

# **HSQS Certification Guidebook**

## Contents

<b>1</b>	<b>Introduction .....</b>	<b>3</b>
<b>2</b>	<b>NDIS Transition Requirements .....</b>	<b>3</b>
2.1	Disability Service Providers and the National Disability Insurance Scheme (NDIS) in Queensland .....	3
2.2	Existing Qld Funded Disability Providers Transitioning to NDIS.....	3
2.3	New Disability Organisations Registering as an NDIS Provider.....	3
<b>3</b>	<b>Audit Cycle and Certification .....</b>	<b>3</b>
3.1	Initial Inquiry.....	4
3.2	Application for Certification and Assessment.....	4
3.3	Client Contact.....	4
3.4	Gap Analysis (optional).....	4
3.5	Initial Audit (Stage 1 Audit) .....	5
3.6	Certification Audit (Stage 2 Audit).....	5
3.7	Surveillance Audits.....	5
3.8	“Out of Cycle” assessment.....	6
3.9	Re-Assessment Audits .....	6
3.10	The Audit Team .....	6
<b>4</b>	<b>Audit Planning and Consumer Participation .....</b>	<b>6</b>
<b>5</b>	<b>Reporting .....</b>	<b>7</b>
<b>6</b>	<b>Non-Conformances.....</b>	<b>7</b>
<b>7</b>	<b>Certification Decision .....</b>	<b>8</b>
<b>8</b>	<b>Certificates .....</b>	<b>8</b>
8.1	Scope of Certification .....	8
8.2	Refusal of Certification .....	9
8.3	Suspension or Refusal of Certification.....	9
8.4	Accreditation Status .....	9
<b>9</b>	<b>Use of Logos .....</b>	<b>9</b>
<b>10</b>	<b>Standard Owner Information .....</b>	<b>10</b>
10.1	Notification to the Standard Owner .....	10
<b>11</b>	<b>Confidentiality .....</b>	<b>10</b>
<b>12</b>	<b>Additional Process Requirements .....</b>	<b>11</b>
<b>13</b>	<b>Additional Obligations .....</b>	<b>11</b>
13.1	Changes to your Organisation.....	12
13.2	Observers.....	12
<b>14</b>	<b>Misleading Statements.....</b>	<b>12</b>
<b>15</b>	<b>Complaints and Appeals .....</b>	<b>13</b>

## **1 Introduction**

This Certification Guidebook is designed to assist your organisation on the requirements for certification to the Human Services Queensland Standards (HSQS) as required by the Queensland Government Department of Communities, Child Safety and Disability Services. This is applicable to organisations funded by both the QLD Government and through the National Disability Insurance Scheme (NDIS).

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Note:

BSI does not audit services licenced to deliver out-of-home care for children and young people (e.g. care for children in custody/guardianship of the chief executive)

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## **2 NDIS Transition Requirements**

### **2.1 Disability Service Providers and the National Disability Insurance Scheme (NDIS) in Queensland**

During transition to the National Disability Insurance Scheme (NDIS) to July 2019 or until the national quality and safeguarding framework is implemented, providers registered with the NDIS to deliver prescribed services in Queensland will be required to comply with the Human Services Quality Standards.

### **2.2 Existing Qld Funded Disability Providers Transitioning to NDIS**

Disability organisations who hold current funding agreements with the QLD Government and have registered as a NDIS provider must undertake HSQF certification for **both** QLD funded disability service streams in scope for HSQ certification and the NDIS registration groups in scope for certification until the July 2019 or until the national quality and safeguarding framework is implemented.

Existing QLD funded disability organisations will bring NDIS Registration Groups applied for into scope of their next HSQF audit or within 12 months (whichever occurs first) of application through an extension to scope. All NDIS Registration Groups and Qld funded service streams in scope for certification must be sampled.

### **2.3 New Disability Organisations Registering as an NDIS Provider**

Organisations that do not hold current funding agreements with the Qld Government to deliver disability services in Qld and wish to become registered NDIS providers will need to undertake HSQF certification until July 2019 or until the national quality and safeguarding framework is implemented. This will be overseen by the Department of Communities, Child Safety and Disability Services.

Service providers who deliver services solely under the NDIS do not have a funding relationship with the Qld Department.

## **3 Audit Cycle and Certification**

The following section outlines the steps that apply during the BSI certification process for new applicants for HSQS certification. BSI reserves the right to ...making excellence a habit.™

provide its clients and those that request quotations with marketing and technical information relating to standards, training and compliance services.

Certification to this standard is accredited to ISO17065:2012. This is a JAS-ANZ accredited scheme which is offered nationally. BSI is currently accredited to this scheme.

### **3.1 Initial Inquiry**

BSI will respond to either verbal or written expressions of interest from new applicant organisations interested in HSQS certification. An advisory visit may be arranged to discuss your certification requirements and how BSI can help your organisation achieve them.

BSI will also, on request and receipt of a Request for Quotation, prepare a proposal tailoring our services to your organisation's needs.

### **3.2 Application for Certification and Assessment**

Receipt of your organisation's Application form (or authorised acceptance of a valid BSI proposal), along with the accompanying payment of the non-refundable application fee (or invoicing instructions) together with this document forms the contract between your organisation and BSI.

Your requirements will be entered into our database and a Client Manager will be appointed to look after your certification or assessment requirements. The Client Manager will be your primary point of contact with BSI and is responsible for ensuring that our certification/assessment services are delivered to your organisation in the most effective manner possible.

### **3.3 Client Contact**

As soon as practicable after receipt of your signed application/proposal, you will receive a welcome pack. A BSI Client Manager (or nominated representative) will contact your organisation. The Client Manager will seek to establish a working relationship between your organisation and BSI, and to confirm your certification requirements in terms of the certification or assessment services, standards or codes of practice, locations, and activities and/or products to be included in the scope of certification.

The Client Manager (or nominated representative) will seek to gain an appreciation of the structure of your organisation and the activities being conducted. In particular the Client Manager will:

- Seek an appreciation of the nature and scope of the organisation's activities, structure and location(s), including any activities for which confirmation is being excluded; and
- Determine the status of system documentation and implementation including organisational policies, objectives and targets.

If you are working with a consultant it is often useful for that person to be party to the communication process.

### **3.4 Gap Analysis (optional)**

A Gap Analysis approach often proves an invaluable tool in determining system implementation, particularly for new systems that are still in the early stages of development. This one-off assessment includes the identification of gaps against the requirement of your nominated Standard/s. At the conclusion of the Gap Analysis you will receive a report which highlights any gaps as well as options for next steps on your path to certification. The results of a Gap ...making excellence a habit.™

Analysis are not directly linked to any subsequent Certification Audits.

### **3.5 Initial Audit (Stage 1 Audit)**

In order to gain certification to the HSQF scheme your organisation is required to have an initial audit followed by a certification audit. An initial audit determines your readiness for certification.

The initial audit will be carried out by a qualified assessor remotely. This means that the audit does not take place at your site. All sites that are covered under the scope of certification must be assessed at this stage.

Your organisation will receive a written report which outlines the readiness for the Certification Audit. The findings from the initial audit must be satisfactorily addressed (closed out) prior to the certification audit.

### **3.6 Certification Audit (Stage 2 Audit)**

The Certification Audit is required to be conducted within four (4) months of the Initial Audit. If the Certification Audit is not conducted within this time the Initial Audit may need to be repeated.

The certification audit will be carried out by a qualified assessor and a Consumer Technical Expert (CTE) (if required).

The objectives of the Stage 2 audit are:

- To confirm that your organisation is adhering to its policies, procedures & objectives and practices the principals of continuous improvement and conforms with all the requirements of the HSQS;
- To verify that appropriate procedures, controls and guidelines are in place, and roles and responsibilities are defined;
- To engage with consumers during the audit to collect, examine and analyse evidence with respect to the HSQS;
- To review consumer files, follow up issues with consumers

Your organisation will be advised of any non-conformances arising from this assessment at the closing meeting. All non-conformances are required to be closed out before certification can be recommended. The recommendation for certification made by the auditor is then reviewed by an independent qualified report reviewer to make the final certification decision.

It will take a minimum of 30 days following the audit for the certificate to be issued. The certificate is issued electronically.

### **3.7 Surveillance Audits**

At least one surveillance audit is conducted between each certification/re-certification audit, as close as possible to 18 months from the previous audit date.

The surveillance audits will cover the core HSQS Standards 1, 3 and 4. At least one other standard will be chosen according to the results of the previous audit, complaints or significant changes. BSI will record the justification for the standards chosen in the audit report.

On your request, BSI may split the 18 monthly surveillance audit into two annual audits to align with other annual audits you may be certified to (e.g. ISO 9001). Audits that are split will cover half the required material at each audit to ensure that all the required ...making excellence a habit.™

standards are assessed before the next re-certification audit. BSI will notify the Department of any such request.

### **3.8 “Out of Cycle” assessment**

An out of cycle can be conducted by BSI at any time if requested by the Department.

Where a certification cycle varies from the general requirements stated above, BSI shall seek agreement from the department and maintain the revised certification cycle e.g. transition of new service types into the scope of certification, transition to the NDIS, alignment of multiple certifications, or in the event of a natural disaster etc.

### **3.9 Re-Assessment Audits**

The re-assessment cycle for this program is three (3) yearly. Your reassessment audit must be conducted within three (3) years of the initial certification or last recertification. If it is not completed and processed within the required time frame, your certification will no longer be valid.

The re-assessment audit must take place three (3) months prior to the expiry date. Extensions on the re-certification dates are only granted following written approval from the Department.

### **3.10 The Audit Team**

BSI is not required to supply a Consumer Technical Expert (CTE) as part of the audit team. However, a consumer technical expert may be included in the audit team. All BSI auditors that audit HSQF have technical knowledge and experience in the Human Services sector and are qualified to assess management systems and the HSQF Standards.

If the audit duration is 6 days or greater then BSI is required to have more than one auditor on the audit team.

## **4 Audit Planning and Consumer Participation**

Your BSI auditor will provide you with an audit plan outlining what will be assessed during your audit based on the information you have provided on your service types (including NDIS registration groups), sites and consumer numbers for each service type.

Consumer feedback is an integral part of the HSQF assessment. Your BSI auditor will ask you for a de-identified list of all consumers who have accessed your service within the previous 12 months. The auditor will randomly select consumers to interview and review files from this list, ensuring the selection represents a broad range of consumers.

Consent is required before the BSI auditor can interview consumers or access their files. Your BSI auditor will provide you with a consent form template to be completed by the selected consumers. The signed consent forms will be sighted by the BSI auditor.

**Note:** Consumers have the right not to be involved in the audit process.

## **5 Reporting**

A BSI E report is to be written and provided following each audit undertaken within your organisation. The audit report will include the following information;

- An executive summary of the overall findings (conclusions) on the effectiveness of your system in meeting the requirements of the standard
- Ratings of the non-conformances against each KPI and each standard
- Suggestions for continual improvement
- Positive finding areas
- Times allocated for the activity, number and type of interviews conducted with consumers

Non-conformances will be discussed with your team during the assessment and outlined at the exit meeting.

Reports will be provided to your organisation within 10 working days of the last day of the audit. BSI will update the report with the amendments within 5 working days. This report is also provided to the Department by BSI.

If you are unclear as to the meaning of anything in your report, please contact your Client Manager.

It is your responsibility to respond to the non-conformances detailed in your audit report by the designated time frame (refer to section 5 below). Failure to do so may result in suspension or cancellation of your certification.

A copy of the completed report and your certificate will be forwarded to the Department even if the decision is not to certify.

## **6 Non-Conformances**

A list and description of non-conformities are detailed in HSQF audit report. These ratings are in accordance with those outlined in the Standard.

Major non-conformances can be raised as a single major non-conformance against any indicator but a major non-conformance will also be raised if there are three or more non-conforming indicators in the same standard or three or more non-conforming standards.

Should a major non-conformance be raised the frequency of audits may be increased to ensure that the issue has been resolved. Changes in audit frequency will be communicated with your organisation as required.

Your organisation is required to provide a response to the report within 10 working days of receiving the audit report. This response should include a corrective action plan.

The assessor will conduct a desk top review of the implemented corrective action within 3 months of the audit. Major non-conformities will require an on-site visit or re-audit for a major non-conformity.

If a critical non-conformance is raised an on-site follow-up or re-audit is to be conducted within 3 months.

Non-conformances are required to be closed out within 12 months at a follow up or re-audit. If there is no resolution then the non-conformance will be escalated to a major non-conformance.

Observations are comments, which may include praise, or comments that may be relevant for the next audit. Actions do not necessarily have to be taken for observations however; it is recommended that these have been considered as part of your continuous improvement process.

## **7 Certification Decision**

After non-conformances have been closed out, the findings and recommendations made in the audit report are subject to a technical review process prior to certification being granted. The Technical Reviewer is independent of the audit process.

## **8 Certificates**

Your certificate will be issued electronically.

When copies or elements of the certificate are used in tenders or offered to potential or existing customers, the certificate should be accompanied by the scope of certification document (if issued separately) as it is important for them to understand the scope of activities for which certification has been granted (see 'scope' below).

Incorrect use of the certificate can result in a customer being misled as to the extent of your organisation's certification.

All original certificates remain the property of BSI Group ANZ Pty Ltd and must be returned on request.

The reassessment cycle for this program is three (3) yearly.

### **8.1 Scope of Certification**

The scope of certification fully details the scope of your organisation's certification in terms of:

- Names and addresses of all locations covered by the certification;
- Achievement of certification to the relevant standard(s);
- Service Types/ NDIA registration groups for each location covered by the certification

Your required scope of certification is based on the services your organisation delivers. This includes service types that are funded by the QLD Department of Communities, Child Safety and Disability Services and NDIS Registration Groups.

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Note:

Specified NDIS Registration Groups are in scope for HSQF until July 2019 or until national quality and safeguards for NDIS are in place.

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Your organisation is required as part of the Terms & Conditions to ensure that BSI has been formally briefed in a timely manner when any variations occur. Delays in notifying BSI of changes to

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your organisation may compromise your organisation's certification status.

## **8.2 Refusal of Certification**

In the event that your organisation is unable to comply with the requirements of the relevant standard, BSI may refuse to grant certification. The decision to refuse certification, and the grounds for that decision, will be communicated to your organisation in writing.

## **8.3 Suspension or Refusal of Certification**

If your organization has no consumers using its services that are in scope for HSQF (including NDIS Registration Groups), then you can request voluntary suspension.

Your organization can also voluntarily suspend its certification while not in receipt of Department funding.

Voluntary suspension is only permissible for up to six months. Within this time your organisation is required to demonstrate full conformity with the HSQF scheme requirements. This means your organisation will need to have an audit prior to your six month expiry date.

If the organization is not able to demonstrate full compliance with the HSQF scheme requirements then certification will be withdrawn.

If your organisation's certification is suspended or refused, you are required to meet the following requirements for the period that you are suspended:

- Withdraw and cease to use any advertising or promotional material that promotes or advertises the fact that your organisation is certified;
- Ensure that all copies of certificates and scopes of certification are removed from areas of public display; and
- Cease to use the certification mark on stationery and other documents including media and packaging that are circulated to existing and potential clients, or in the public domain.

Your organisation is required to advise BSI in writing of the action taken with respect to the requirements listed above;

- BSI will advise your organisation in writing of the certification processes that will need to be completed to restore certification
- During the period of suspension your organisation shall continue to pay all fees levied by BSI

## **8.4 Accreditation Status**

Certification to this standard is accredited to ISO17065:2012  
BSI holds accreditation for this local standard with JAS-ANZ.

## **9 Use of Logos**

You are entitled to use the appropriate BSI 'kitemark' accreditation mark whilst you maintain certification to this program with BSI. For a copy of the BSI "kitemark" logo, visit our website at <http://www.bsigroup.com/en-AU/Our-services/BSI-Assurance-Mark-Logos/>

Use of the logo is subject to Condition and Rules of its application which is stated in the [BSI Assurance Mark Guidelines](#)

Organisations that have been granted certification to the HSQS are also entitled to use the JAS-ANZ Accreditation Symbol. The rules for the use of this mark are governed by JAS-ANZ. The JAS-ANZ Accreditation Symbol is required to be used in conjunction with BSI Accreditation marks.

Specifications and use of the JAS-ANZ Accreditation Symbol are described in the [JAS-ANZ Mark Use Guidelines document](#).

## **10 Standard Owner Information**

The Queensland government Department of Communities, Child Safety and Disability Services are the Standard Owner. As such, all reports and non-conformities are reported to The Department as required by the scheme requirements.

### **10.1 Notification to the Standard Owner**

Where BSI has concerns about your organisation's capacity to meet the HSQS on an on-going basis, BSI will seek agreement from the Department to increase or vary the audit frequency.

Where your organisation has other annual audits under JAS-ANZ accredited schemes such as ISO 9001 and/or NSDS, BSI may split the maintenance audit to align with annual audits if requested (i.e. conduct 2 maintenance audits between certification/recertification audits). The Department will be notified of your organisation's request to split the audit and the dates and sites to be included at each surveillance/maintenance audit.

BSI is required to advise the Department immediately if there is evidence that your organisation has put a person accessing its services at risk of significant harm.

BSI may be requested to provide further details relating to non-conformances raised at HSQS audits.

## **11 Confidentiality**

BSI will treat all information in accordance with the Child Protection Act 1999, the Disability Services Act 2006 and the Information Privacy Act 2009.

BSI is required to obtain consent from the department before disclosing information about a child in care.

BSI may provide information about the care provided to children in care under the Child Protection Act 1999 to the department without seeking consent.

BSI can request the organisation to de-identify records including the files of people using the services to allow sampling if the need arises. For example: to investigate complaints or when there is a lack of consent for file access.

BSI will not list the address of identified 'safe houses' on your HSQF certificate.

## 12 Additional Process Requirements

- Your organisation is required to keep a record of all known complaints relating to meeting the requirements of the HSQS. These records must be made available to the audit team and BSI when requested
- Your organisation is required to demonstrate that you have taken appropriate action to address these complaints through investigation and correct any deficiencies found. These actions must be documented
- Your organisation must ensure that consumers are offered information about the audit process and independent support to engage in the process prior to any consent being obtained
- Participation by consumers in audits is at all times voluntary and be based on the principal of informed consent
- Your organisation is required to make all necessary arrangements to allow the evaluation and surveillance activities to take place. This includes but is not limited to; Equipment, Product, Locations, Personnel and Sub-contractors
- Your organisation is required to complete the Client Details Form and return to your Client Services Officer prior to 6 weeks from the start of your audit
- Prior to your audit, the BSI auditor will contact you for a de-identified consumer list including all your consumers. Your organisation is required to provide this information in a timely manner

## 13 Additional Obligations

Following certification, there are a number of managerial responsibilities which your organisation will need to observe to maintain your certification. These include:

- Continue compliance with the relevant standard(s) and scheme requirements at and the conditions of certification at all times;
- Comply with the BSI Standard Commercial Terms and Conditions and obligations as specified in this document as well as other guidance documentation that may be specifically provided from time-to-time;
- Implement appropriate changes as communicated by BSI in a time appropriate manner;
- Conduct regular internal reviews of your system, with appropriate documentation of such reviews and of any subsequent corrective actions;
- Advise BSI of any changes without delay to circumstances that may affect certification including significant changes in the structure (key responsibilities and management system), ownership and operations of your organisation to enable the impact of such changes on the certified ownership system to be evaluated;

Other examples of such changes include but are not limited to;

- Authorised Representative
- Business name (Legal entity) and Trading Name (where applicable), ABN
- Ownership
- Key management responsibilities

- Contact details
  - Location, site addresses
  - Business activity/ies, scope of certification
  - Number of employees, covering all shifts and sites
  - Major management system changes and capability information
  - Billing Details
- Notify BSI of any litigation or serious events or matters that relate to the scope of your certification
  - Notify BSI immediately if your organisation's funding ceases or the responsible body revokes funding for any reason

### **13.1 Changes to your Organisation**

Your organization is required to advise BSI without delay of any changes listed above. Some changes to these details may impact on your certification.

BSI will re-confirm these details when booking your next assessment. These details are used to determine the sites, audit duration and number of assessors required for the audit activity.

If your organisation has recently become a NDIS provider, you have 12 months or until your next scheduled audit (whichever occurs first) to extend the scope on your certificate. This may require additional audit time.

### **13.2 Observers**

From time to time BSI requires an Observer to be in attendance at an audit. This may be related to training of new staff and witness assessment of existing staff. It is a requirement of BSI's accreditation that your organisation allows these activities to occur.

Failure to allow this activity to occur may result in cancellation of your certification.

BSI will, at all times, ensure that the use of observers is kept to a minimum and your organisation will be advised prior to the assessment activity.

The Observer does not take an active part in an assessment.

## **14 Misleading Statements**

Your organisation is not permitted to use its certification in a manner that could bring BSI into disrepute. This includes making misleading or unauthorized statements. If you are unsure if a statement could be misleading you are advised to contact BSI prior to making the statement. Statements include but are not limited to the use of the logo on non-certified product, advertising (including your website) and internal communication.

If your organisation is required to provide copies of your certification documents these must be reproduced in its entirety. Failure to do so may be misleading to the recipient as to the scope of certification.

## **15 Complaints and Appeals**

BSI takes complaints relating to our service delivery seriously and all complaints will be investigated and the originator of a complaint will be advised of the outcomes, as appropriate.

BSI will also investigate legitimate documented complaints, relevant to operation of the system, from customers of your organization. Organizations shall, at all reasonable times, provide representatives of BSI with access to its premises and records for the purposes of investigating such complaints.

If your organization's application for certification has been refused, or your organization's certificate has been suspended, cancelled, or reduced in scope, you may appeal against the decision to a Review Committee.

BSI shall include a CTE in each appeal hearing.

Should you wish to appeal the certification decision your organization is required, within 28 days of the disputed advice from BSI, lodge a notice of appeal with your Client Manager in writing to initiate this process.

To raise a complaint or appeal against the service delivery by BSI or audit outcome please notify;

Stephanie Vincent

GM Compliance and Risk (ANZ)

Email: [Stephanie.vincent@bsigroup.com](mailto:Stephanie.vincent@bsigroup.com)

Phone: 1300 730 134