
  - conflicts of interest;
  - responsible use of resources/facilities; and
  - sets out procedures for the management of professional misconduct.
3. Management and staff contribute to the development and ongoing review of the organisation's values, purpose and code of ethics/conduct.
4. Staff and management are aware of the organisation's values, purpose and code of ethics/conduct and these are communicated to consumers and other stakeholders.

## Standard 2: Governance

The organisation has clear and effective arrangements for internal control and transparent decision making which are appropriate to its scale and scope of operations.

The organisation's financial systems support effective management and accountability. There are appropriate systems in place to identify and manage financial and non-financial risks.

### Attributes

1. Evidence of clear and effective arrangements for internal control and transparent decision making, which include:
  1. regular, minuted, well attended Board/committee meetings;
  2. Board/management committee with a sufficient range of expertise and access to appropriate induction and training;
  3. Board/management committee understands and controls how the organisation conducts its business; and
  4. clear delineation between the roles to be filled by the governing body and the person(s) delegated responsibility for management of the organisation.

2. The organisation's financial systems support effective management and accountability. Appropriate systems are in place to identify and manage financial and non-financial risks, and include:
  - Board/management committee receives an annual budget, regular reports on financial status against the budget, and staffing arrangements;
  - there are established procedures for minimising risks of fraud or mismanagement of funds;
  - the organisation holds appropriate insurance such as workers' compensation, directors, public and professional liability, volunteers, property and contents; and
  - information systems allow timely and accurate extraction of data in suitable formats for statutory and regulatory reporting.

## Strategy, Policy and Planning

### Standard 3: Planning

The development and delivery of FaC services occur in a planned rather than reactive way and are integrated with the organisation's work.

#### Attributes

1. The existence of clear documented strategic directions that cover all aspects of the organisation's work, including FaC related services.
2. The existence and use of operational plans which provide detail about the delivery of FaC services, including regular reporting against them.
3. Evidence of broad stakeholder input and participation in FaC planning processes.
4. Evidence that organisational planning for FaC takes account of FaC strategic directions or priorities established from time to time by the Department, such as the needs of children and the issues of violence and diversity.

## Information and Analysis

### Standard 4: Management of data

FaC services maintain core and optional data that is accurate, comprehensive and timely. Where the DSS Data Exchange is used, services must observe the DSS EX Online protocols.

#### Attributes

1. Written procedures exist for the management of data.
2. Where data is entered into DSS EX the DSS EX protocols are observed.

The procedures address:

- who is responsible for entering what data;
- when data is required to be entered;
- how compliance with DSS EX protocols is achieved;
- how the entry of data is internally validated from time to time.

All relevant staff are aware of and understand the procedures for the management of data and the DSS EX protocols.

## People

### Standard 5: Entry of practitioners

To appoint a person as a practitioner an organisation is required to:

1. ensure that a person -
  - holds an appropriate degree, diploma or other qualification; and
  - demonstrates a level of competence appropriate to the commencement of the role in an assessment by the organisation; or
2. ensure that, in exceptional circumstances, an appointment of a person without an appropriate degree, diploma or other qualification is justified on the grounds that:
  - the person demonstrates a level of competence appropriate to the commencement of the role in an assessment by the organisation; or
  - the appointee is:
    - required to work in a rural/remote area or with a target group where the availability of tertiary qualified staff is highly limited; or
    - a person (whether currently a practitioner or not) who has worked as a practitioner for not less than twelve months within the last three years in a family relationship services role similar to that subject to the appointment.

### Attributes

1. Evidence that an organisation has checked appointees' qualifications in terms of an appropriate degree, diploma or other qualification, consisting of a course of:
  - at least three years with an orientation to behavioural or social sciences, education or other relevant degree; or
  - post graduate study of at least one year in an area of direct relevance to the specialised role to be undertaken.
2. Evidence of competencies formulated by the organisation for use in recruitment to practitioner roles.
3. A record of appointments made where the appointee is not tertiary qualified and the grounds on which such appointment was made
4. For Adult Specialist Support Services, understanding of the historical policies and/or approaches to out-of-home care and the affect that these policies may have on clients and their families in their daily lives.

### Standard 6: Supervision of practitioners

Practitioners working in family and children services receive regular professional supervision to address practice issues. The supervision is:

- provided by a suitably qualified and experienced supervisor;
- conducted individually or in a supervisor-facilitated group, or where practitioners are suitably experienced, in a peer group; and
- based on individual needs for supervision in accordance with the attributes below.

### Attributes

1. Evidence of the organisation satisfying itself as to the qualifications and experience of supervisors being used.
2. Record of supervision sessions for all practitioners showing at least:
  - a baseline of 26 hours of supervision per year for full time practitioners covered by this standard; and
  - pro rata hours of supervision on a monthly basis for people working part time in these roles.
3. Evidence that the organisation assesses individual practitioner needs for supervision over and above the baseline requirement, having regard to the experience of the practitioner and the nature of the role.

### Standard 7: Training and development

All FaC services practitioners have access to training and development opportunities, externally delivered where appropriate, related directly to their professional development needs and the organisational plan.

Other service staff have access to appropriate training.

### Attributes

1. A planned approach to training is evident in each organisation including evidence of an assessment and prioritising of staff training needs and stated intentions for how priorities will be addressed.
2. A planned approach is evident to ensuring the training and development of volunteers (if applicable).
3. A record of training events attended by staff is maintained.

### Standard 8: Staff appraisal

FaC services have designed and implemented a system for appraisal of the performance of individual staff within the context of organisational and FaC goals.

### Attributes

1. Documentation of a system jointly implemented by a staff person and appraiser/s for review of performance over an agreed period of time, which includes steps for:
  - setting performance goals;
  - ongoing supervision for people other than those receiving professional supervision;
  - an assessment of achievements against agreed goals;
  - establishing a plan for how any improvements can be achieved; and
  - setting performance goals for the next period of review.
2. The system of appraisal should provide details of how a review outcome may be moderated within the organisation where an individual and his or her appraiser/s do not agree on the appraisal.
3. Evidence that the system is implemented.

### Standard 9: Safety of staff

FaC services take active measures to maximise the safety of staff.

### Attributes

1. An assessment of risks to staff safety is carried out and reviewed regularly.
2. Procedures are in place to manage risks which are identified.
3. Evidence that the organisation understands and meets its work place health and safety obligations.

## Client Focus

### Standard 10: Accessibility of services

FaC services work to ensure their sensitivity and accessibility to any people who face a real or perceived barrier to receiving assistance whether on the basis of:

- race, creed, language or ethnic background;
- gender;
- disability;
- age;
- locality;
- socio-economic disadvantage;
- sexual preference;

- or any other unjustifiable basis.

FaC services operate in, or plan over time to operate in, buildings and/or services which are accessible to people with disabilities.

### Attributes

1. Documented evidence of the key characteristics of the actual and potential client group, based on expressed need and demographic features of the organisation's catchment area.
2. Having identified the characteristics of the community, the organisation has used a planned/evidence based approach to prioritising and addressing access barriers.
3. Evidence of progress in implementing strategies for overcoming barriers.
4. The organisation has developed a fees policy that addresses access for people on low incomes.

### Standard 11: Managing client feedback and complaints

FaC services offer opportunities to all clients to voluntarily provide feedback on their experiences with a service provided by an organisation and manage complaints from clients in a positive, timely, fair and predictable way.

### Attributes

1. The organisation has procedures for the management of complaints which:
  - welcome complaints and inform clients about how to complain;
  - ensure timely resolution of complaints;
  - provide feedback to clients on complaints;
  - distinguish between simple complaints and those of a more serious nature;
  - ensure that where complaints about staff/volunteers/Board members occur, principles of natural justice are utilised in the assessment process, except where complaints relate to criminal matters. In these circumstances, all such complaints are referred to police and not assessed by the organisation; and
  - ensure that issues arising from complaints and outcomes are reported to management and are used to improve service delivery.
2. Procedures are documented for the management of client feedback that:
  - require all clients to be offered the opportunity to provide feedback with anonymity and in ways which are appropriate to them, on their experience as clients including their view on whether a client benefit was obtained;
  - are adjusted as appropriate to encourage people from diverse cultural and linguistic backgrounds to participate;
  - ensure that client feedback is obtained in a variety of ways; and
  - indicate how service delivery may be altered in response to client feedback.
3. Evidence of staff awareness of procedures for managing client feedback and complaints.

### Standard 12: Client confidentiality and privacy

FaC services ensure that their interactions with clients are held under conditions of privacy, and that clients understand:

- the type and purpose of client information that is maintained and used in services and in DSS EX;
- the circumstances under which the confidentiality of client data may not be maintained.

Client records stored in, or accessible through, family relationship services are maintained in secure conditions.

Subject to considerations about legal and privacy issues and the safety of other people, clients have the opportunity to view records or access copies of records relating to themselves. Where copies of records sought unavoidably relate to another client, services require the written approval of that client for the release of that information.

### Attributes

1. Procedures for the management of client interaction and data include provision for how the security of data will be achieved and maintained, with a focus on ensuring that:
  1. all records containing identifying client information, such as videos, files, lists of attendance etc. are locked away when not in use or when the service is closed;
  2. a system of authorisations is in place to cover access to individual files, the movement of files outside the immediate service outlet and disposal of files;
  3. clients provide consent for disclosure of personal (identifying) information and the circumstances where this is overridden are specified;
  4. clients are aware of the type and purpose of data that will be collected, to whom it is released and when consent is overridden;
  5. steps necessary to enable a client to have access to their personal file, including assessment of any safety issues;
  6. DSS EX protocols are met.
2. Private rooms are available for interacting with clients.

### Standard 13: Client safety

FaC are committed to the safety of people who seek their assistance and manage and assess issues of violence and safety in a planned and effective way.

Police checks are conducted for all staff and volunteers who have contact with vulnerable persons, for example children and young people, people with intellectual disabilities.

Subject to any relevant legal obligations, services immediately report to an appropriate agency or person a reasonable suspicion of a current threat or actual harm in the form of:

- serious harm to the life or body of a person (noting the person's sense of danger and fear);
- the commission of a serious crime against a person;
- child abuse and neglect.

Services recognise and immediately assess and take appropriate preventative action regarding other situations of danger and physical harm involving clients, such as suicide threats, threats of serious self harm and actual self-mutilation. Organisations take active measures to manage the occurrence or perception of professional misconduct by staff.

### Attributes

Procedures are in place which ensure that police checks are conducted for all new staff and volunteers who have contact with children and young people and other vulnerable clients. The police check is conducted in the state/s where an applicant has an employment history.

1. Procedures are in place for responding to all situations where there are concerns about violence and safety. The procedures cover circumstances where violence involving clients occurs or is threatened on the premises or is alleged to have occurred or has been threatened elsewhere.

The procedures include:

  - detailed guidance on what matters should be reported, who is to be consulted in a decision to report and how and when such matters should be reported;
  - practices for assessing the presence of violence in relationships;
  - practices for recognising indicators/evidence of child abuse and neglect;
2. Management of arrival/departure times of clients as necessary.
3. Evidence of staff awareness of the procedures.
4. Evidence that staff have gained access to training relevant to child abuse and neglect, domestic violence and suicide prevention.

## Processes, Products and Services

### Standard 14: Service design

FaC services are designed around the needs of clients and, in the interests of improving client benefits and outcomes, have the capacity to adjust service processes and procedures.

The needs of each client are individually assessed so that appropriate assistance can be provided by the service itself, in collaboration with other services or through referral. Where the service is provided by the organisation, staff have the competence to provide the service.

The organisation works to achieve continuous improvement in service delivery and professional practice.

#### Attributes

1. A description of core service processes is maintained covering the full range of service types including individual client services and education programs. Depending on the nature of the FaC service provided, core service processes might include:
  - intake;
  - assessment of need;
  - waiting list management;
  - referral;
  - case closure;
  - documentation of programs (for example education) or client assistance provided;
  - work with other organisations; and
  - monitoring and evaluation including community and client feedback.
2. The needs of each client are individually assessed so that appropriate assistance can be provided by the service itself, in collaboration with other services or through referral. Where the service is provided by the organisation itself, staff have the competence to provide the service.
3. Procedures are in place for assessing the extent to which service delivery occurs in accordance with the core processes described.
4. The organisation has in place methods/processes to achieve continuous improvement in service delivery and professional practice. This includes:
  - procedures for "listening" to ideas from staff and members of management bodies, for considering client feedback and ideas from other organisations;
  - evidence that questions about service design are part of planning processes;
  - the organisation uses a range of approaches to evaluate and inform service and practice improvement;
5. The organisation uses evidence based and peer based information to inform service development and professional practice.

## Organisational Performance

### Standard 15: Assessing performance

Family relationship services use a range of performance indicators as part of their internal ongoing monitoring and as a means of helping to inform evaluations as they occur.

#### Attributes

1. Reports on performance data are tabled in meetings of management bodies and used for management purposes.
2. Information about performance trends are shared with organisational staff.
3. Evidence that performance data is considered in planning processes.
4. Assessment of this standard will take into account the size and resources available to the organisation and program, its length of operation and the characteristics of the area served.
5. As consistent with Commonwealth Privacy legislation