

Human Services Victoria (HSV) Certification Guidebook



Contents

1	Audit Cycle & Certification3		
	1.1	Initial Inquiry	3
	1.2	Application for Certification and Assessment	3
	1.3	Client Contact	3
	1.4	Gap Analysis (optional)	4
	1.5	Initial Audit	4
	1.6	Certification Audit	4
	1.7	Surveillance Audits	5
	1.8	Reassessment Audits	5
2	Rep	orting	5
3	Non	-Conformances	6
	3.1	Observations	6
	3.2	Minor Non-Conformances	6
	3.3	Major Non-Conformances	6
4	Cert	ification Decision	7
5	Cert	ificates	7
	5.1	Scope of Certification	7
	5.2	Refusal of Certification/Recognition	8
	5.3	Suspension or Refusal of Certification	8
6	Use	of Logos	8
7	Accı	reditation Status	8
8	Star	ndard Owner Information	9
	8.1	Notification to the Standard Owner	9
9	Con	fidentiality	9
10	Use of Logos		9
11	Add	itional Obligations1	0
12	Misleading Statements11		1
13	Complaints and Appeals1		1



This Certification Guidebook is designed to assist your organisation on the requirements for certification to the Combined Human Services Part 4 for the Victorian Department of Health & Human Services Scheme. The focus of this scheme is to facilitate the delivery of Human Services Standards (HSS) (gazetted as Department of Health & Human Services Standards) across Victoria.

1 Audit Cycle & Certification

The following section outlines the steps that apply during the BSI certification process for the HSV scheme. BSI reserves the right to provide its clients and those that request quotations with marketing and technical information relating to standards, training and compliance services.

1.1 Initial Inquiry

BSI will respond to either verbal or written expressions of interest from your organisation indicating interest in one or more of our programs. If your organisation is located near one of BSI's offices, an advisory visit may be arranged to discuss your certification requirements and how BSI can help your organisation achieve them.

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

1.2 Application for Certification and Assessment

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

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

1.3 Client Contact

As soon as practicable after receipt of your signed application/proposal, your BSI Client Manager will contact your organisation. Your Client Manager will seek to establish a working relationship between your organisation and BSI, and to confirm your certification requirements in terms of the certification services, standards or codes of practice, locations, and activities and/or products to be included in the scope of certification.

Your Client Manager will:

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

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

...making excellence a habit™



1.4 Gap Analysis (optional)

A Gap Analysis often proves an invaluable tool in determining system implementation, particularly for new systems that are still in the early stages of development. This one-off assessment includes the identification of gaps against the requirement of the nominated Standard. At the conclusion of the Gap Analysis you will receive a report which highlights any gaps as well as options for next steps on your path to certification. The results of a Gap Analysis are not directly linked to any subsequent Certification Audits.

1.5 Initial Audit

In order to gain certification to the HSV scheme your organisation is required to have an initial audit followed by a certification audit. An initial audit reviews your organisation's system documentation, including policy manuals, procedures and other relevant supporting documentation.

This step gives your organisation the opportunity to demonstrate that all documentation required by the relevant standard has been prepared, is controlled where necessary, and is monitored and updated as required.

The initial audit will be carried out by your Client Manager who is a qualified assessor. It is a requirement that the assessment be carried out at your site. If you have multiple sites not all of the sites are required to be included in this audit. The sites will be sampled according to the scheme requirements. The sites will be determined by your Client Manager.

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

At the initial assessment BSI will confirm that your organisation has conducted at least one self-assessment covering the HSV scheme requirements.

Your organisation will be required to provide evidence of certification to at least one of the following governance standards

- ISO 9001:2008 or
- National Standards for Disability Services
- National Safety and Quality Health Service (NSQHS) Standards, Standards 1 & 2

A copy of the governance standard report is sent to the Department by BSI, if BSI certifies your organisation to the governance standard.

1.6 Certification Audit

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

The objectives of the Certification Audit are:

• To confirm that your organisation adheres to its own policies, procedures & objectives and practices the principals of continuous improvement;



- To confirm that the HSV system conforms with all the requirements of the scheme and is achieving your organisation's policy objectives
- To verify that appropriate procedures, controls and guidelines are in place, and roles and responsibilities are defined.

Your organisation will be advised of any non-conformances arising from this assessment. All non-conformances are required to be closed out before certification can be recommended. The recommendation for certification is made by your Client Manager. The audit report is reviewed by an independent qualified report reviewer who makes the final decision for certification.

Your certificate will be issued electronically.

1.7 Surveillance Audits

Surveillance audits for HSV scheme are carried out at 18 monthly intervals.

At times the Department may request an additional "out of cycle" assessment.

Surveillance audits for your chosen governance standard will be conducted as per the relevant scheme requirements.

1.8 Reassessment Audits

The reassessment cycle for this program is 3 yearly. Your organisation's reassessment audit must be conducted within 3 years of the initial certification or last recertification. If not completed and processed within the required time frame, your certification is no longer valid.

The reassessment audit must take place 3months prior to the expiry date. Extensions on the recertification dates are not permitted.

2 Reporting

At the conclusion of the audit, your Client Manager will prepare a written report on the audit findings and the team lead will present these findings to your organisation's senior management at the closing meeting.

Reporting will be completed using the BSI audit report template that includes the Audit Tools provided by the Department.

The audit findings include a summary of the overall compliance of your system with the requirements and provided to your organisation following each audit. The audit report will include the following information;

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

...making excellence a habit.™



Non-conformances will be discussed with your team during the Client Manager's visit and outlined at the exit meeting.

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

It is your organisation's responsibility to respond to the non-conformances detailed in your audit report by the designated time frame. Failure to do so may result in suspension or cancellation of your certification.

Your organisation will receive a separate audit report for the governance standard even if the two audits are conducted at the same time.

3 Non-Conformances

All non-conformances must be closed out before certification is granted or expiry of certification.

Specific audit findings are categorised as follows and are applicable during the certification and verification audit activities. Non-conformances are categorised as Observations, Minor and Major.

3.1 Observations

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

3.2 Minor Non-Conformances

Minor Non-conformances are audit findings that reveal an isolated incident of non-compliance that has no direct impact on the integrity of the product. Agreed proposed corrective action plans (CAPs) (detailing correction, cause identification and long term fix) must be received within two (2) weeks of the non-conformance being identified.

Minor non-conformances are required to be closed out within six (6) months of the assessment.

If your organisation does not close out the minor non-conformance within 6 months this may be escalated to a major non-conformance.

3.3 Major Non-Conformances

Major Non-conformances are audit findings that reveal that the integrity of the HSV scheme has been compromised and must be rectified before certification is granted. Where the major non-conformance does not place a person accessing the scheme at risk of significant harm BSI is required to close out or downgrade out the non-conformance following an on-site visit within three (3) months. Evidence of the corrective action plan is required to be sent to BSI within five (5) days of the assessment.



4 Certification Decision

After confirmation that any necessary corrective actions have been taken, which may involve a follow up visit by the BSI Client Manager, the findings and recommendations made in the audit report are subject to an internal review process prior to certification being granted.

5 Certificates

A copy of the certificate(s) will be forwarded to the Department with the report of the initial certification and recertification audits, and whenever certificates need to be reissued (e.g. in accordance with changes to certification scope).

For the scope of certification for HSV Scheme, the standards will not include the governance standards which are covered by a separate certification.

Certification documentation within the BSI system identifies the inclusion of any women's refuge or residential service or out of home care unit. However the physical certificate will not list these addresses.

The scope of certification is different for the governance standards and HSS certifications. Once the audit and review is completed, BSI will issue standards certificates for HSS and governance standards certifications where the client holds both certifications with BSI.

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

Incorrect use of the certificate can result in a customer being misled as to the extent of your organisation's certification. Clients are obliged to ensure that BSI has been formally notified of the latest address, ownership, changes to key management responsibilities, major management system changes and capability information so that the certificate maintains its currency. Failure to do so may compromise your organisation's certification status.

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

5.1 Scope of Certification

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

- Names and addresses of all locations covered by the certification. This identifies the inclusion of any women's refuge or residential service or out of home care unit. However the physical certificate will not list these addresses;
- Achievement of certification to the relevant standard(s) or code(s) of practice;
- The capability statement (range of products, services, and activities) for each location covered by the certification; and
- Any specific exclusion from the scope of certification.

Your organisation is obliged to ensure that BSI has been formally briefed in a timely manner when any variations occur. Your organisation should not wait until the next scheduled

...making excellence a habit.™



assessment to notify BSI. Failure to do so may compromise your organisation's certification status.

5.2 Refusal of Certification/Recognition

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

5.3 Suspension or Refusal of Certification

If your organisation's certification is suspended or refused, your organisation is required to, for the period of suspension or refusal:

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

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

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

6 Use of Logos

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

Use of the logo is subject to Condition and Rules of its application which is stated in the <u>BSI</u> Assurance Mark Guidelines

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

Specifications and use of the JAS-ANZ Accreditation Symbol are described in the <u>JAS-ANZ Mark</u> Use Guidelines document.

7 Accreditation Status

Certification to this standard is accredited to ISO 17065:2012

...making excellence a habit.™



This is a JAS-ANZ accredited scheme which is offered nationally. BSI is currently accredited to this scheme.

8 Standard Owner Information

The standard owner is the Victorian government's Department of Health & Human Services. The Department of Health & Human Services is also referred to as "The Department".

8.1 Notification to the Standard Owner

BSI is required to advise the Department at the following times;

- Twenty days after your organisation has contracting the services of BSI
- Twenty days prior to assessment that the assessment has been planned
- Immediately if there is evidence that your organisation has put a person accessing its services at risk of significant harm

BSI may be requested to provide further details relating to non-conformances raised at both the HSS and governance standard audits.

9 Confidentiality

BSI will treat all information in accordance with the Privacy Amendment (Enhancing Privacy Protection) Act 2012

10 Additional Process Requirements

Your organisation is required to keep a record of all known complaints relating to meeting the requirements of the HSV scheme. These records must be made available to your Client Manager and BSI when requested.

Your organisation is required to demonstrate that appropriate action has been taken to address these complaints through investigation and correct any deficiencies found. These actions must be documented.

Your organisation is required to ensure that consumers are offered information about the audit process and independent advocacy support to engage in the process prior to any consent being obtained.

Participation by consumers in audits is at all times voluntary and be based on the principal of informed consent.

Your organisation is required to make all necessary arrangements to allow the evaluation and surveillance activities to take place. This includes but is not limited to; Equipment, Product, Locations, Personnel and Sub-contractors.



11 Additional Obligations

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

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

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

- Authorised Representative
- Business name (Legal entity) and Trading Name (where applicable), ABN
- Ownership
- Contact details
- Location, site addresses
- Business activity/ies, scope of certification (Products and Processes)
- System Management Number of employees, covering all shifts and sites
- Billing Details
- Notification to BSI of any litigation or serious events or matters that relate to the scope of your organisation's certification

Observers

From time to time BSI requires Observers to be in attendance at an audit. This may be related to training of new staff and witness assessment of existing staff by BSI and JAS-ANZ. It is a requirement of certification that your organisation allows these activities to occur.

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

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

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



12 Misleading Statements

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

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

13 Complaints and Appeals

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

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

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

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

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

General Manager – Technical and Operations

Email: technical.anz@bsigroup.com

Phone: 02 8877 7100