



# Certification Audit Report

Enable WA Inc

National Disability Insurance Scheme

Practice Standards



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**1. Organisation details**

Quantum Licence number	<b>NDIS0359</b>	NDIS Application number	<b>4-G2NTPWJ</b>
Client contact	James Hughes		
Email	james@enablewa.org.au		
Website	Enablewa.org.au		
Provider legal name	Enable WA Incorporated		
Provider business name	Enable WA Incorporated		
Head office address	104 Beach Road BUNBURY WA 6230		

**Audit scope**

Scope of certification	To assess compliance against the NDIS Practice Standards for the modules of registration.
Modules	Core Module (including 4.3 and 4.5) Module 1 Module 2 Module 2A Module 3
Registration groups	0128 Therapeutic Supports 0126 Ex Phys Pers Training 0125 Participate Community 1023 Assistive Prod- Household Task 0118 Early Childhood Supports 0117 Development Life Skills 0116 Innov Community Participation 0115 Daily Tasks/ Shared Living 0110 Behaviour Support 0108 Assist Travel/ Transport 0107 Assist Personal Activities 0106 Assist Life Stage Transition 0104 Assist Personal Activities High 0102 Assist Access/ Maintain Employment 0101 Accommodation / Tenancy



Audit type	Stage 2 Certification	
Audit duration and dates	Start date: 07/02/2022	End date: 09/02/2022
	Number of Auditor Days: 6	
<b>Audit team</b>		
Audit team leader	Kelly Lindley	
Audit team members	Puru Chettri and Cathy Boyce (TE)	
Witness/Observer	NA	
<b>Changes to client information from application</b>		
Name/address	NA	
Employee numbers	791	
Total participant numbers	897	



**Opening and closing meeting attendance**

<b>Name</b>	<b>Position</b>	<b>Opening Meeting</b>	<b>Closing Meeting</b>
David Naughton	CEO	x	x
Monique Venter	HR Manager	x	x
Todd Falco	CFO	x	x
Lauren Aldridge	RN	x	x
Ian Mumford	Hub Manager	x	x
Jason Hall	Hub Manager	x	x
Sarah Pepper	Quality and Safeguarding	x	x
Fiona Stephens	Hub Manager	x	x
Rhea Divall	Manager	x	x
James Hughes	Quality and Safeguarding	x	x
Sam Nicholl	Support Coordinator	x	x
Lisa Brunt	Support Coordinator		x
Tamara Tye	Support Coordinator		x
Sharon Wikinson	Support Coordinator		x
Maddy Ingraham	Support Coordinator		x
Gemma Aldersea-Fielder	Support Coordinator		x
Niomi Mathew	Support Coordinator		x
Daniel Hutchins	Support Coordinator		x
Delle Postlewaithe	Support Coordinator		x
Mitchell Burkett	Support Coordinator		x
Kaleb Norman	Support Coordinator		x
Liah Myers	Support Coordinator		x
Suzanne Gutteridge	Support Coordinator		x
Kiarra Lenane	Support Coordinator		x
Trish Bardsley	Support Coordinator		x



**Opening and closing meeting attendance**

<b>Name</b>	<b>Position</b>	<b>Opening Meeting</b>	<b>Closing Meeting</b>
Yolanda Steenkamp	Support Coordinator		x
Kelly Lindley	Quantum Team Leader	x	x
Puru Chettri	Quantum Auditor	x	x
Cathy Boyce	Quantum Nurse Tech Expert		x



**1 Executive Summary**

**1.1 Introduction**

Quantum Certification Services Pty Ltd conducted this audit in accordance with the audit plan objectives; requirements of *ISO/IEC 17065:2012 Conformity assessment – Requirements for bodies certifying products, processes and services* and the *NDIS (Approved Quality Auditors Scheme) Guidelines 2018*.

**1.2 Service background**

EnableWA is an organisation based in the Southwest of Western Australia that have been delivering services for over 30 years. During the past 3 years, the organisation has experienced significant growth and now provide supports across the Perth metropolitan areas also. The organisation has a Board with six members and operate from seven hubs across the Southwest and Metropolitan area. The Hub model is where self-management is promoted and supported by the governance of the organisation. More recently, the organisation has introduced Therapy Services that run from the hubs. The service is focused on clients with a well-established culture of ‘the client comes first’. Enable currently support almost 900 clients with 80 of these considered to require high care support needs.

**1.3 Audit conclusion and recommendation**

A Stage 2 Audit was conducted to determine conformity to the *National Disability Insurance Scheme (Quality Indicators) Guidelines 2018*. The audit has six minor nonconformities. A written copy of the Corrective Action Register has been provided to the CEO.

In addition to the identified Minor nonconformities, there are four opportunities for improvement that have been identified and documented in this report. The organisation provided additional documentation throughout the audit as required and supported and acknowledged all opportunities of improvement that were identified.

The Stage 2 Audit did not identify any Major Nonconformities or critical risks.

Feedback from staff, participants and families was of a very high standard and supported the strong, open and timely communication. Of particular strength was the matching process that Enable use to ensure that the participant receives supports from the most appropriate and suitable support worker. In addition to this, Enable try to establish a network of support staff so in the event of an absence or a staff on leave, there is always another support worker who can provide the supports.

A recommendation is made to progress to certification.

**1.4 Non-conformities**

Reference	Description
Independence and Informed Choice <b>Minor nonconformity: NC014</b>	Unable to sight at the time of the audit, any evidence to support how each participant’s autonomy is respected, including their right to intimacy and sexual expression.



<p>Independence and Informed Choice</p> <p><b>Minor nonconformity: NC015</b></p>	<p>Unable to sight at the time of the audit, any evidence to support how each participant’s right to access an advocate (including an independent advocate) of their choosing is supported, as is their right to have the advocate present</p>
<p>Incident Management</p> <p><b>Minor nonconformity:NC016</b></p>	<p>At the time of the audit, evidence was not available to support how each participant is provided with information on incident management, including how incidents involving the participant have been managed.</p>
<p>Human Resource Management</p> <p><b>Minor nonconformity: NC017</b></p>	<p>Whilst all staffed acknowledged that they are well supported and have ongoing check ins and supervision, evidence of how the performance of workers is managed, developed and documented, including through providing feedback and development opportunities was not available at the time of the audit</p>
<p>Service Agreement</p> <p><b>Minor nonconformity: NC018</b></p>	<p>At the time of the audit evidence was not available to support that Service agreements set out the arrangements for providing supports to be put in place in the event of an emergency or disaster.</p>
<p>Safe Environment</p> <p><b>Minor nonconformity: NC019</b></p>	<p>At the time of the audit, evidence was not available to support how protocols are in place for each participant about how to respond to medical emergencies for them; and how each worker providing support to them is trained to respond to such emergencies (including how to distinguish between urgent and nonurgent health situations in order to avoid delays.</p>

**1.5 Opportunities for improvement**

Reference	Description
<p><b>Privacy and Dignity</b></p>	<p>There is an opportunity for improvement for Enable to review the information provided and the process with signing documentation so all participants or their representatives are made aware of Media Consent Form and Consent to Release Information Form and how they can amend these as and when required</p>
<p><b>Violence, Abuse, Neglect, Exploitation and Discrimination</b></p>	<p>There is an opportunity for improvement for Enable to review their intake documentation to clearly provide each participant with information about the how to access and use an advocate. This also refers to supporting and providing staff with clarity on how to obtain this information.</p>
<p><b>Feedback and Complaints Management</b></p>	<p>There is an opportunity for improvement for Enable to review the information provided to participants and families about complaints and feedback, so they are familiar and confident with knowing the process.</p>





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	There is an opportunity for improvement for Enable to review the information provided to participants and families about complaints and feedback and provide alternative methods for lodging a complaint or providing feedback other than via the website.
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**1.6 Review of actions taken on non-conformities identified during the previous audit if applicable**

All non-conformities from the Stage one audit have been closed off.

**1.7 Description of any unresolved issues resulting from the audit**

There were no unresolved issues identified as a result of the audit.



1.8 Rating summary

Module	Practice Standard	Rating			
		Best Practice (3)	Conformity (2)	Minor Non-conformity (1)	Major Non-conformity (0)
Core Module	<b>Rights and Responsibilities</b>				
	Person-centred supports				
	Individual values and beliefs		X		
	Privacy and Dignity		X		
	Independence and Informed Choice			X	
	Violence, Abuse, Neglect, Exploitation and Discrimination		X		
	<b>Governance and Operational Management</b>				
	Governance and Operational Management		X		
	Risk Management		X		
	Quality Management		X		
	Information Management		X		
	Feedback and Complaints Management		X		
	Incident Management			X	
	Human Resource Management			X	
	Continuity of Supports		X		
	Emergency and Disaster Management		X		
	<b>Provision of Supports</b>				
	Access to Supports		X		
	Support Planning		X		
	Service Agreements with Participants			X	
	Responsive Support Provision		X		
	Transitions to or from the provider		X		
	<b>Support Provision Environment</b>				
	Safe Environment			X	
Participant Money and Property		X			
Management of Medication		X			
Mealtime Management		X			
Management of Waste		X			
Module 1	<b>High Intensity Daily Personal Activities</b>				
	Complex Bowel Care		X		
	Enteral (Naso-Gastric Tube – Jejunum or Duodenum) Feeding and Management		X		
	Severe Dysphagia Management		X		
	Tracheostomy Management		X		
	Urinary Catheter Management		X		
	Ventilator Management			N/App	
	Subcutaneous Injections			N/App	
Complex Wound Management			N/App		
Module 2	<b>Specialist Behaviour Support</b>				
	Behaviour Support in the NDIS		X		
	Restrictive Practices		X		



	Functional Behaviour Assessments and Behaviour Support Plans		X		
	Supporting the Implementation of the Behaviour Support Plan		X		
	Behaviour Support Plan Monitoring and Review		X		
	Reportable Incidents involving the Use of a Restrictive Practice		X		
	Interim Behaviour Support Plans		NA		
<b>Module 2A</b>	<b>Implementing the Behaviour Support Plans</b>				
	Behaviour Support in the NDIS		X		
	Regulated Restrictive Practices		X		
	Supporting the Assessment and Development of Behaviour Support Plans		X		
	Behaviour Support Plan Implementation		X		
	Monitoring and Reporting the Use of Regulated Restricted Practices		X		
	Behaviour Support Plan Review		X		
	Reportable Incidents involving the Use of a Restrictive Practice		X		
	Interim Behaviour Support Plans		NA		
<b>Module 3</b>	<b>Early Childhood Supports</b>				
	The Child				
	The Family		X		
	Inclusion		X		
	Collaboration		X		
	Capacity Building		X		
	Evidence-Informed Practice		X		
Outcome Based Approach		X			



**1.9 Rating definitions**

Rating	Attainment Level	Interpretation
3	Conformity with elements of best practice	The NDIS provider can clearly demonstrate conformity with best practice against the criteria. Best practice is demonstrated through innovative, responsive service delivery, underpinned by the principles of continuous improvement of the systems, processes and associated with the outcomes.
2	Conformity	The NDIS provider can clearly demonstrate that the outcomes and indicators are met as proportionate to the size and scale of the provider evidence may include practice evidence, training, records and visual evidence. <b><i>This would mean there was negligible risk and certification can be recommended.</i></b>
1	Minor Nonconformity	<p>A rating 1 will require a corrective action plan which reduces the likelihood of any risks identified occurring or impacting participant safety before certification or verification can be recommended one of two situations usually exists in relation to minor nonconformity:</p> <ul style="list-style-type: none"> <li>· There is evidence of appropriate process (policy/procedure/guideline etc.), system or structure implementation, without the required supporting documentation</li> <li>· A documented process (policy/procedure/ guideline etc.), system or structure is evident but the provider is unable to demonstrate implementation review or evaluation where this is required</li> </ul> <p>All minor NCs must be closed within 18 months of the issue date or at the next mid-cycle/Recertification audit.</p>
0	Major Nonconformity	<p>The NDIS provider is unable to demonstrate appropriate processes systems or structures to meet the required outcome and indicators and/or the gaps in meeting the outcome present a high risk Three Minor NonConformities within the same module may also constitute a Major NonConformity <b><i>A rating of 0 will preclude a recommendation for certification.</i></b></p> <p>All Major NCs must be closed out prior to Certification being recommended and within 3 months of the issue date.</p>



#### **1.10 Confidentiality statement**

Quantum Certification Services, its employees, auditors and contractors are required to keep all information collected during the audit confidential. Confidential information will not be disclosed to a third party, except that required by legislation, accreditation bodies or regulators.

Quantum Certification Services, its employees, auditors and contractors have signed confidentiality deeds and shall only access information relevant to the audit scope, Standard(s) and purpose of the audit.

#### **1.11 Disclaimer**

This report has been prepared in respect of a client's application for assessment by Quantum Certification Services Pty Ltd. The purpose of the report is to comment upon evidence of the Client's compliance with the Standard or other specified statutory, regulatory or contractual criteria.

The content of this report applies only to matters, which were evident to Quantum Certification Services Pty Ltd at the time of the audit, within the audit scope and of the samples taken.

Quantum Certification Services Pty Ltd does not warrant or otherwise comment upon the suitability of the contents of the report or the certificate for any particular purpose or use. Quantum Certification Services Pty Ltd accepts no liability whatsoever for consequences to, or actions taken by, third parties as a result of, or in reliance upon information contained in this report or certificate.

# Enable WA Inc

## 2 Part 2 Core Module

### 2.1 Division 1 - Rights and Responsibilities

#### 2.1.1 6 Person-centred supports

**Outcome:** Each participant accesses supports that promote, uphold and respect their legal and human rights and is enabled to exercise informed choice and control. The provision of supports promotes, upholds and respects individual rights to freedom of expression, self-determination and decision-making.

**Rating**  
2

**Findings:**

Enable have developed Policies and Procedures to support their approach to the delivery of Person-Centered Supports. This includes the Participation and Inclusion for participants Policy and Procedure that demonstrates that Enable WA acknowledges that all individuals have the right to opportunities, which will enable them to enhance, fulfil and demonstrate a valued role in their community.

Enable is committed to supporting Participants in the same opportunities to develop and maintain skills to participate in the same recreational, work, social and learning opportunities that are valued and accessed by the community

All new staff undertake online Induction training that is comprehensive and supports their understanding of a Person-Centered Approach including examples and outcomes. Included in the Induction training is the NDIS Code of Conduct with an overview of how this relates to Human Rights.

File reviews and interviews confirmed that the Client's family, significant others, therapists, community supports, other services and specialists are recorded in Health Care Plan and support plan. Participants are supported to engage with their family, friends and chosen community. Enable staff provide supports to the participant across a number of areas including assisting with community engagement, socialising, attending outings, activities and appointments as directed by the participant and this was evidenced from the file reviews.

Some family members who were interviewed spoke of the consistency by their coordinator of maintaining contact by phone and or visits as and when required. Consistent, timely and respectful communication was noted as a real strength of Enable

## Enable WA Inc

2.1.2 7 Individual values and beliefs	
<b>Outcome:</b> Each participant accesses supports that respect their culture, diversity, values and beliefs.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support their approach in respecting and supporting culture, diversity, values and beliefs. This includes the Cultural and Sexual Diversity Policy and Procedure that is in place to provide guidance and to make certain that Enable WA Board members, staff, participants and/or families are aware of ensuring that the cultural and sexual diversity of all is recognised, valued and respected.</p> <p>Staff interviews were able to confirm that there is a recognition of and respect for values and cultural diversity of its staff, participants, and the community in which it operates. Enable undertake a matching process between their staff and participants to ensure there is a link between the acknowledged values and cultural diversity as discussed at the initial meeting.</p> <p>The acknowledgement of Individual values and beliefs is Incorporated into Service Agreement and supported during the client interview where discussions take place to identify and document any particular individual values and beliefs. This is then incorporated in then support plan.</p>	

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2.1.3 8 Privacy and dignity	
<b>Outcome:</b> Each participant accesses supports that respect and protect their dignity and right to privacy.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support their practices in maintaining privacy and dignity. Included is the Privacy, Dignity and Confidentiality Policy and Procedure that demonstrates that Enable WA recognises its obligation to protect the privacy and dignity of participants under the current Australian Privacy Principles. The purpose of this policy is to establish standards of privacy, dignity, and confidentiality in the organisation's dealings with prospective, present, and past users of services.</p> <p>Enable utilise a secure CMS (Carelink) and also share notes and information through MS Teams. All staff have individual log ins and are only able to access information relevant to the participants they are supporting.</p> <p>File reviews identified that Enable only collect relevant information about the Participant that can be shown to be directly relevant to effective service delivery and the organisation's duty of care responsibilities. The collection and storage of information is discussed with the participant and their nominee at the time of intake so they understand the mechanisms that Enable use and how they can access their information at any time. Participant files (for most participants) contained a signed Client Consent for the Release of Information and a Multimedia Consent Form.</p> <p>Interviews with participants and /or their nominees confirmed that they had been provided with information supporting their privacy and dignity and understood their rights relating to this. Most who were interviewed confirmed that they felt complete respect from the staff regarding their privacy and dignity.</p>	
<b>Opportunity for Improvement</b> <p>There is an opportunity for improvement for Enable to review the information provided and the process with signing documentation so all participants or their representatives are made aware of Media Consent Form and Consent to Release Information Form and how they can amend these as and when required.</p>	



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2.1.4 Independence and Informed Choice	
<b>Outcome:</b> Each participant is supported by the provider to make informed choices, exercise control and maximise their independence relating to the supports provided.	<b>Rating</b> 1
<b>Findings</b> <p>Enable have developed Policies and Procedures to support their practices is supporting Independence and Informed Choice. Included is the Supported Decision Making and Dignity of Risk Policy and Procedure that demonstrates that Enable WA acknowledges that all participants have a human right to make decisions about their own life and to have those decisions respected. Enable WA understands and affirms that cognitive impairment is not a reason for a person to be excluded from the decision-making process about their own life.</p> <p>File reviews confirmed that All clients had thorough personalised care plan that outlined their language and communication methods. It was clear from the interviews that clients had power over decision making. All participants confirmed that they felt empowered to choose their staff and provide feedback when they were not satisfied. There were open lines of communication between client and enable at all times.</p> <p>Participants were all supported to make decisions based on information provided. Family and significant others are encouraged to be a part of the decision-making process. Where children are the clients, decision making reverts to the parents. All participants and families were happy with their services and felt that they had been given sufficient time to consider and review their options and seek advice if required.</p> <p><b><u>Minor nonconformity: NC014</u></b></p> <p>Unable to sight how each participant's autonomy is respected, including their right to intimacy and sexual expression.</p> <p><b><u>Minor nonconformity: NC015</u></b></p> <p>Unable to sight how each participant's right to access an advocate (including an independent advocate) of their choosing is supported, as is their right to have the advocate present.</p>	

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2.1.5 10 Violence, Abuse, Neglect, Exploitation and Discrimination	
<b>Outcome:</b> Each participant accesses supports free from violence, abuse, neglect, exploitation or discrimination.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support their approach in supporting and ensuring supports are provided that are free from violence, abuse, neglect, exploitation or discrimination. Included is the Responding to Abuse and Neglect of a Client Policy and Procedure that provides specific guidelines on what to do when it is suspected, observed or alleged that a client is being or has been abused or neglected by anyone including employees, volunteers' contractors, students, host families, other clients, family members, carers, and friends of clients, or any other person</p> <p>All new staff undertake online Induction training that is comprehensive and supports their understanding of abuse and the reporting requirements. They are provided with links to videos for training modules that are a part of the mandatory training in understanding abuse and responding to abuse. Links are also provided to reference material and resources on the Enable website. The online induction also includes a training module for the NDIS Code of Conduct with an overview of how this relates to Human Rights.</p> <p>Staff are provided with ongoing information and resources from their Supervisor through the Teams channels that have been established. This supports their understanding of this outcome and their role in identifying and responding to any allegations.</p> <p>All incidents are immediately reported to the Supervisor and logged as an Incident Report. This then generates an escalation process to identify if the incident is a reportable incident or one that needs to be managed internally.</p>	

## Enable WA Inc

### Division 2 - Governance and Operational Management

2.1.6 11 Governance and Operational Management	
<b>Outcome:</b> Each participant’s support is overseen by robust governance and operational management systems relevant (proportionate) to the size, and scale of the provider and the scope and complexity of supports delivered.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support their governance and management systems in line with the complexity of supports delivered. Included is the Enable Western Australia Governance Policy that has been developed to ensure all activities of Enable Western Australia (“Enable”) are conducted ethically, responsibly and effectively within the organisations values, legislative requirements and relevant standards. Supporting this is the Operational Business Plan and Strategic Plan. Enable has also implemented a Conflict-of-Interest Policy and Procedure that demonstrates that actions and decisions taken at all levels in the organisation are informed, objective and fair.</p> <p>Board members interviewed explained that as a standing item, at the commencement of each board meeting, all parties are required to acknowledge any conflict of interest before the meeting commences. The Board outlined opportunities and supports for mentoring and providing skills to support the organisation.</p> <p>A Conflict-of-Interest Register was sighted with documentation to support the identification of any conflicts across the organisation. The Register is maintained by the Executive team</p> <p>The Financial Management of Enable is overseen by the Chief Financial Officer who reports directly to the board. Enable contract an independent auditor to review all of their financial records each year and this supports the organisation to identify any gaps and/or opportunities for improvement.</p> <p>Enable have a parent representative on their Board who is able to provide insight into the needs of the participants. Supporting this is an initiative that Enable is currently rolling out and this is the establishment of a Client Advisory Group. Expressions of interest have been requested with the initial first meeting to take place on 17/02/2022.</p>	

## Enable WA Inc

2.1.7 12 Risk Management	
<b>Outcome:</b> Risks to participants, workers and the provider are identified and managed.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support Risk Management across the organisation. This includes the Risk Management Policy and Procedure that has been established to promote an awareness of risk and the importance of risk management in the workplace. This policy includes the Duty of Care principles to ensure that all workers must do what is reasonable to prevent harm, loss or injury to another. This can be physical harm, economic loss or psychological trauma. Concurrently, Dignity of Risk must be upheld for all clients by providing information to have clients make informed decisions about their actions.</p> <p>Management provided an overview of the implementation of the Risk Management System and confirmed that Risk is now added to the board agenda as a standing item.</p> <p>A comprehensive Risk Register has been implemented and includes all areas of the business and anything risk related. the Risk Register is managed by the COO and all risks are captured and monitored through the use of Risk Ware- Enterprise Risk Ware management. This captures risk assessments and reviews, identifies risks, consequences, treatments, options and who is responsible. Some of the incidents across the organisation that are reported, also feed into the risk management system,</p> <p>Participant Risk assessments are conducted to ensure the delivery of services can be provided in a safe environment. All staff have a joint responsibility in the management of risk as well as the responsibility to share risk information, with consumer consent, to other parties who may be delivering shared care.</p> <p>All files reviewed included a completed Individual Risk Assessment</p>	

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2.1.8 13 Quality Management	
<b>Outcome:</b> Each participant benefits from a quality management system relevant and proportionate to the size and scale of the provider, which promotes continuous improvement of support delivery.	<b>Rating</b> 2
<p><b>Findings:</b></p> <p>Enable have developed Policies and Procedures to support sound Quality Management practices. These include a Development and Review Policy and Procedure to support staff and management with guidelines for the development and review of policies and procedures at Enable WA. Supporting this outcome also is the Quality Management and Continuous Improvement Policy and Procedure to support and guide the commitment to continuous quality improvement.</p> <p>Enable has provided an Internal Audit Schedule that documents how ensures that all of the policies and procedures and associated practices are being implemented effectively and reviewed to identify any areas for process improvement.</p> <p>Management and the Board Chair demonstrated their understanding of the need for a Quality Management system and the importance of seeking feedback and using outcomes and evidence related data to support continuous improvement. Enable has two dedicated staff who have oversight and responsibility for the implementation and management across the organisations Quality and Safeguarding.</p>	

14 Information Management	Rating
<b>Outcome:</b> Management of each participant's information ensures that it is identifiable, accurately recorded, current and confidential. Each participant's information is easily accessible to the participant and appropriately utilised by relevant workers.	2
<p><b>Findings:</b></p> <p>Enable have developed Policies and Procedures to support the processes in place to ensure that each participants information is identifiable, accurately recorded, current and confidential. Included is the Records Management Policy and Procedure. Within this are the processes for record keeping and the storage of participant files and the information and documentation management checklist.</p> <p>Participant file reviews confirmed that consent forms are signed prior to commencement of services. This documents who the participant is consenting to share information with and also provides an opportunity to acknowledge if there are particular people and / or agencies they do not wish to share information with.</p> <p>Processes have been established so staff only have access assigned to them for the participants they are supporting. Access to the information is available via their phones through the use of Teams. Staff are required to comply with the Privacy policy and guidelines, and it was identified through interviews that they are very familiar with this and understand the need for security of participant information.</p>	

## Enable WA Inc

15 Feedback and Complaints Management	
<b>Outcome:</b> Each participant has knowledge of and access to the provider's complaints management and resolution system. Complaints and other feedback made by all parties are welcomed, acknowledged, respected and well-managed.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the management of feedback and complaints. The Complaints and Feedback Management Policy and Procedure supports the commitment of Enable to ensure that any person or organisation using Enable WA services or affected by its operations has the right to provide feedback or lodge a complaint. All concerns that are raised will be addressed in ways that ensure access and equity, fairness, accountability, and transparency. Supporting this is the Quality Management and Continuous Improvement Policy and Procedure.</p> <p>Supporting this is the Feedback and Complaints register that records all information and acknowledges outcomes. This is managed by a member of the executive team, and they monitor and report on the status of the complaints.</p> <p>Staff interviewed are aware of the organisational requirement to support feedback and complaints and do have an overarching understanding of being able to support the participant to complete a complaints form if they wish to. They undertake a training module during orientation to support their understanding.</p> <p><b><u>Opportunity for Improvement:</u></b></p> <p>To review the information provided to participants and families about complaints and feedback so they are familiar and confident with knowing the process.</p> <p><b><u>Opportunity for Improvement:</u></b></p> <p>To review the information provided to participants and families about complaints and feedback and provide alternative methods for lodging a complaint or providing feedback other than via the website.</p>	

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16 Incident Management	
<b>Outcome:</b> Each participant is safeguarded by the provider's incident management system, ensuring that incidents are acknowledged, responded to, well-managed and learned from.	<b>Rating</b> 1
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the management of any incidents. Included is the Incident Management Policy and Procedure that supports Enables commitment to ensure that incidents which occur in relation to the provision of services are managed consistently and effectively, and that workers can identify, manage, report, and resolve incidents. To ensure also that Enable WA are consistent with the requirements of the National Disability Insurance Scheme (Incident Management and Reportable Incident) Rules 2018</p> <p>All incidents are reported via Risk Ware and this generates a reporting chain to the correct manager as per the organisational structure. The Quality and Safeguarding team have oversight of the Incident Management system, and this then feeds into Continuous Improvement. The system has an option to select if the incident is a reportable incident or not as per the NDIS Reportable Incidents rules. Examples of reportable incidents were provided and showed a clear and timely process for the submission of these as per the rules.</p> <p>Enable staff have a sound understanding of Reportable Incidents and have been able to demonstrate their practices with this in line with the NDIS Incident Management and Reportable Incidents Rules.</p> <p><b>Minor nonconformity: NC016</b></p> <p>At the time of the audit, evidence was not available to support how each participant is provided with information on incident management, including how incidents involving the participant have been managed.</p>	

## Enable WA Inc

17 Human Resource Management	
<b>Outcome:</b> Each participant's support needs are met by workers who are competent in relation to their role, hold relevant qualifications, and who have relevant expertise and experience to provide person-centred support.	<b>Rating</b> 1
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support their Human Resource Management processes. Included is the Recruitment Policy and Procedure, Staff Clearances Policy, Induction Policy, Training and Development Policy and NDIS Worker Screening Policy. The policies provide guidance on the processes for attracting, selecting, and appointing staff with the required skills, knowledge and expertise to deliver supports to participants; and to ensure recruitment is managed according to standardised processes that are fair, transparent, and effective, and follow all legal requirements.</p> <p>Enable have developed position descriptions to define the roles, skills and knowledge required for each position. The review of staff files confirmed the presence of screening documentation, identification checks, induction and completion of mandatory training.</p> <p>Feedback from all staff supports the regular and ongoing communication and support provided to all staff across the organisation to support them in skills development. There are informal check ins and supervision sessions that are ongoing.</p> <p>Training opportunities are identified for staff through the Client Preferences Function in Carelink and this provides an opportunity for line managers to identify training requirements for each client specifically. A restriction in Carelink prohibits Support Workers to be listed as available for rostering with a specific client if the required training is not listed on the Support Worker Profile as completed. Once training has been completed, a training Feedback Form is provided at each training session, monitoring the quality and effectiveness of the training session. This however can be completed anonymously</p> <p>All staff are provided with training and information to support their understanding of Infection Prevention and Control.</p> <p><b><u>Minor nonconformity: NC017</u></b></p> <p>Whilst all staffed acknowledged that they are well supported and have ongoing check ins and supervision, evidence of how the performance of workers is managed, developed and documented, including through providing feedback and development opportunities was not available at the time of the audit.</p>	



## Enable WA Inc

18 Continuity of Supports	
<b>Outcome:</b> Each participant has access to timely and appropriate support without interruption.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support how participants access supports without interruption. Included is Service Coordination and Person-Centered Planning Policy and procedure that supports the commitment to using a strengths-based, person centred approach to service coordination to support participants to identify their individual needs and develop goals that will promote their independence and achieve optimal well-being and social participation.</p> <p>The day-to-day operations are managed through consistency in processes established and implemented from recruitment to training and rostering. Information is documented in their CMS to establish and confirm the staff who are trained and able to work with particular participants and this is aligned with the rostering system.</p> <p>Support Planning takes place with each participant and their nominee and is documented to support the development of a plan. The documentation capture preferences, needs and interests and allow for the recording of any special requirements including preference with staff.</p> <p>File reviews and interviews confirmed that enable have a very strong process in trying to match the most suitable support worker with the participant based on their particular interests.</p> <p>Interviews with participants and families outlined the communication and the processes in place to review and/ or update plans based on the participants needs and preferences.</p> <p>Enable have developed a process where they aim to have a team of support workers to if anyone is on leave and or unwell, another familiar support worker can jump in at short notice.</p>	

## Enable WA Inc

19 Emergency and Disaster Management	
<b>Outcome:</b> Emergency and disaster management includes planning that ensures that the risks to the health, safety and wellbeing of participants that may arise in an emergency or disaster are considered and mitigated, and ensures the continuity of supports critical to the health, safety and wellbeing of participants in an emergency or disaster.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support emergency and disaster management. Included is the Emergency Response and Recovery Policy and Procedure outlining their responsibility for safeguarding the organisation and its personnel, clients and visitors and ensuring that emergency and evacuation procedures and facilities are established, maintained and reviewed regularly and that they are appropriate and adequate for the organisation's identified needs. It is also the responsibility of Enable WA for ensuring that personnel have the appropriate training, information and instruction in emergency procedures and the use of emergency equipment and facilities.</p> <p>File reviews confirmed the presence of an Emergency Response Planner document for each individual participant.</p> <p>Management provided examples of the following plans and trials: Emergency Planning Response – Pandemic and Bushfire Busselton and Manjimup, Emergency planning Response – Pandemic Mandurah Australind, Emergency Planning Response – Pandemic North and South Metro.</p>	

## Enable WA Inc

### 2.2 Division 3 - Provision of Supports

20 Access to Supports	
<b>Outcome:</b> Each participant accesses the most appropriate supports that meet their needs, goals and preferences.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support how they will establish and provide supports. Included is the Access to Services Policy and procedure that supports the commitment to maximising access to the organisation's services for everyone eligible and to ensuring equity of access across eligible service users. Enable WA will work within its available resources while endeavouring to optimise access for people to services and activities</p> <p>Service agreements detailed the supports that would be provided and agreed upon based on the participants choices. During the initial intake, the Service Booking detail form is signed off by the participant and outlines all costs associated to the services they will receive.</p> <p>Staff provided an overview of how supports and plans are modified and/ or changed based on the participants needs. This is documented in the planning documentation and file notes.</p> <p>Enable utilise a Client Referral Assessment Matrix to establish the participant supports and determine if they are the best provider to meet the participants needs. This matrix also identifies if the participant will require high intensity supports and if so, the referral is then taken to a committee to establish what support can be provided.</p> <p>Participant and/or family interviews confirmed that they were driving service provision relative to their needs. They confirmed that there were ongoing discussions and regular communication to identify any areas of changed need or modification to the plan.</p>	

## Enable WA Inc

21 Support Planning	
<b>Outcome:</b> Each participant is actively involved in the development of their support plans. Support plans reflect participant needs, requirements, preferences, strengths and goals, and are regularly reviewed.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the planning process. Included is the intake and Referral Policy and procedure that outlines the commitment Enable WA has to ensuring that everyone who approaches the organisation for service is assisted either with access to the service or with an alternative strategy that addresses their needs. Supporting this is the Service Coordination and Person-Centred Planning Policy and Procedure supporting a strengths-based approach</p> <p>Support plans reflect participant needs, requirements, preferences, strengths and goals, and are regularly reviewed. In addition to the Support Plan is the individual risk assessments that is a comprehensive document that is completed as part of the intake process.</p> <p>Staff interviewed were all very familiar with the participants individual goals and could show where these are documented. Supporting this is the progress notes that are completed to align with the outcomes. Documentation is accessed and updated through Teams.</p> <p>Participant and/or family interviews confirmed that they were fully involved in the planning process and directing any changes.</p>	
22 Service Agreements with Participants	
<b>Outcome:</b> Each participant has a clear understanding of the supports they have chosen and how they will be provided.	<b>Rating</b> 1
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the development of a Service Agreement. Included is the Reviewing Participant Service Agreements Policy and Procedure that outlines what steps Enable WA will take when reviewing a participant's service agreement.</p> <p>Service Agreements are developed in conjunction with the participant and/or their family and include all of the required information to support the services they have chosen.</p> <p>File reviews confirmed that each participant has a signed and dated Service Agreement that captures the requirements for the services being delivered.</p> <p>Interviewees all stated that they had been provided with a thorough explanation of the Service Agreement and that Enable had worked through and explained the document to them and provided a copy of the signed document for their records.</p> <p><b>Minor nonconformity: NC018</b></p> <p>At the time of the audit evidence was not available to support that Service agreements set out the arrangements for providing supports to be put in place in the event of an emergency or disaster.</p>	

## Enable WA Inc

23 Responsive Support Provision	
<b>Outcome:</b> Each participant accesses responsive, timely, competent and appropriate supports to meet their needs, desired outcomes and goals.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support how they provide supports in line with the participants needs, desired outcomes and goals. Included is the Service Coordination and Person-Centred Planning Policy and Procedure supporting how Enable WA is committed to using a strengths-based, person centred approach to service coordination to support participants to identify their individual needs and develop goals that will promote their independence and achieve optimal well-being and social participation</p> <p>Supports are driven by the needs and interests of the participant and are able to be changed and modified based on need. This was reflected through interviews with participants and families who provided examples of how and when this has occurred.</p> <p>Consent is obtained to share information with other providers. File reviews confirmed the presence of signed consent forms and the collaboration that takes place with other providers.</p>	

24 Transitions to or from the provider	
<b>Outcome:</b> Each participant experiences a planned and coordinated transition to or from the provider.	<b>Rating</b> NA
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support how they provide supports in line with the participants needs, desired outcomes and goals. Included is the Participant Transition or Exit from the Service Policy and Procedure demonstrating that Enable WA is committed to providing participants with information and support through the process of transition or exit from the organisation's services. Supporting this is the Developing a transition or exit plan</p> <p>At the time of the audit, no participants had been supported to transition in or out of the service, hence this was not able to be assessed.</p>	

## Enable WA Inc

### 2.3 Division 4 - Support Provision Environment

25 Safe Environment	Rating
<b>Outcome:</b> Each participant accesses supports in a safe environment that is appropriate to their needs.	1
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support how services will be provided in a safe environment. Included is the Safety Handbook that has been developed to understand the principles of Workplace Health and Safety. Supporting this is the workplace checklist and the procedure for Injury management. The Individual and Home risk assessment is particularly detailed and comprehensive to support the understanding of any risk and how this can be addressed.</p> <p>Staff have all undertaken training and/ or been provided with information to support their understanding of infection control and standard precautions and could clearly explain their understanding of the requirements. They are provided with PPE and receive regular updates on the use of PPE.</p> <p><b>Minor nonconformity:NC019</b></p> <p>At the time of the audit, evidence was not available to support how protocols are in place for each participant about how to respond to medical emergencies for them; and how each worker providing support to them is trained to respond to such emergencies (including how to distinguish between urgent and nonurgent health situations in order to avoid delays.</p>	

26 Participant Money and Property	
<b>Outcome:</b> Participant money and property is secure and each participant uses their own money and property as they determine.	Rating 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the practices with any participant money or property. Included is the Participant Money and Property Policy and Procedure that ensures that all staff working for Enable WA who assist participants to manage their money, assets or property do so with probity. This procedure also ensures that participants are safeguarded from misappropriation regarding assistance with financial matters</p> <p>At the time of the audit, none of the participants sampled were supported in managing their money or property so this was unable to be assessed.</p>	

## Enable WA Inc

27 Management of Medication	
<b>Outcome:</b> Each participant requiring medication is confident their provider administers, stores and monitors the effects of their medication and works to prevent errors or incidents.	<b>Rating</b> 2
<b>Findings:</b> Enable have developed Policies and Procedures to support Management of Medication. This includes the Medication Support and Administration Policy and Procedure that ensures that Enable WA's medication support and administration practices with participants are consistent with industry best practice guidelines. File reviews confirmed that Medication Records are kept in Carelink and include: <ul style="list-style-type: none"><li>List of Current medication</li><li>Medication Review</li><li>Medication Care Plan</li><li>Purpose of medication form</li></ul> Many clients self-administer medication, otherwise it is kept in a webster or blister pack. Medication management training is completed by all staff at induction and updated annually. Training records are kept under staff profiles in Employment hero Medication is stored in various areas depending on clients wishes and abilities. May be locked away, refrigerated or kept in a safe drawer or cupboard and is dependent on individual client situation.	

## Enable WA Inc

28 Mealtime Management	
<b>Outcome:</b> Each participant requiring mealtime management receives meals that are nutritious, and of a texture that is appropriate to their individual needs, and appropriately planned, and prepared in an environment and manner that meets their individual needs and preferences, and delivered in a way that is appropriate to their individual needs and ensures that the meals are enjoyable.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support Mealtime Management. Included is the Severe Dysphagia and Mealtime Management Policy and Procedure that ensure that Enable WA is committed to providing all clients with meals and nutritional supplements that meet individual needs in terms of swallowing, nutrition, dietary intolerance, allergies, medications cultural diversity and personal preferences. Enable WA works within the International Dysphagia Diet Standardisation Initiative (IDDSI 2019).</p> <p>Participants requiring mealtime management are identified via family members, DSW, allied health, GP's and multi-disciplinary team. All clients are referred to a speech therapist who performs assessment and writes an Eating, Drinking and Swallowing Plan.</p> <p>Plan covers types of food and drinks allowed for client, equipment, positioning, assistance, communication, medication, food likes and dislikes, other information and emergency management.</p> <p>All clients, families and staff interviewed felt that they had input into their mealtime procedures and plans. Likes and dislikes are documented clearly in the client file.</p> <p>All staff supporting clients requiring mealtime management have evidence of relevant training. The client care plan clearly outlines the steps to take if incidents occur.</p> <p>A Mealtime management plan was available in the file reviewed for a participant that required dietary modification.</p> <p>The one client interviewed that had mealtime modification lived at home with his wife. She prepared the majority of his meals and was comfortable that he was receiving food that he enjoyed. She was happy with the staff from Enable and believe they were of great benefit to her husband and were well trained in his meal preparation.</p> <p>There was adequate information available in the client files for staff to be able to prepare texture modified foods and fluids if required.</p> <p>From the clients and families interviewed Enable staff did not play a role in modified meal preparation. Food was prepared and stored in the client's own home following food handling standards and common sense.</p>	



## Enable WA Inc

29 Management of Waste	
<b>Outcome:</b> Each participant, each worker, and any other person in the home is protected from harm as a result of exposure to waste, infectious or hazardous substances generated during the delivery of supports.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the management of waste. This includes the Waste Management Policy and Procedure that ensures Enable WA is committed to protecting all its workers, clients, and other individuals from the risks and harm resulting from exposure to waste, infectious or hazardous substances generated during delivery of supports. Supporting this is the Emergency Plan as per the Safety Handbook</p> <p>This module was unable to be assessed as there are currently no participants in the sample group receiving supports where waste management is required.</p>	

## Enable WA Inc

### 3 Part 3 Module 1 High Intensity Daily Personal Activities

30 Complex Bowel Care	
<b>Outcome:</b> Each Participant requiring complex bowel care receives appropriate support relevant (proportionate) to their individual needs.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the management of Complex Bowel Care. Included is the High Intensity Daily Activities Policy and procedure, Bowel Management Care Plan and Bowel Elimination Chart. Bowel Management Care Plan includes detailed information such as date of plan, review date, emergency contact, past history, information for support workers, bowel function, toileting, aid and equipment, bowel assistance, usual routine, medication administration, complications associated with bowel care and actions for escalation.</p> <p>Each client receiving Complex Bowel Care has an individualised Care plan, a risk assessment form and a support plan, these documents cover the care requirements of clients receiving complex bowel care to ensure that all care is given in a safe manner by staff with adequate training who are aware of the risks and are able to escalate when required.</p> <p>All staff that are caring for any client with complex bowel care is required to undergo Complex Bowel Care Training delivered by an external provider. Individual training records are kept under staff profiles in both Carelink and Employment Hero.</p>	

## Enable WA Inc

<b>31 Enteral (Naso-Gastric Tube – Jejunum or Duodenum) Feeding and Management</b>	
<b>Outcome:</b> Each participant requiring enteral feeding and management receives appropriate nutrition, fluids and medication, relevant and proportionate to their individual needs.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the management of Enteral Feeding. Included is the High Intensity Daily Activities Policy and procedure.</p> <p>The PEG Care Plan for clients clearly outlines how the client will be fed, how medications will be administered, complications and their management and actions for escalation to ensure participant wellbeing.</p> <p>The PEG Care plan includes information on date of plan, review date, emergency contact, past history, type of PEG, feed details, medication and daily management of PEG site, management of tube blockages and tube removal. It requires the signature and qualification of the person completing the plan.</p> <p>Clients individualised enteral feeding care plan outlines medical history, tube type and location, feed type, quantity and storage, feeding regime, pump information, medication and flush information, daily management of tube site and potential complications. The care plan is signed and dated by the relevant health professional along with client or representative.</p> <p>All workers who care for clients requiring any form of enteral feeding are given training by an external consultant (usually dietician) and then given buddy shifts as required to familiarise themselves with particular client needs. The training is refreshed annually.</p>	

## Enable WA Inc

32 Severe Dysphagia Management	
<b>Outcome:</b> Each participant requiring severe dysphagia management receives appropriate support that is relevant and proportionate to their individual needs and preferences.	<b>Rating</b> 2
<p><b>Findings:</b></p> <p>Enable have developed Policies and Procedures to support Dysphagia Management. Included is Severe Dysphagia and Mealtime Management Policy and procedure that states that each participant who is identified as requiring mealtime management will have their individual needs assessed by their GP and an appropriately qualified health practitioner (either a dietician, speech pathologist or occupational therapist).</p> <p>Mealtime management Plan outlines the specific mealtime requirements for participants and is written in conjunction with a speech pathologist and outlines specific signs of difficulties and what to do</p> <p>Participants have multiple forms utilised to assess and manage their dysphagia. Management of risks, incidents and emergencies is covered in the Mealtime management plan.</p> <p>Enable WA will ensure that each worker who provides mealtime management to participants is provided with training in the preparation and provision of safe and enjoyable meals.</p> <p>Workers will also be trained in the proactive management of emerging and chronic health risks related to mealtime difficulty, including how to seek help to manage these risks.</p> <p>Workers will be trained in how to respond if a participant starts to choke during mealtimes, and when to call an ambulance.</p>	

33 Tracheostomy Management	
<b>Outcome:</b> Each participant with a tracheostomy receives appropriate suctioning and management of their tracheostomy relevant and proportionate to their individual needs.	<b>Rating</b> 2
<p><b>Findings:</b></p> <p>Enable have developed Policies and Procedures to support Tracheostomy Management. Included is the High Intensity Daily Activities Policy and Procedure that provides an overview of tracheostomy care along with staff training requirements.</p> <p>The individualised care plan will provide the procedural document to care or a client with a tracheostomy</p> <p>Tracheostomy Care outlines relevant medical history, type and size of tracheostomy tube, feeding, secretions, equipment, suctioning, stoma care, skin integrity. It also includes daily tracheostomy management, suctioning procedure and risks associated with tracheostomy care.</p> <p>The Tracheostomy Airway Obstruction Action Plan – outlines emergency management in case tracheostomy is obstructed or dislodged.</p>	

Commented [1]:

34 Urinary Catheter Management	
<p><b>Outcome:</b> Each participant with a catheter receives appropriate catheter management relevant and proportionate to their individual needs.</p>	<p><b>Rating</b> 2</p>
<p><b>Findings:</b></p> <p>Enable have developed Policies and Procedures to support Urinary Catheter Management. Included is the High Intensity Daily Activities Policy and procedure and the Bladder Management Care Plan</p> <p>The Bladder Management Care Plan includes information date of plan, review date, emergency contact, past history, bladder function, toileting, aids and equipment, special requirements and usual routine. It also includes the signature and qualification of the person completing the plan along with the signature of the client or representative.</p> <p>The care plan outlines:</p> <ul style="list-style-type: none"> <li>• Handling of equipment</li> <li>• Monitor skin condition around catheter</li> <li>• Complications and risks associated with catheters</li> <li>• Recognise and respond to blockages, dislodged catheters or deteriorating health or infection</li> </ul> <p>The individualised Client Care Plan outlined the safe care of urinary catheters including following infection control procedures; replace and dispose of catheter bags; maintaining charts/records; monitoring catheter position; monitoring skin condition around catheter; recognising and respond/report blockages, dislodged catheters, signs of deteriorating health or infection.</p> <p>All staff responsible for catheter care has relevant training from external provider along with buddy shifts to ensure competency.</p>	

## Enable WA Inc

### 4 Part 4 Module 2 Specialist Behaviour Support

38 Behaviour Support in the NDIS	
<b>Outcome:</b> Each participant accesses behaviour support that is appropriate to their needs which incorporates evidence-informed practice and complies with relevant legislation and policy frameworks.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to ensure how they will support each participant to access behaviour support plans appropriate to their needs. Included is the Providing Positive Behaviour Support Policy and Procedure that provides the philosophical approach, required qualifications and process for the Positive Behaviour Team. This procedure complies with the requirements of the NDIS Quality and Safeguards Commission.</p> <p>All Enable positive behaviour support services and work practices emphasise positive practices above all others. Positive behaviour support services are aimed at increasing quality of life of the people who we support and in achieving positive and lasting behaviour change.</p> <p>Records have been provided to support the practice of all Enable WA Positive Behaviour Practitioners only provide positive behaviour support services if they have been assessed as Core, Proficient, Advanced or Specialised by the NDIS Quality and Safeguards Commission. All Enable WA Positive Behaviour Practitioners that provide specialist behaviour support must be registered with the NDIS Quality and Safeguards Commission and it is their responsibility to do so.</p> <p>File reviews confirmed Practitioner Qualifications, Supervision records and notes, Performance development plans Practitioner Registration and training records and signed endorsement of the for the PBS Capability Framework. Also included in the records is the Self-Assessment presentations, group supervision sessions and case study presentations.</p> <p>Enable have provided evidence of a Quality Assurance Panel Outcomes Summary Report that explains the process for supporting a RP to be implemented. The proposed restrictive practice has been documented with the relevant reasons and Authorisation decision details then signed off by the 3 Panel members with the recommendation.</p> <p>Discussion with staff found that there is a commitment to reducing and eliminating restrictive practices through the implementation of the Providing Positive Behaviour Support Policy and Procedure and the development of positive behaviour support plans.</p>	

## Enable WA Inc

39 Restrictive Practices	
<b>Outcome:</b> Each participant is only subject to a restrictive practice that meets any state and territory authorisation (however described) requirements and the relevant requirements and safeguards outlined in Commonwealth legislation and policy.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the requirements for implementing restrictive practices. Included is the Restrictive Practice Reporting Policy and Procedure that outlines the process required when a participant is identified as having or needing a restrictive practice. The procedure is based on the Western Australian Government, Department of Communities "Authorisation of Restrictive Practices" (<a href="http://www.wa.gov.au">Authorisation of restrictive practices (www.wa.gov.au)</a>) and the NDIS Quality and Safeguarding Commission's "Regulated Restrictive Practice Guide" (<a href="http://www.ndiscommission.gov.au">Regulated Restrictive Practices Guide   NDIS Quality and Safeguards Commission (ndiscommission.gov.au)</a>).</p> <p>Once a restrictive practice has been identified, the coordinator then makes a referral to the Enable WA Quality Assurance Panel using the Restrictive Practice Referral Form in addition to providing written consent for the use of the practice and a copy of the participants Behaviour Support Plan. This information is emailed to the Quality Assurance Panel (Panel) via a dedicated email address.</p> <p>Restrictive practices included within the Positive Behaviour Support Plans are approved by the Restrictive Practices Panel to ensure they meet NDIS requirements and state legislation. Examples of approved restrictive practices sighted on behaviour support plans included physical restraint and chemical restraint.</p> <p>Knowledge and understanding of regulated restrictive practices in accordance with NDIS and state requirements were demonstrated by management and staff interviewed.</p> <p>Files reviewed provided evidence that participants, providers and other members of the support network are involved in the development of positive behaviour support plans and any ongoing reviews.</p>	

## Enable WA Inc

40 Functional Behaviour Assessments and Behaviour Support Plans	
<b>Outcome:</b> Each participant's quality of life is maintained and improved by tailored, evidence-informed behaviour support plans that are responsive to their needs.	<b>Rating</b> 2
<p><b>Findings:</b></p> <p>Enable have developed Policies and Procedures to support each participant to have a behaviour support plan that is responsive to their needs. Included is the Restrictive Practices Reporting Policy to identify and support how each plan containing a regulated restrictive practice are provided to the Commissioner in the time and manner prescribed in the <a href="#">National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018</a>. Once a restrictive practice has been identified, the coordinator then makes a referral to the Enable WA Quality Assurance Panel using the Restrictive Practice Referral Form in addition to providing written consent for the use of the practice and a copy of the participants Behaviour Support Plan. This information is emailed to the Quality Assurance Panel (Panel) via a dedicated email address. All restrictive practices will be added to the Enable WA Restrictive Practice Register by the Panel Chairperson. Panel meetings occur each month.</p> <p>If the restrictive practice that has been identified is an unauthorised restrictive practice an incident report is completed. The use of an unauthorised restrictive practices is a reportable incident.</p> <p>Panel meetings are scheduled at the end of each month with all outcomes documented and recorded.</p> <p>File reviews supported the practices in place to support the assessment of the participant needs to support the development of the plan and strategies to address any behaviours of concern. Reviews also confirmed the presence of signed consent forms</p>	

41 Supporting the Implementation of the Behaviour Support Plans	
<b>Outcome:</b> Each participant's behaviour support plan is implemented effectively to meet the participant's behaviour support needs.	<b>Rating</b> 2
<p><b>Findings:</b></p> <p>Enable have developed Policies and Procedures to support how each participant's behaviour support plan is implemented effectively to meet the participant's behaviour support needs. Included is the Implementing Positive Behaviour Support Policy and Procedure that has been developed to demonstrate that they implement positive behaviour support (PBS) as per the state and national legislative and policy frameworks.</p> <p>Enable implement positive behaviour support using evidence informed approaches. Staff that are tasked with implementing PBS to support NDIS participants are trained so that they have the appropriate knowledge and skills and are committed to reducing and eliminating restrictive practices.</p> <p>File reviews supported the implementation of the procedure in line with the NDIS Practice Standards. Evidence was sighted to support how the Practitioners support the staff in the implementation of the Behaviour Support Plans and provide the relevant training.</p> <p>Records confirmed the ongoing supervision and review of the implementation of the plan and the supporting documentation.</p>	



42 Behaviour Support Plan Monitoring and Review	
<p><b>Outcome:</b> Each participant has a current behaviour support plan that reflects their needs, improves their quality of life and supports their progress towards positive change. The plan progresses towards the reduction and elimination of restrictive practices, where these are in place for the participant.</p>	<p><b>Rating</b> 2</p>
<p><b>Findings:</b></p> <p>Enable have developed Policies and Procedures to support how they implement positive behaviour support (PBS) as per the state and national legislative and policy frameworks. Included is the Implementing Positive Behaviour Support Policy and Procedure and the Restrictive Practice Reporting Policy and Procedure.</p> <p>Enable monitors the implementation of the participant’s behaviour support plan through a combination of formal and informal approaches, including through feedback from the participant, team meetings, data collection and record keeping, other feedback and supervision.</p> <p>Records of the monitoring were reviewed and support the implementation of the procedure to align with the National Disability Insurance Scheme (Restrictive Practices and Behaviour Support) Rules 2018. This includes evidence of the review process and the collation of information from all sources to establish the effectiveness of restrictive practices and positive behaviour support strategies to manage behaviours of concern.</p> <p>File reviews confirmed that enable has implemented a process to identify where the participant’s needs, situation or progress creates a need for more frequent review, including if the participant's behaviour changes and contributes to the reviews of the strategies in a participant's behaviour support plan, with the primary focus of reducing or eliminating restrictive practices based on observed progress or positive changes in the participant's situation.</p> <p>Positive Behaviour Support Plans are reviewed at least every twelve months, however, can be reviewed or amended more frequently according to need.</p>	

## Enable WA Inc

43 Reportable Incidents Involving the Use of a Restrictive Practice	
<b>Outcome:</b> Each participant that is subject to an emergency or unauthorised use of a restrictive practice has the use of that practice reported and reviewed	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the process required when a participant is identified as having or needing a restrictive practice.</p> <p>Enable report the use of unauthorised restrictive practices as per the incident management policy and procedure and documented evidence was provided to support the practice.</p> <p>When a restrictive practice has been approved for weekly reporting by the NDIS Quality and Safeguards Commission, the coordinator will complete the unauthorised restrictive practice Reporting Spreadsheet and emails this to the Quality and Safeguarding team each week. The Quality and Safeguarding officer then uploads this to the NDIS Commission Portal weekly. All reporting requirements are in line with the National Disability Insurance Scheme (Restrictive Practice and Behaviour Support) Rules 2018.</p> <p>At the time of the audit, there or unauthorised restrictive practices that had required reporting.</p>	

44 Interim Behaviour Support Plans	
<b>Outcome:</b> Each participant with an immediate need for a behaviour support plan receives an interim behaviour support plan which minimises the risk to the participant and others.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support how Enable implements positive behaviour support (PBS) as per the state and national legislative and policy frameworks. Included is the Implementing Positive Behaviour Support Policy and Procedure that supports the processes for the development of interim Positive Behaviour Support Plans and how they are managed to ensure that they are developed for participants where there is an identified risk posed to the participant and others due to behaviours of concern.</p> <p>Of the files sampled there were no current interim Behaviour Support Plans.</p>	

## Enable WA Inc

### 5 Part 5 Module 2A Implementing Behaviour Support Plans

47 Behaviour Support in the NDIS	
<b>Outcome:</b> Each participant accesses behaviour support that is appropriate to their needs which incorporates evidence-informed practice and complies with relevant legislation and policy frameworks.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support Behaviour Supports in the NDIS. This includes the Implementing Positive Behaviour Support Policy and procedure to demonstrate that they implement positive behaviour support (PBS) as per the state and national legislative and policy frameworks. Supporting this is the Restrictive Practice Reporting Policy and procedure outlining the process required when a participant is identified as having or needing a restrictive practice.</p> <p>Staff provided an overview of their commitment to reducing and eliminating restrictive practices through the implementation of the Positive Behaviour Support Procedure and organisational policy and demonstrated a knowledge and awareness of strategies to effectively manage any behaviours of concern.</p> <p>Files reviewed listed a schedule of restrictive practices and identified the process for authorisation of these.</p> <p>Clear and well documented evidence was provided in Care link and through supporting documentation to support the practices to reduce the use of restrictive practices and this included evidence provided during staff interviews.</p>	

48 Regulated Restrictive Practices	
<b>Outcome:</b> Each participant is only subject to a restrictive practice that meets any state and territory authorisation (however described) requirements and the relevant requirements and safeguards outlined in Commonwealth legislation and policy.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the use and management of Regulated Restrictive Practices. Included is the Restrictive Practice Reporting Policy and Procedure that outlines the process required when a participant is identified as having or needing a restrictive practice and supports the commitment to working towards the reduction and elimination of the use of restrictive practices</p> <p>File reviews confirmed the presence of consent forms and collaboration with providers who are engaged in the development of the BSPs. RPs are only in the BSP when authorised and prescribed by the practitioner.</p> <p>Participant files include records of Restrictive Practices and other supporting evidence to assist the work that is undertaken with the practitioners. Staff have clear processes for recording, documenting and reporting on RPs both regulated and unregulated and these are managed through the Quality and Safeguarding team.</p>	

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49 Supporting the Assessment and Development of Behaviour Support Plans	
<b>Outcome:</b> Each participant's quality of life is maintained and improved by tailored, evidence-informed behaviour support plans that are responsive to their needs.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the Assessment and Development of Behaviour Support Plans. Included is the Providing Positive Behaviour Support Policy and procedure that provides the philosophical approach, required qualifications and process for the Positive Behaviour Team. This procedure complies with the requirements of the NDIS Quality and Safeguards Commission.</p> <p>Files reviewed contained evidence of functional assessments conducted by the external provider and collaboration with Midway program staff and the Restricted Practices Panel for the development of PBS plans.</p> <p>Staff interviewed confirmed knowledge and understanding of their responsibilities in the implementation of PBS plans. Evidence was provided of meeting minutes and case studies undertaken by the Positive Behaviour Support Practitioners to support the development of tailored, evidence-informed behaviour support plans that are responsive to the needs of the participants.</p>	

50 Behaviour Support Plan Implementation	
<b>Outcome:</b> Each participant's behaviour support plan is implemented effectively to meet the participant's behaviour support needs.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the implementation of the BSP. Included is the Implementing Positive Behaviour Support Policy and procedure that demonstrates that Enable WA implements positive behaviour support (PBS) as per the state and national legislative and policy frameworks</p> <p>File reviews confirmed that staff work with specialist behaviour support providers to align support delivery with positive behaviour support plan strategies. There was also evidence of contact between the implementing provider and the Practitioner.</p> <p>Management staff monitor the implementation of positive behaviour support strategies through staff meetings and supervision sessions</p>	

## Enable WA Inc

51 Monitoring and Reporting the Use of Regulated Restrictive Practices	
<b>Outcome:</b> Each participant is only subject to a restrictive practice that is reported to the Commission.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support implementation of the BSP. Included is the Implementing Positive Behaviour Support Policy and procedure that demonstrates that Enable WA implements positive behaviour support (PBS) as per the state and national legislative and policy frameworks</p> <p>Enable monitors the implementation of the participant's behaviour support plan through a combination of formal and informal approaches, including through feedback from the participant, team meetings, data collection and record keeping, other feedback and supervision.</p> <p>File reviews confirmed the documented evidence of the regular monitoring of RPs with ongoing charts completed to record the use along with regular reports and reviews.</p>	

52 Behaviour Support Plan Review	
<b>Outcome:</b> Each participant has a current behaviour support plan that reflects their needs, and works towards improving their quality of life, reducing behaviours of concern, and reducing and eliminating the use of restrictive practices.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support implementation of the BSP. Included is the Implementing Positive Behaviour Support Policy and procedure that demonstrates that enable implements positive behaviour support (PBS) as per the state and national legislative and policy frameworks</p> <p>Participant file reviews confirmed the presence of a current BSP that was specifically written to meet the individual needs and reviewed as required.</p> <p>Enable identifies where the participant's needs, situation or progress creates a need for more frequent review, including if the participant's behaviour changes and contributes to the reviews of the strategies in a participant's behaviour support plan, with the primary focus of reducing or eliminating restrictive practices based on observed progress or positive changes in the participant's</p>	

## Enable WA Inc

53 Reportable Incidents Involving the Use of a Restrictive Practice	
<b>Outcome:</b> Each participant that is subject to an emergency or unauthorised use of a restrictive practice has the use of that practice reported and reviewed	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support the management of Reportable Incidents Involving the Use of a Restrictive Practice. Included is the Restrictive Practice Reporting Policy and Procedure that outlines the process required when a participant is identified as having or needing a restrictive practice and supports the commitment to working towards the reduction and elimination of the use of restrictive practices</p> <p>Evidence was provided of reporting that had occurred when an RP was implemented. All file reviews confirmed the recording of an RP with documented evidence to support the practice.</p> <p>File reviews confirmed signed consents were in place for BSPs and RPs.</p> <p>Enable will report the use of unauthorised restrictive practices as per the incident management policy and procedure. When a restrictive practice has been approved for weekly reporting by the NDIS Quality and Safeguards Commission, the coordinator will complete the URP Reporting Spreadsheet and email this to the Q&amp;S team each week. The Q&amp;S officer will upload this to the NDIS Commission Portal weekly.</p> <p>When a restrictive practice has been authorised by the Enable WA Quality Assurance panel, monthly reporting to the NDIS Commission is required. The coordinator will complete the monthly restrictive practice reporting spreadsheet that is provided to them by the Q&amp;S team, this will be emailed back to the Q&amp;S team monthly. Once received the Q&amp;S team will complete the reporting process on the NDIS Commission portal.</p> <p>All reporting requirements are in line with the National Disability Insurance Scheme (Restrictive Practice and Behaviour Support) Rules 2018.</p>	

54 Interim Behaviour Support Plans	
<b>Outcome:</b> Each participant with an immediate need for a behaviour support plan receives an interim behaviour support plan which minimises the risk to the participant and others.	<b>Rating</b>
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support how an interim BSP would be implemented. This includes the Providing Positive Behaviour Support Policy and procedure and refers to an Interim BSP and how this will be developed. The purpose of this policy is to provide the philosophical approach, required qualifications and process for the Positive Behaviour Team. This procedure complies with the requirements of the NDIS Quality and Safeguards Commission.</p> <p>At the time of the Stage 2 audit, there were no Interim BSPs to review.</p>	

## Enable WA Inc

### 6 Part 6 Module 3 Early Childhood Supports

56 The Child	
<b>Outcome:</b> Each child participant accesses supports that promote and respect their legal and human rights, support their development of functional skills, and enable them to participate meaningfully and be included in everyday activities with their peers.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support how each child accesses supports that promote and respect their legal and human rights. Included is the Early Intervention – The Child Policy and Procedure that acknowledges that all individuals have the right to opportunities, which will enable them to enhance, fulfil and demonstrate a valued role in their community. The purpose of this policy is to outline Enables approach and commitment to upholding the rights of the child in all aspects of service delivery</p> <p>Enable is committed to supporting Participants in the same opportunities to develop and maintain skills to participate in the same recreational, work, social and learning opportunities that are valued and accessed by the community.</p> <p>File reviews confirmed the presence of a completed risk Assessment and Support Plan for each participant. Included in the file review was the presence of a Service Agreement that outlined the supports that would be delivered.</p> <p>Interviews with families confirmed the involvement of all parties involved and how the communication and planning involved all stakeholders and aligned to the support needs of the participant.</p>	

57 The Family	
<b>Outcome:</b> Each family receives family-centred supports that are culturally inclusive, responsive, and focus on their strengths	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support how each child accesses supports that promote and respect their legal and human rights. Included is the Early Intervention – The Child Policy and Procedure that acknowledges that all individuals have the right to opportunities, which will enable them to enhance, fulfil and demonstrate a valued role in their community. The purpose of this policy is to outline Enables approach and commitment to upholding the rights of the child in all aspects of service delivery. Supporting the practices is the Early Intervention – The Family Policy and procedure outlining Enables approach and commitment to ensuring that each family receives family-centred supports that are culturally inclusive, responsive and focus on their strengths.</p> <p>File reviews confirmed the presence of individual support plans based on the needs of the participant.</p> <p>Interviews with families confirmed that the needs of the participant and the family were always considered and taken into account when developing the plan and then matching the support worker. Supports are always flexible and based on the changing needs of the child and family.</p>	

## Enable WA Inc

58 Inclusion	
<b>Outcome:</b> Each participant accesses supports that engage their natural environments and enable inclusive and meaningful participation in their family and community life.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to support how participants accesses supports that engage their natural environments. Included is the Early Childhood Supports Policy and Procedure. The purpose of this policy is to set out Enables approach to providing Early Childhood Supports. Enable is committed to providing specialised therapy supports and services, aligned with principles of best practice, for infants and young children with disability and/or developmental delay, and their families, in order to promote development, wellbeing and community participation. Supporting this is the Providing Therapy Services that outlines the approach, required qualifications and process for the Therapy Team. This procedure complies with the requirements of the NDIS Quality and Safeguards Commission.</p> <p>Interviews with families confirmed the process that is undertaken by Enable to support the engagement of key workers and other providers as required. Families work with the coordinator and support workers to identify strategies to support their son/daughter to develop skills to support their participation in family and community life.</p> <p>File reviews confirmed that each participant has a support plan that is developed to identify and support the achievement of goals. This is supported by the Service Agreement confirming the supports that will be delivered.</p>	

59 Collaboration	
<b>Outcome:</b> Each participant receives coordinated supports from a collaborative team comprising their family, the provider and other relevant providers, to facilitate their development and address the family's needs and priorities.	<b>Rating</b> 2
<b>Findings:</b> <p>Enable have developed Policies and Procedures to outline Enables approach and commitment to ensure that each family receives family-centred supports that are culturally inclusive, responsive and focus on their strengths. Included is the Early Intervention – The Family Policy and Procedure</p> <p>Interviews with families confirmed the process that is undertaken by Enable to support the engagement of key workers and other providers as required.</p> <p>File reviews confirmed that each participant had a signed consent form to support the identification of who information and communication can be shared with.</p>	



## Enable WA Inc

60 Capacity Building	
<b>Outcome:</b> Each participant receives supports that build the knowledge, skills and abilities of the family and other collaborating providers in order to support the child's learning and development.	<b>Rating</b> 2
<p><b>Findings:</b></p> <p>Enable have developed Policies and Procedures to support the approach and commitment by Enable to ensure that each participant accesses supports that engage their natural environments and enable inclusive and meaningful participation in their family and community life. Supporting this is the Early Intervention – Inclusion Policy and Procedure and the Early Intervention – Capacity Building Policy and Procedure.</p> <p>Interviews with families confirmed the process that is undertaken by Enable to support the practices to assist their child to build their capacity to achieve the functional outcomes identified. This has included changing the roster pattern of staff in line with the changed plans and identification of new skills.</p> <p>File reviews confirmed that each planning includes the involvement and collaboration of other support networks as identified.</p>	

61 Evidence-Informed Practice	
<b>Outcome:</b> Each participant receives evidence-informed supports from providers with quality standards and validated practice.	<b>Rating</b> 2
<p><b>Findings:</b></p> <p>Enable have developed Policies and Procedures to support how Enable therapy services to children receives evidence-informed supports from providers with quality standards and validated practice. Included is the Early Intervention – Evidence Informed Practice Policy and the Early Childhood Supports Policy and Procedure that sets out Enables approach to providing Early Childhood Supports. Enable is committed to providing specialised therapy supports and services, aligned with principles of best practice, for infants and young children with disability and/or developmental delay, and their families, in order to promote development, wellbeing and community participation</p> <p>At the time of the audit, there were no children in the sample group who had Therapy Services in place through Enable.</p>	

## Enable WA Inc

62 Outcome Based Approach	
<b>Outcome:</b> Each participant receives supports that are outcome-based and goal-focused	<b>Rating 2</b>
<p><b>Findings:</b></p> <p>Enable have developed Policies and Procedures to support an outcomes-based approach. Included is the Early Intervention – Outcome Based Approach Policy and Procedure and the Evidence Informed Practice – Outcome and Quality Indicators. The purpose of this policy is to ensure that Enable Early Childhood Intervention therapy services are outcome-based and goal-focused.</p> <p>At the time of the audit, there were no children in the sample group who had an Early Intervention plan in place.</p>	

## 7 Appendix 1 – Audit methodology and sampling

### Participant sampling at sites audited

Consumer sampling was determined in accordance with Annex B – Audit methodology and sampling *National Disability Insurance Scheme (Approved Quality Auditors Scheme) Guidelines 2018*.

### Use of Information Communication Technology for Auditing Purposes

ICT used	Evidence reviewed and reason for ICT
Teleconference	Due to Covid 19 restrictions, Teams was used for opening and closing meetings and remote site visits.
Web meeting	N/App
Remote electronic access to management system documentation	Remote access was provided to Enable’s CMS, HR system and common drive.
Remote electronic access to participant files	Remote access was provided to Enable’s CMS to review client files.

### Participant interviews & file review

Outlet	Number of participants who opted out for the outlet	No. of registered participants at site	No. selected (files & interview)	Interview type			Actual no. files & interviews
				Individual	Phone	Focus Group	
Head Office	3	897	29		29		29

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### Staff/volunteers file review

Site	Total No. of staff	No. files reviewed
Head Office	774	17

### Positions interviewed

Name	Position	Shift worked (Morning, Afternoon, Night, Overnight)
David Naughton	CEO	Day
Rhea Divall	Services Manager	Day
Todd Falco	CFO	Day
Jason Hall	Hub Manager	Day
Monique Vetner	HR Manager	Day
Lauren Aldridge	Registered Nurse	Day
Sarah Pepper	Quality and Safeguarding	Day
James Hughes	Quality and Safeguarding	Day
Fiona Stephen	Hub Manager	Day
Ian Mumford	Hub Manager	Day
Roger Veen	Board member	Day
Andrew King	Board member	Day
Jenna Bigg	Coordinator	Day shift
Richard Hicks	Support Worker	Various
Jenny Pittman	Coordinator	Day shift
Leah Miers	Coordinator	Day shift
Kelly Roennfeldt	Coordinator	Day shift
Stefano D'Agostino	Support Worker	Various
Emma Loud	Support Worker	Various
Tanya Graham	Support Worker	Various

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