

Stage 1 Certification
Audit Report
Enable WA Incorporated
National Disability Insurance Scheme
Practice Standards



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1. Organisation details

Quantum licence number	NDIS0359	NDIS application number	4-G2NTPWJ
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.		
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		
Modules	Core Module (including 4.3 and 4.5) Module 1 Module 2 Module 2A		



	Module 3	
Audit type	Stage one certification	
Audit date	Start date:17/01/2022	End date:17/01/2022
Audit team		
Auditor	Kelly Lindley	
Changes to client information from application		
Name/address	NA	
Employee numbers	791	
Total participant numbers	897	



2. Executive Summary

1.1 Introduction

Quantum Certification Services Pty Ltd conducted this audit in accordance with the requirements of *ISO 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

Enable 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 (Delete whichever is not applicable)

Nonconformities were identified during the Stage one audit indicating that documents, information and self-assessment provided did not display sufficient content to meet the requirements of the relevant modules of the NDIS Practice Standards.

1.4 Recommendation (Delete whichever is not applicable)

A recommendation is made for progression to the planned stage two certification once the NCs from stage 1 have been closed out.

Nonconformities (0= Major, 1= Minor, 2 = Conformity)

Reference	Description
Violence, Abuse, Neglect, Exploitation and Discrimination	<p>Responding to Abuse and Neglect of a Client Policy 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. This Policy however relates to Child protection and does not acknowledge the mandatory reporting requirements under NDIS.</p> <p>Minor NC001</p>
Governance and Operational Management	<p>Enable Western Australia Governance Policy was reviewed and highlighted that the purpose of this policy is to ensure all activities of Enable Western Australia (“Enable”) are conducted ethically, responsibly and effectively within the organisations values, legislative requirements and relevant standards. This document acknowledges a proposal for a Client Advisory Group that was endorsed on 03/12/2020 to provide opportunities , however, does not appear to have been implemented. It is difficult to understand</p>



	<p>how participants will be provided with an opportunity to contribute to the governance of the organisation.</p> <p>Minor NC002</p>
<p>Risk Management</p>	<p>The Risk Management Policy and Procedure supports the promotion of an awareness of risk and the importance of risk management in the workplace. This involves assessing, identifying and developing appropriate risk management strategies. The associated Risk Management Plan does not however include measures for the prevention and control of infection and outbreaks.</p> <p>Minor NC003</p>
<p>Continuity of Supports</p>	<p>The Service Coordination and Person-Centered Planning Policy supports the commitment of Enable WA in their use of a strength-based person centred approach to service coordination and the promoting of independence . It was unclear as to how the organisation will support the continuity of supports in the event of a worker absence or vacancy and how a suitably qualified and/ or experienced person will perform the role.</p> <p>Minor NC004</p>
<p>Access to Supports</p>	<p>The Access to Services Policy and Procedure provides as outline as to how current participants access services . The Accessible Information Policy is to ensure all participants, staff and volunteers of Enable WA have access to all documents and communication related to provision of service and are supported to access information in the language, mode of communication and terms that a participant will understand. It is unclear as to how the access / entry criteria to services and any related costs is clearly defines and provided to participants in a language , mode of communication and terms that they are most likely to understand.</p> <p>Minor NC005</p>
<p>Complex Bowel Care</p>	<p>The POLICY and PROCEDURE High Intensity Daily Activities was reviewed and states that each bowel care plan includes:</p> <ul style="list-style-type: none"> • Information on normal stool appearance for the individual • Guidance on identifying symptoms that require action • Guidance on the amount of time to be given before intervention • The appropriate actions <p>The Bowel management care plan provided ,does not provide guidance on identifying symptoms that require action, amount of time before intervention or the appropriate actions. It does not state how risks, incidents and emergencies will be managed, including required actions and escalation to ensure participant wellbeing. Signs and symptoms of constipation are included in the plan but there are other risks that need to be identified and there is no actions for escalation included in the plan.</p>



	Major NC006
Complex Bowel Care	<p>Procedural documents for the support the safe provision of complex bowel care were not provided e.g. How do staff know how to administer a laxative, enema or suppository and how to identify when to seek health practitioner advice? Documents Reviewed:</p> <p>POLICY and PROCEDURE High Intensity Daily Activities</p> <p>Policy states that workers have received training in:</p> <ul style="list-style-type: none"> • Following personal hygiene and infection control measures. • Observing and recording changes in bowel habits. • How to administer laxatives, enemas or suppositories according to the appropriate procedure.
	Major NC007
Enteral Feeding and Management	<p>The High Intensity Daily Activities Policy and Procedure and the PEG care plan were reviewed. 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. There are other risks, incidents and emergencies that may be associated with enteral feeding that are not mentioned in the plan e.g. Infection, skin excoriation, granulation, feed intolerance. Further documentation is required around how these will be managed, including required actions and escalation to ensure participant wellbeing.</p>
	Minor NC008
Enteral Feeding and Management	<p>The High Intensity Daily Activities Policy and Procedure briefly outlines the enteral feeding and management and states • The need and consent for enteral feeding is confirmed – consent is not captured on the care plan.</p> <ul style="list-style-type: none"> * Each delivery plan includes information on how to: introduce food via tube. * Monitor the rate and flow of feeding. * Keep the stoma area clean and monitor and report infections. * Check the position of the tube. * Recognise and respond to symptoms that could require health intervention; and * When to review the mealtime plan. No procedural documents were provided that outlined the safe delivery of enteral feeding including types of pumps that may be used, malfunctions, how to connect and disconnect feeds, how to store feeds, cleaning and maintenance, checking tube position etc.
	Major NC009
Complex Bowel Care	<p>POLICY and PROCEDURE High Intensity Daily Activities states that each care plan includes information on how to:</p> <ul style="list-style-type: none"> • Dispose of and replace catheter bags • Maintain charts/records



	<ul style="list-style-type: none"> • Monitor catheter position • Monitor skin condition around catheter • Recognise and respond to blockages, dislodged catheters or deteriorating health or infection <p>The Bladder management care plan provided does not provide guidance on any of the above information. It does not identify any indicators of complications that require intervention and provide any understanding of when to involve a health practitioner.</p> <p>Major NC010</p>
Urinary Catheter Management	<p>No procedural documents were provided that 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>Major NC011</p>
Complex Wound Management	<p>No documents supplied to support Complex Wound Management so unable to assess.</p> <p>Major NC012</p>
Reportable Incidents Involving the Use of a Restrictive Practice	<p>Unable to sight any information or documentation to support how, where an unauthorised restrictive practice has been used, the workers and management of providers implementing behaviour support plans engage in debriefing to identify areas for improvement and to inform further action. The outcomes of the debriefing are documented.</p> <p>Minor NC013</p>

1.5 Opportunities for improvement

Reference	Description
Person-centred supports	<p>There is an opportunity for the organisation to further develop their documentation to support a more responsive approach to providing information in an Easy Read format.</p>
Enteral Feeding and Management	<p>Enteral feeding encompasses both nasogastric and PEG feeding. It is unclear if there is a care plan related to nasogastric feeding alone as this has its own set of risks, incidents and emergencies e.g. Aspiration. The care plan requires evidence to support the involvement and consent associated with enteral feeding management.</p>



<p>Tracheostomy Management</p>	<p>There is an opportunity for the organisation to review their Policy and remove reference to Tracheostomy Care if provider is not registered to deliver this support to avoid confusion.</p>
<p>Urinary Catheter Management</p>	<p>There is an opportunity for the organisation to ensure that there is evidence of client involvement and consent associated with urinary catheter management.</p>



1.6 Stage two audit process

The stage two audit will include the following:

The following registration classes and groups will be included in the stage two audit:

Core Module (including 4.3 and 4.5), Module 1, Module 2, Module 2a and Module 3

Participant interviews and file review will be conducted for the stage two audit. Please ensure that participants, advocates, carers or support persons are informed of the audit and that they may be selected for an interview and file review.

These interviews are best conducted in person with service participants and they can be supported by an advocate or their carer/representative. Interviews with participant representatives who are unable to attend in person, can be conducted by phone.

Based on numbers provided for audit planning, the number of participants required for interviews and file review is 30 across all in-scope registration classes and groups.

Interviews will be required with the following key personnel: (Please allow 30 minutes for each interview):

Board Members, CEO, Quality Manager, HR Manager, CFO, Client Services Manager,
Registered Nurse, Hub Managers and Direct Care staff.

1.7 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.

1.8 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.

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