Human Services Victoria (HSV) Certification Guidebook
Contents

1 Introduction ..................................................................................................................... 4
2 National Disability Insurance Scheme (NDIS) Transition Requirements ...................... 4
3 Audit Cycle & Certification ............................................................................................... 4
   3.1 Initial Inquiry ............................................................................................................ 4
   3.2 Audit planning ......................................................................................................... 4
   3.3 Audit preparation ..................................................................................................... 5
   3.4 Gap Analysis (optional) .......................................................................................... 5
   3.5 Initial Certification Audit ........................................................................................ 5
      3.5.1 Stage 1 ............................................................................................................. 5
      3.5.2 Certification stage 2 Audit ................................................................................. 6
   3.6 Maintenance Audits ............................................................................................... 7
   3.7 Reassessment Audits ............................................................................................. 7
   3.8 Out of cycle audits .................................................................................................. 7
4 The Audit Team ............................................................................................................... 7
5 Audit Planning and Consumer Participation .................................................................... 7
6 Reporting ....................................................................................................................... 8
7 Non-Conformances ....................................................................................................... 8
   7.1 Observations .......................................................................................................... 9
   7.2 Minor Non-Conformances ....................................................................................... 9
   7.3 Major Non-Conformances ...................................................................................... 9
   7.4 Notifiable issues ..................................................................................................... 9
8 Certification Decision ................................................................................................... 9
9 Certificates ..................................................................................................................... 9
   9.1 Scope of Certification ............................................................................................ 10
   9.2 Refusal of Certification/Recognition ...................................................................... 10
   9.3 Suspension or Refusal of Certification .................................................................. 10
10 Use of Logos ................................................................................................................ 11
11 Accreditation Status .................................................................................................. 11
12 Standard Owner Information ....................................................................................... 11
   12.1 Notification to the Standard Owner ...................................................................... 11
13 Confidentiality ............................................................................................................. 12
14 Additional Obligations ................................................................................................ 12
   14.1 Changes to your Organisation .............................................................................. 13
1 **Introduction**

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.

2 **National Disability Insurance Scheme (NDIS) Transition Requirements**

From 1 July 2019, NDIS providers in Victoria are required to register with the NDIS and undertake quality and safeguards assessments in accordance with the requirements of the NDIS Quality and Safeguards Commission and the NDIS Practice Standards.

NDIS Providers who have previously undertaken HSS certification under the previous arrangements prior to 1 July 2019 will be required to close any outstanding non-conformances, however from 1 July 2019 BSI will not conduct any further HSS audits for NDIS providers unless directed by the Department.

3 **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.

3.1 **Initial Inquiry**

Requests for quote for certification to HSS and applicable governance standards will be handled by the BSI sales team. A BSI sales team member will send you a quotation request form so you can provide us with some details about your business and your funded service delivery. This will assist us in preparing a proposal that tailors our audit services to your organisation's needs. We will need to know information about the service types you are funded to deliver, the number of people your organisation provides services to and the number of sites/outlets that deliver these services.

3.2 **Audit planning**

Once you have signed the BSI proposal, we will begin planning your certification assessment. The proposal together with this document forms the contract between your organisation and BSI. You will also receive a BSI Welcome Pack that outlines all essential information about BSI.

Your requirements will be entered into our database and a Client Services Officer will be appointed to look after your certification requirements. Your Client Services Officer 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.
3.3 Audit preparation

As soon as practicable after receipt of your signed application/proposal, your BSI Client Services Officer will contact your organisation. Your Client Services Officer will seek to establish a working relationship between your organisation and BSI, and to confirm your certification requirements in terms of the certification standards, locations, numbers of people using your service, and funded or registered activities to be included in the scope of certification. Your Client Services Officer will send you a Client Details Form to collect this information that is returned to the Client Services Officer.

Your organisation is required to keep a record of all known complaints relating to meeting the requirements of HSS. These records must be made available to the audit team and BSI when requested. Your organisation is required to demonstrate that you have taken appropriate action to address these complaints through investigation and correct any deficiencies found.

Your organisation must ensure that consumers are offered information about the audit process and independent support to engage in the process prior to any consent being obtained. Participation by your clients 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.

Prior to your audit, the BSI auditor will contact you for a de-identified consumer list including all your consumers. Your organisation is required to provide this information no less than 28 days from the start of your audit. Involvement of consumers in the audit process is an important aspect to certification. Failure to provide your BSI auditor with a de-identified participant list in a timely manner may result in postponement of your audit.

3.4 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.

3.5 Initial Certification Audit

3.5.1 Stage 1

Initial certification to the HSS is a two-step process. In order to gain certification to the HSV scheme your organisation is required to have a stage 1 assessment followed by a certification audit (stage 2). A stage 1 assessment is not required for subsequent recertification or surveillance audits and is not required for organisations transferring a current JAS-ANZ HSS certification to BSI from another provider.

A stage 1 audit determines your readiness for certification. 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. An initial audit reviews your organisation's system documentation, including policy manuals, procedures and other relevant supporting documentation.
A stage 1 audit is conducted by a qualified BSI auditor to assess your readiness to undertake a certification audit. It is usually completed off-site as a “desk-top review” however, the BSI auditor can conduct this at your organisation’s head office if necessary.

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 (limited circumstances)

BSI can also assist you in achieving certification to one of these governance standards. A copy of the governance standard report is sent to the Department by BSI, if BSI certifies your organisation to the governance standard.

Your organisation will receive a written report that will identify any areas that will need to be addressed prior to the stage 2. The stage 2 audit will generally be conducted within 3 months of the stage 1 audit, however this interval will be discussed between you and your BSI auditor to ensure your organisation has sufficient time to rectify any areas of concern identified in the stage 1.

### 3.5.2 Certification stage 2 Audit

The HSS is a three year certification cycle that commences from the certification date. A recertification audit is required to maintain certification. The cycle includes at least one mid cycle maintenance audit 18 months from the certification (stage 2) or recertification audit.

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 BSI auditor. The audit report is reviewed by an independent qualified report reviewer who makes the final decision for certification.

Your certificate will be issued electronically.

BSI will take all reasonable steps to ensure your organisation achieves certification within six months of the audit.
3.6 Maintenance Audits

Maintenance audits for HSV scheme are carried out at 18 monthly intervals. All four (4) human services standards must be assessed at 18 monthly audits.

If your organisation requests, BSI may split the 18 monthly maintenance audit into two annual audits to align with your organisation’s annual audits required under other JAS-ANZ accredited certification schemes. Where the maintenance audit is split into annual audits, the audit requirements may be divided to occur at each maintenance audit.

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

3.7 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 3 months prior to the expiry date. Extensions on the recertification dates are not permitted.

3.8 Out of cycle audits

BSI will conduct an out of cycle audit at any time if required by the Department.

4 The Audit Team

All HSS audits are conducted by a qualified HSS auditor. Certification and recertification audits are required to be conducted by an audit team comprising of at least 2 auditors. All BSI’s HSS auditors have completed mandatory training with the Department of Health and Human Services and are trained in quality auditing principles. BSI is required to regularly assess our auditor’s skills by observing them conducting an audit.

All auditors must comply with BSI’s code of conduct.

5 Audit Planning and Consumer Participation

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

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

The BSI audit team will sample all activities your organisation is funded or registered to deliver.
Consent is required before the BSI auditor can interview consumers or access their files. Your BSI auditor will provide you with a consent form template to be completed by the selected consumers. The signed consent forms will be sighted by the BSI auditor.

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

6 Reporting
At the conclusion of the audit, your BSI auditor 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

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

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

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

7 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. Audit findings are categorised as Conformity, Observations, Minor and Major non-conformances.

Agreed proposed corrective action plans (CAPs) (detailing correction, cause identification and long term fix) must be received within five (5) working of a non-conformance being identified.

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.
7.1 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.

7.2 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. 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.

7.3 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.

7.4 Notifiable issues
In the event your auditor identifies an issue that would be classified as a notifiable issue, BSI is required to immediately notify the Department of Health and Human Services who will investigate the matter and take necessary action. Your organisation will be required to follow the usual audit process to close any non-conformities.

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

9 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.

Once the audit and review is completed, BSI will issue standalone 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.

9.1 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);
- Activities the service provider is funded or registered to deliver for each location covered by the certification; and
- Any specific exclusion from the scope of certification.

9.2 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.

9.3 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

...making excellence a habit...
• 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

10 Use of Logos

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

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

Organisations that have been granted certification to 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 JAS-ANZ Mark Use Guidelines document.

11 Accreditation Status

Certification to this standard is accredited to ISO 17065:2012

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

12 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”.

12.1 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.

### 13 Confidentiality

BSI shall treat all information about a client in accordance with the Privacy and Data Protection Act 2014 (Vic), the Health Records Act 2001 (Vic), the Children, Youth and Families Act 2005 and other relevant legislation.

BSI shall at all times share with the Department any information acquired about service providers in order to assist the department to assess the performance of a service provider under its service agreement and against the certification standards.

BSI shall ensure consumers sampled are not identified.

All auditors sign the confidentiality agreement as part of their contract with BSI.

### 14 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

14.1 Changes to your Organisation
Your organisation is required to advise BSI without delay of any changes listed above. Some changes to these details may impact on your certification.
BSI will re-confirm these details when booking your next assessment. These details are used to determine the sites, audit duration and number of assessors required for the audit activity.

15 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.

16 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.

17 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. Organisations 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 organisation’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 Services Officer 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