



Western Australian Network of
Alcohol & other Drug Agencies

Standard on Culturally Secure Practice Review Summary

February 2019

Background

The Western Australian Alcohol and other Drug Sector Quality Framework (2005), was developed in consultation with the WA alcohol and other drug (AOD) sector, and with Aboriginal and Torres Strait Islander AOD services Australia-wide. This formed the basis for the Standard on Culturally Secure Practice (Alcohol and other Drug Sector) (2012) which was developed in response to an identified need for an industry specific certification standard.

The Standard on Culturally Secure Practice is a quality management system standard that can be applied by a diverse range of service types. Cultural security is a core principle of the Standard and aims to guide services in working respectfully and appropriately with Aboriginal and Torres Strait Islander peoples.

The Standard has been adopted by organisations across Western Australia including regional, rural and remote services and by an organisation in Far North Queensland. Participating service types include: supported accommodation, outpatient counselling, support and advocacy, residential rehabilitation, needle and syringe exchange, outreach, sobering up shelters, community patrols, medical services, youth services and Aboriginal community-controlled organisations.

The Standard is registered with the Joint Accreditation System of Australia and New Zealand (JAS-ANZ).

Standard Review

WANADA is currently coordinating a review which seeks to refine and improve the current Standard.

Interested parties to the review include:

- Certified member and non-member organisations
- Interested member organisations
- Institute for Healthy Communities Australia Certification (IHCAC) – Certification Body
- Joint Accreditation System of Australia and New Zealand (JAS-ANZ) – Accreditation Body
- Australasian Therapeutic Communities Association (ATCA) – co-user of Scheme
- Other relevant health and community service organisations, funding bodies, contract auditors, other peak bodies, research bodies, Aboriginal Elders and service user representatives

The project is overseen by a Steering Group comprising senior representatives from a range of AOD service types and other stakeholders such as the Mental Health Commission (Non-Government Purchasing and Development Directorate and Alcohol Other Drugs and Prevention Services - *Strong Spirit Strong Mind Aboriginal Programs and Workforce Development*), the WA Primary Health Alliance and the Department of Justice.

Project Objectives and Deliverables

- **Revised Standard (2nd edition).**
- **Revised Scheme** – coherent, fit for purpose, standalone.
- **Revised Interpretive Guide.**
- **Suite of tools and resources** - to support organisations in reviewing and improving their services in line with the Standard; and in their delivery of high quality, evidence informed services that meet the needs of their service users.
- **Promotion Plan** - to increase awareness, credibility and use of the Standard nationally.
- **Transition Plan** - for organisations that are currently certified against the 1st edition of the Standard to transition toward certification against the 2nd edition.
- **Website and/or Quality Portal** - to support organisations with quality processes and certification.
- **Product Management Plan** - to monitor and maintain currency of the Standard and Scheme and associated tools and resources.
- Consideration of expanded Standard ownership.

REVIEW PROGRESS

Clarifying the Standard's Intent

The name of the 1st edition Standard resulted in widespread misunderstanding that it was applicable to Aboriginal services only. By Steering Group consensus, the draft 2nd edition has been renamed the **Alcohol and other Drug and Human Services Standard**.

The new name and accompanying tag line **"Evidence Informed | Culturally Responsive"** aims to capture the Standard's intent and its uniqueness as an AOD sector standard, while making clear its applicability to a range of service types.

Content

Consultation identified a need for strengthening a number of key areas including clinical governance, risk management, governance, financial management, harm reduction, outcomes measurement and consumer participation.

It was also uniformly identified that cultural security/responsiveness, as well as responsiveness to diversity, needed to be strengthened and evidently embedded in all Performance Expectations. It was raised that cultural security with regard to Aboriginal and Torres Strait Islander peoples' needs to be treated separately.

Thematic improvement suggestions were provided in relation to the Standard as a whole – including the introduction of more contemporary approaches, the use of more current collective terminology, and the flow of the document in terms of how it is used by services and reviewed by auditors.

Feedback includes, but is not limited to, the following:

- Remove all requirements for policies and procedures to bring the Standard in line with contemporary standard requirements. A policy or procedure may be identified as needed by an organisation and can be used to demonstrate achievement against criteria and guide operations. Having a policy and/or procedure in place does not on its own, however, demonstrate quality.
- Address and minimise prescriptive criteria to increase flexibility for diverse services in their demonstration of quality practice.
- Replace health-centric terminology, such as "clinical" with a more broadly applicable term, such as "practice" to increase applicability across diversity of service types.
- Consider 'raising the bar' to reflect the increased sophistication of the sector but with a balanced approach that ensures criteria are achievable for the range of services likely to use the Standard. Noted that it needs to remain practical and realistic without increasing burden with regard to documentation.
- Regroup criteria to increase cohesion, improve flow for internal and external auditing, and reduce real or perceived duplication.
- Strengthen/review planning, monitoring, measurement, evaluation, outcomes measurement and improve link between evaluation (assessments and monitoring) and continuous quality improvement.
- Include a dedicated quality management Performance Objective.
- Include worker wellbeing indicators.
- Inclusion needs to explicitly address potential barriers such as stigma, disability, culture and language
- Co-occurring focus needs to be stronger - beyond mental health. Priority areas identified: mental and physical health conditions, trauma, grief and loss, family and domestic violence, children, homelessness, crisis, and self-harm and suicide risk.
- Strengthen Performance Expectation 1: Defining and Understanding the Target Community.
- Include a glossary of terms.

WANADA has taken on board and considered all of the feedback received. What is proposed is a tighter, more robust and contemporary standard.

The 2nd edition of the Standard will be released for use by June 2019.

Structure/Rating of the Standard

A number of points were raised which identified a need for change to the structure/rating scale of the Standard. These include the following:

- Due to the increased maturity of the sector and expectations from stakeholders, many of the good practice criteria should now be considered essential.
- A tiered achievement approach can be subjective and is difficult to audit.
- 'Good practice' is not an appropriate term to describe or promote extension and continuous quality improvement.
- Some good practice criteria are not relevant to some service types.
- Certification should require all essential criteria to be met.

Considering these points, the revised Standard now comprises only essential criteria, assessed against a three point rating scale as follows:

- Not applicable - dependent upon service type (this will need to be demonstrated).
- Not Met – the actions required have not been achieved.
- Met – the actions required have been achieved.

All essential criteria need to be met in order to achieve certification.

The term 'Performance Objective' has also been introduced to provide a descriptor for the sub-sections of each Performance Expectation.

WANADA Scheme

A scheme provides the rules and processes to be followed by certification bodies in determining if the service being audited meets the Standard. WANADA is working collaboratively with JAS-ANZ and other interested parties to progress the development of the new Scheme. All significant changes will be discussed with the Steering Group.

Significant proposed changes to the Scheme include:

- An increased requirement for services to meet all Essential Criteria.
- A requirement for the Certification Body to gather, document and maintain current information about cultural protocols relevant to the service being audited and to provide this documented information to the Audit Team prior to their engagement with the service.
- The addition of an example against the 'Support Guide' role, namely, a Service Provider may engage a recognised Aboriginal and/or Torres Strait Islander community Elder to provide advice and guidance to the Audit Team.
- A comprehensive reworking of the evaluation instructions to reflect rating changes and reduce ambiguity.
- Consideration of a requirement for the use of a medical technical expert for medical services.
- The addition of the *option* for service users of services exempt from the 'service user sampling' requirement to participate in the audit process.
- Changes to surveillance activity requirements to reduce costs to organisations using the Standard.

Interpretive Guide

The Standard is supported by a separate Interpretive Guide that provides examples of the way in which the criteria contained in the Standard might be applied in practice. Consultation showed strong support for the Interpretive Guide from services that had used it. The Interpretive Guide is currently being reviewed to reflect the 2nd edition of the Standard.

Glossary of Terms

The Standard and the Interpretive Guide will include a glossary of terms.

Tools and Resources

A list of tools and resources will be provided to support organisations in reviewing and improving their services in line with the Standard; and in their delivery of high quality, evidence informed services. The tools and resources will be mapped against the Standard.

Transition

A transition plan will be developed to support organisations that are currently certified or working toward certification against the 1st edition of the Standard.

Quality Portal

WANADA is considering the use of a quality portal for services that use the Standard. Features include cross mapping of standards, electronic self-assessment and ability to upload/update evidence, progress tracking, an automated quality improvement plan, workflow management tools, a document library, template generation tools and access for auditors. Automated mapping of evidence requirements across standards may be helpful to organisations who are audited against more than one standard.

WANADA Sector Quality Support

WANADA continues to support services to improve quality systems and achieve certification.

Currently there are:

- 16 organisations that are certified against the Standard on Culturally Secure Practice.
- 4 organisations preparing for or engaged in the certification process.
- 7 organisations that have made contact with a view to becoming certified against the Standard.

Positive feedback has been received from organisations that have received support from WANADA.

Feedback on the Certification Process

Certified organisations provided feedback on their experience of the certification process. Identified opportunities for improvement have been noted for action and where applicable, communicated to the certification body. Feedback regarding the auditors conduct, thoroughness and ways of working with the consumer groups was very positive. As requested, WANADA is exploring the engagement of a second certification body in consultation with JAS-ANZ.