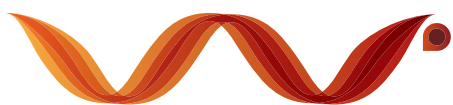


Standard on Culturally Secure Practice (Alcohol and other Drug Sector)



Western Australian Network of
Alcohol & other Drug Agencies

© Western Australian Network of Alcohol and other Drug Agencies (WANADA) 2012

This work is copyright. Apart from any use permitted under the Copyright Act 1968, no part may be reproduced by any process without prior written permission from the Western Australian Network of Alcohol and other Drug Agencies (WANADA). Requests and enquiries regarding reproduction and rights should be directed to WANADA.

ISBN 978-0-9873786-0-6

The Standard on Culturally Secure Practice (Alcohol and other Drug Sector)
Reference Group:

Wayne Flugge (Chairperson)

Jill Rundle	Ann Deanus	Nicole Merson
Rebecca MacBean	Daniel Morrison	Simon Doyle
Carol Daws	James Hunter	Janette Newman

Funders: Western Australian Drug and Alcohol Office and the Australian Government's Office for Aboriginal and Torres Strait Islander Health

Responsible Body: Western Australian Network of Alcohol and other Drug Agencies (WANADA)

Enquiries to: Western Australian Network of Alcohol and other Drug Agencies (WANADA)
PO Box 8048
Perth WA 6849

Telephone: 08 6365 6365
Website: www.wanada.org.au

WANADA staff acknowledge Aboriginal and Torres Strait Islander people as the Traditional Custodians of this country and its waters. WANADA staff wish to pay their respect to Elders past and present and extend this to all Aboriginal people reading this message.

TABLE OF CONTENTS

INTRODUCTION	1
APPLICABILITY OF THE STANDARDS	1
PERFORMANCE EXPECTATION 1: DEFINING AND UNDERSTANDING THE TARGET COMMUNITY ...	2
1.1 UNDERSTANDING COMMUNITY NEEDS	2
PERFORMANCE EXPECTATION 2: RIGHTS AND RESPONSIBILITIES.....	3
2.1 STATEMENT OF RIGHTS AND RESPONSIBILITIES.....	3
2.2 CONSUMER RIGHTS AND RESPONSIBILITIES POLICIES AND PROCEDURES.....	3
PERFORMANCE EXPECTATION 3: CONSUMER FOCUSSED PRACTICE	4
3.1 SUPPORT FOR CONSUMER INVOLVEMENT AT ALL LEVELS OF THE ORGANISATION	4
3.2 DEVELOPMENT, UTILISATION AND REVIEW OF A CONSUMER NEEDS AND SATISFACTION SURVEY TOOL AND CONSULTATION PROCESSES.....	4
3.3 INTERACTION QUALITIES.....	5
3.4 NON-DISCRIMINATORY PRACTICE AND EQUITABLE ACCESS.....	5
3.5 CLIENT NUMBER MANAGEMENT AND REFERRAL	6
PERFORMANCE EXPECTATION 4: EVIDENCE BASED PRACTICE.....	7
4.1 ENTRY CRITERIA	7
4.2 SCREENING, ASSESSMENT AND SERVICE MATCHING	7
4.3 INTER-AGENCY REFERRAL.....	8
4.4 CLINICAL PATHWAYS PLANNING	8
4.5 SERVICE APPROACH	9
4.6 HARM REDUCTION INFORMATION	9
4.7 OUTCOME REVIEW	9
PERFORMANCE EXPECTATION 5: STAFFING, DEVELOPMENT AND SUPPORT	10
5.1 STAFF QUALIFICATIONS AND EXPERIENCE.....	10
5.2 PERSONNEL AND TEAM DEVELOPMENT	10
5.3 COMPLIANCE WITH RELEVANT LEGISLATION	10
PERFORMANCE EXPECTATION 6: AGENCY MANAGEMENT	11
6.1 CONTRACTUAL COMPLIANCE	11
6.2 DEFINED AND DOCUMENTED ROLES AND RESPONSIBILITIES	11
6.3 FINANCIAL MANAGEMENT.....	11
6.4 RISK MANAGEMENT	12
6.5 HUMAN RESOURCE MANAGEMENT POLICIES AND PROCEDURES	12
6.6 DATA MANAGEMENT	12
6.7 ORGANISATIONAL PLANNING PROCESS	13
6.8 PARTNERSHIP AND INTEGRATION	13
PERFORMANCE EXPECTATION 7: ORGANISATIONAL GOVERNANCE	14
7.1 DEFINED AND DOCUMENTED ROLES AND RESPONSIBILITIES	14
7.2 FINANCIAL MANAGEMENT.....	14
7.3 MONITORING PERFORMANCE.....	15
7.4 ORGANISATIONAL PLANNING PROCESS	15

INTRODUCTION

Welcome to the first edition of the Standard on Culturally Secure Practice (Alcohol and other Drug Sector).

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.

To achieve certification against the Standard, agencies will need to meet 80% of criteria labelled as 'essential' under each Performance Expectation, which represent the minimum level of activity required to demonstrate cultural security in agency practice. The essential criteria relate to policies and procedures that would be in place, how an agency identifies the cultural and service delivery needs of its target community and what agency management, staff and consumers would know.

For agencies who may have participated in other quality programs a set of further criteria, called 'good practice criteria', have been developed. These criteria are intended to reflect what are sometimes referred to as 'systems elements' and are mostly related to monitoring and evaluation of agency practices. Your agency may choose to seek good practice certification against some or all of the Performance Expectations. Your agency will be awarded 'good practice' certification if, in addition to meeting 80% of the essential criteria for each Performance Expectation, 80% of the good practice criteria under each nominated Performance Expectation are met.

APPLICABILITY OF THE STANDARDS

The Standard has been developed to apply to a broad range of alcohol and other drug services, however there are a small number of criteria listed below which may not apply to information/education programs, Needle and Syringe Exchange Programs or Sobering-up Shelters. The applicability of these criteria will need to be discussed with your certification provider and may be excluded from the scope of certification by agreement with your certification provider.

Performance Expectation	Criteria which may be excluded from scope
1: Defining and Understanding the Target Community	Nil.
2: Rights and Responsibilities	Nil.
3: Consumer Focussed Practice	3.5 (a), (b), (c), (e), (g)
4: Evidence Based Practice	4.1 (all), 4.2 (all), 4.3 (c), (e), 4.4 (all), 4.7 (a).
5: Staffing, Development and Support	Nil.
6: Agency Management	6.6 (b), (d), (g).
7: Organisational Governance	Nil.

PERFORMANCE EXPECTATION 1: DEFINING AND UNDERSTANDING THE TARGET COMMUNITY

The agency understands the cultural needs of its community.

1.1 UNDERSTANDING COMMUNITY NEEDS

The agency understands the needs of its target community and has strategies in place to meet identified community needs.

ESSENTIAL CRITERIA

- a The agency has profiled its community and defined the target community.
- b The agency can demonstrate how it has determined the needs of the target community.
- c The agency can demonstrate that its services are developed and structured to respond to identified community needs.
- d The agency has an internal process for communicating identified community needs.
- e The agency can demonstrate how it supports access to services based on the described needs of the community

GOOD PRACTICE CRITERIA

- f The agency has established a representative community reference group, which is appropriately informed to give advice on the cultural security needs of the community.
- g The agency has processes for formulating effective responses to identified community needs.
- h Staff can describe how services are delivered to meet the culturally diverse needs of the target community.

PERFORMANCE EXPECTATION 2: RIGHTS AND RESPONSIBILITIES

The agency recognises consumers as 'health consumers' with related rights and responsibilities.

2.1 STATEMENT OF RIGHTS AND RESPONSIBILITIES

The agency has a formulated statement of consumer rights and responsibilities, which is provided to consumers and discussed with them so they understand what they can expect of the agency as early as possible in their intake. The service ensures all staff are aware of and support the rights and responsibilities of consumers.

ESSENTIAL CRITERIA

- a The agency has a formulated statement of consumer rights and responsibilities in appropriate formats.
- b The agency can demonstrate that consumers are informed of their rights and responsibilities.
- c Staff can describe how each consumer is informed of their rights and responsibilities.

GOOD PRACTICE CRITERIA

- d Consumers can describe their rights and responsibilities.
- e The agency can demonstrate that the way in which information is provided to consumers is culturally secure.

2.2 CONSUMER RIGHTS AND RESPONSIBILITIES POLICIES AND PROCEDURES

The agency has written and systematically reviewed policies, procedures and structures in place that guide consumer rights and responsibilities.

ESSENTIAL CRITERIA

- a The agency has relevant current policies and procedures related to health consumer rights and responsibilities.
- b Staff can describe how they apply the agency's consumer rights and responsibilities policies and procedures in practice.
- c The agency implements strategies to protect the confidentiality of consumer information.

GOOD PRACTICE CRITERIA

- d The agency can demonstrate that it implements consumer rights and responsibilities policies and procedures in practice.
- e The agency can demonstrate how it monitors the effectiveness of the way in which it provides information to consumers.

PERFORMANCE EXPECTATION 3: CONSUMER FOCUSED PRACTICE

The agency encourages consumer participation and considers feedback from consumers on an ongoing basis to inform planning and development of non-discriminatory practice.

3.1 SUPPORT FOR CONSUMER INVOLVEMENT AT ALL LEVELS OF THE ORGANISATION

The agency encourages and enables the active involvement of consumers in decision making, service planning and development.

ESSENTIAL CRITERIA

- a The agency can demonstrate ways in which it has involved consumers, including significant others, in decision making and program planning and development.
- b The agency has established practices to facilitate consumer involvement in decision making.
- c Staff can describe how consumers are involved in decision making processes.
- d Consumers can describe how they, or consumer representatives, are involved in decision-making processes.

GOOD PRACTICE CRITERIA

- e The agency has a current policy and/or procedures on consumer participation.
- f The agency can demonstrate consumer involvement in decision making leads to service changes.
- g The agency can demonstrate that it monitors the effectiveness of consumer initiated service changes.

3.2 DEVELOPMENT, UTILISATION AND REVIEW OF A CONSUMER NEEDS AND SATISFACTION SURVEY TOOL AND CONSULTATION PROCESSES

The agency performs ongoing assessment of consumer needs and satisfaction, utilising feedback to review practice with an aim to improving outcomes.

ESSENTIAL CRITERIA

- a The agency regularly assesses consumer satisfaction.
- b The agency seeks feedback from consumers on the appropriateness of the method used to assess consumer satisfaction.
- c Staff can describe strategies they implement to maximise consumer feedback.

GOOD PRACTICE CRITERIA

- d Data collected on consumer satisfaction is regularly collated and compared with data previously collected.
- e Collated data sets on consumer satisfaction are used to inform the agency's planning process.
- f The agency provides staff and consumers with the results of collated consumer feedback.

3.3 INTERACTION QUALITIES

The agency has written and systematically reviewed policies and procedures to inform respectful, sensitive and non-judgemental work practices.

ESSENTIAL CRITERIA

- a The agency considers cultural security as part of the development of policies and procedures which guide service delivery.
- b The agency ensures all staff have access to guidance on culturally secure service provision.
- c Staff can describe how they ensure services are delivered in a respectful and culturally secure manner.
- d Feedback confirms consumers are treated with dignity and respect.

GOOD PRACTICE CRITERIA

- e The agency can demonstrate that services are delivered in a respectful and culturally secure manner.
- f The agency ensures all staff have received training in cultural competence, relevant to their target community.

3.4 NON-DISCRIMINATORY PRACTICE AND EQUITABLE ACCESS

The agency is structured to maximise access, with particular emphasis on reviewing ready and appropriate access to services by Aboriginal and Torres Strait Islander people, people from culturally and linguistically diverse backgrounds, parents with under school-age children, young people, families and significant others, people with disabilities, people with co-occurring conditions, and people of different genders and sexual orientation and their carers. Within this, the agency:

- *Actively supports staff development to improve knowledge and understanding of service provision issues for a diversity of population groups; and*
- *Has links, or works collaboratively, with other agencies that have relevant expertise in the provision of services for diverse population groups.*

ESSENTIAL CRITERIA

- a The agency has a current policy on non-discriminatory practice.
- b Staff can describe their responsibilities in implementing the policy on non-discriminatory practice.
- c Staff can describe how they are supported to improve their knowledge and understanding of a diverse range of population groups.
- d The agency ensures waiting and treatment areas are welcoming to and appropriate for the target population.
- e The agency can demonstrate how it monitors equity of access.

GOOD PRACTICE CRITERIA

- f The agency can demonstrate how it meets the needs of consumers with complex needs including co-occurring alcohol and other drug and mental health conditions.
- g The agency can demonstrate that it works collaboratively with other agencies to meet the needs of consumers from diverse population groups.
- h The agency can demonstrate strategies applied to improve equity of access issues.

3.5 CLIENT NUMBER MANAGEMENT AND REFERRAL

The agency has written and systematically reviewed policy, procedures and strategies to maximise access, supporting consumers to either access the service in an acceptable timeframe or be referred to another agency.

ESSENTIAL CRITERIA

- a The agency has a current policy and procedure on waiting list management.
- b The agency has identified the maximum number of consumers it can provide effective service to.
- c Staff can describe how the waiting list is managed.
- d Staff can identify other agencies they work with in terms of referrals.
- e Consumers can describe how the service maintained contact and monitored any changes in their needs while they waited to access the service.

GOOD PRACTICE CRITERIA

- f The agency can demonstrate that access to services is prioritised, particularly where there is a waiting list.
- g The agency can demonstrate that it monitors any changes to the needs of consumers on the waiting list.
- h The agency can demonstrate that where they are unable to provide service to a consumer within a reasonable timeframe, consumers are referred to another service which can meet their needs.
- i The agency can demonstrate how it manages individual worker case loads to ensure effective service provision.

PERFORMANCE EXPECTATION 4: EVIDENCE BASED PRACTICE

The agency ensures consumers are well informed of the service options available to them, receive a coordinated and appropriately planned service in accordance with evidence based practice and clinical/practice principles that is negotiated with the individual and provided by appropriately experienced staff to best meet the consumer's needs.

4.1 ENTRY CRITERIA

The agency has regularly reviewed, clear and transparent consumer entry criteria informed by the expertise of staff and the service that can be provided to the community.

ESSENTIAL CRITERIA

- a The agency has documented entry criteria, which are consistent with funding obligations and service capacity including staff expertise.
- b The agency can demonstrate that entry criteria are applied in a non-discriminatory manner with regard to age, gender, culture, religion, sexuality and disability, within the boundaries of service capacity.
- c The agency entry criteria includes consideration of people with complex needs, including co-occurring mental health conditions.

GOOD PRACTICE CRITERIA

- d The agency can demonstrate that the entry criteria are disseminated to, and understood by, the community including key referral sources for the target population.
- e The agency monitors the level of access to services by a diverse range of population groups and uses this information to inform the organisational planning process.

4.2 SCREENING, ASSESSMENT AND SERVICE MATCHING

The agency conducts adequate screening and assessment to determine if engagement of a consumer with the service is appropriate (based on individual needs, considering support and treatment requirements and whether voluntary, coerced, or from a specific population group). The agency provides the consumer with information on treatment options available, including what would be provided by the agency or elsewhere in the sector (if determined as not suitable for the service), to ensure the consumer is able to make an informed choice of service based on appropriate treatment matching their needs.

ESSENTIAL CRITERIA

- a The agency has a current policy on screening and assessment.
- b The agency can demonstrate that screening is adequate for treatment matching purposes.
- c The agency can demonstrate that the assessment process supports the identification of consumer diversity and any arising culturally specific service needs.
- d The assessment process includes consideration of complex needs, including co-occurring mental health conditions.
- e The agency can demonstrate that standard agency tools are used in the screening and assessment processes.
- f Staff can describe the screening and assessment processes.
- g Consumers confirm that the screening and assessment process addressed their service needs, and enabled them to know what service would be provided.

GOOD PRACTICE CRITERIA

- h The agency can demonstrate that where engagement with a consumer is considered inappropriate, the consumer is referred to a more appropriate agency, or provided with information on other agencies they could access.
- i The agency monitors the success of the screening and assessment processes, improving the processes where necessary.

4.3 INTER-AGENCY REFERRAL

The agency and staff facilitate referral of consumers to other services when entry is denied or as appropriate for case management, shared care and through care; with staff informed of services provided by, and referral requirements of, other agencies, with the aim of minimising duplication of assessment processes.

ESSENTIAL CRITERIA

- a The agency has a current policy on referral.
- b The agency can demonstrate that consumers who are denied entry are referred to a more appropriate service, where reasonable.
- c Details of referrals are included on the consumer's record.
- d Staff can describe how they refer consumers to other agencies.

GOOD PRACTICE CRITERIA

- e The agency can demonstrate the referral process includes follow-up with consumers and the agency to which they were referred, to evaluate the appropriateness of the referral.
- f The agency monitors the success of their referral procedures.

4.4 CLINICAL PATHWAYS PLANNING

As appropriate, the agency negotiates a clinical pathway plan with the consumer to ensure a holistic therapeutic approach is offered.

ESSENTIAL CRITERIA

- a The agency has a current policy on treatment/case management.
- b The agency prepares a documented treatment/case plan for each consumer.
- c Staff can describe how they ensure treatment/case plans are based on the assessment of consumer needs and, where practicable, preferences.
- d Consumers can describe how they were involved in developing their treatment/case plan.

GOOD PRACTICE CRITERIA

- e The agency ensures individual treatment/case plans are reviewed and amended, as necessary, in consultation with the consumer.
- f The agency conducts regular consumer record audits to ensure treatment/case planning documentation requirements are being implemented.
- g Individual treatment/case plans include consideration of complex needs (eg, co-occurring mental health conditions), where appropriate.
- h A discharge plan is developed and a copy provided to the consumer and with their consent, to relevant agencies.
- i The agency can demonstrate that discharge planning includes consideration of complex needs (eg, co-occurring mental health conditions), where appropriate.

4.5 SERVICE APPROACH

The service provided (whether the provision of information/education, general counselling, brief intervention, detoxification, residential rehabilitation, pharmacotherapy, sobering-up, etc) is informed by clearly demonstrated up to date evidence and/or practice wisdom, guided by clinical/practice principles, negotiated with the consumer and based on individual needs.

ESSENTIAL CRITERIA

- a The agency has a current policy on clinical practice, including links to evidence based practice.
- b The agency can demonstrate that staff orientation/induction includes information on the service approach.
- c Staff can describe their clinical practice and how it relates to the service approach.
- d Staff can describe how they remain informed of current good clinical practice.

GOOD PRACTICE CRITERIA

- e The agency can demonstrate that it monitors clinical practice to ensure it is based on up to date evidence.
- f The agency can demonstrate that its service approach is appropriate for the target community.
- g The agency can demonstrate that it periodically reviews its service approach.

4.6 HARM REDUCTION INFORMATION

The agency provides appropriate harm reduction information and support to consumers with risk/potential risk behaviour, which is monitored throughout the provision of service.

ESSENTIAL CRITERIA

- a The agency has a current policy on the provision of harm reduction information.
- b Staff can describe how they provide harm reduction information to consumers and significant others in a culturally secure manner.

4.7 OUTCOME REVIEW

The agency has established performance indicators, measuring changes in key areas of consumer functioning, to provide evidence of service outcomes and to inform planning processes.

ESSENTIAL CRITERIA

- a The agency has identified a set of performance indicators to measure changes in key areas of consumer functioning.
- b The agency can demonstrate how they collect and use data to demonstrate service outcomes.
- c Staff can describe how they collect data to facilitate the measurement of service outcomes.
- d Consumer feedback is sought on service outcomes.

GOOD PRACTICE CRITERIA

- e The agency can demonstrate how it measures the effectiveness of its services.
- f The agency can demonstrate how outcomes data is used in the planning of services.
- g The agency reports collated outcomes to the community, including key stakeholders.

PERFORMANCE EXPECTATION 5: STAFFING, DEVELOPMENT AND SUPPORT

The agency provides adequate and appropriate staffing, development and support for maximum effectiveness of service delivery.

5.1 STAFF QUALIFICATIONS AND EXPERIENCE

The agency ensures all staff have appropriate knowledge, skills and experience.

ESSENTIAL CRITERIA

- a The agency conducts appropriate organisation skills needs analyses.
- b The agency maintains up to date records relating to individual staff experience and qualifications.
- c The agency has implemented a process to ensure staff maintain appropriate credentials.
- d The agency conducts skills gap analysis as part of the introduction of new services and works to address any identified gaps prior to commencement of services.

5.2 PERSONNEL AND TEAM DEVELOPMENT

The agency has written personnel and team development policies, procedures and strategies, which are regularly reviewed for maximum effectiveness.

ESSENTIAL CRITERIA

- a The agency ensures all new staff participate in induction.
- b The agency has current policies on personnel and team development.
- c The agency can demonstrate that all staff are provided with development opportunities and resources to build on existing knowledge, skills and cultural understanding, relevant to the target community.
- d The agency can demonstrate that all staff are provided with in-house and/or external development opportunities relevant to their current role.

GOOD PRACTICE CRITERIA

- e The agency uses information gained through organisational skills/gap analyses and subsequent training needs analyses, to develop an overall professional development and recruitment plan for the agency.
- f The agency provides shared learning and/or mentoring/peer support opportunities for staff to exchange development experiences with their colleagues.

5.3 COMPLIANCE WITH RELEVANT LEGISLATION

The agency is able to demonstrate its compliance with the requirements of their State/Territory occupational health and safety and equal opportunity/anti-discrimination legislation.

ESSENTIAL CRITERIA

- a The agency has a current policy on occupational health and safety.
- b The agency can demonstrate compliance with the requirements of the applicable occupational health and safety legislation.
- c The agency has a current policy on equal opportunity/anti-discrimination.
- d The agency can demonstrate compliance with the requirements of the applicable equal opportunity or anti-discrimination legislation.

PERFORMANCE EXPECTATION 6: AGENCY MANAGEMENT

Management practices maximise organisational efficiency and effectiveness and ensure accountability.

6.1 CONTRACTUAL COMPLIANCE

The agency operates according to its contractual obligations and service description.

ESSENTIAL CRITERIA

- a The agency can demonstrate how it monitors compliance with its contractual obligations.
- b The agency has implemented a process to address potential breaches of its contractual obligations.
- c The agency has formulated service description(s) that guide practice.

GOOD PRACTICE CRITERIA

- d The agency can demonstrate that it meets its contractual obligations, including those contained in its service/funding agreement(s).

6.2 DEFINED AND DOCUMENTED ROLES AND RESPONSIBILITIES

The roles and responsibilities of each staff member are clearly defined and documented, provided to individuals on appointment to their position, supported by appropriate policies and procedures and reviewed as needed.

ESSENTIAL CRITERIA

- a Each staff member has a current documented position description, which includes a description of the extent of authority for those holding a management position.
- b Staff members with a management responsibility can describe the extent of their authority.
- c The agency can demonstrate that position descriptions are revised, as necessary.

GOOD PRACTICE CRITERIA

- d The agency demonstrates a commitment to cultural diversity in its recruitment and selection processes.

6.3 FINANCIAL MANAGEMENT

The agency demonstrates responsible financial management.

ESSENTIAL CRITERIA

- a Where staff are empowered to expend funds, they can describe the extent of their financial delegation.
- b The agency maintains an up to date asset register.
- c The agency can demonstrate that it meets its financial reporting obligations.

GOOD PRACTICE CRITERIA

- d The agency can demonstrate compliance with its financial delegations policy.
- e The agency has a current purchasing procedure.
- f The agency's most recent audit of financial statements resulted in no mandatory requirements on the manner in which the agency manages its finances.

6.4 RISK MANAGEMENT

The agency has completed a risk assessment and developed written strategies for identified risks, reviewing processes as needed to ensure risks are minimised.

ESSENTIAL CRITERIA

- a The agency has a current policy on risk management.
- b The agency has current procedures for crisis management.
- c Relevant staff can describe how risks are identified and managed.
- d The agency has a current risk management plan which includes all identified strategic, operational and service delivery risks and strategies to manage them.

GOOD PRACTICE CRITERIA

- e The agency has a process for ensuring organisational policies and procedures are reviewed in a planned and deliberate manner.

6.5 HUMAN RESOURCE MANAGEMENT POLICIES AND PROCEDURES

The agency has written and systematically reviewed human resource management policies and procedures.

ESSENTIAL CRITERIA

- a The agency has current policies and procedures on human resource management, which are consistent with relevant legislation and encourage cultural diversity.
- b Staff have ready access to, and are aware of, the agency's human resource management policies and procedures.
- c Staff confirm they receive regular feedback on their performance, as part of a formal performance and professional development review process.

GOOD PRACTICE CRITERIA

- d The agency can demonstrate compliance with their human resource management policies and procedures.

6.6 DATA MANAGEMENT

The agency has procedures to ensure the integrity of data collected and the way data is used is open and transparent.

ESSENTIAL CRITERIA

- a The agency has procedures to ensure the integrity of data and guide the use of data collected.
- b The agency collects and appropriately stores demographic data on individual consumers.
- c The agency collects and appropriately stores demographic data on their target community.
- d The agency collects data to enable the measurement of service outcomes.
- e Staff can describe their responsibilities in relation to data collection and storage.

GOOD PRACTICE CRITERIA

- f Collected demographic data is used to inform the organisational planning process.
- g Outcome data is used to inform the organisational planning process.

6.7 ORGANISATIONAL PLANNING PROCESS

The agency has an open and transparent plan that is documented, implemented and reviewed. The plan is based on a consultative process utilising feedback from consumers, other service providers, staff and funding bodies, current and projected needs identified in area planning, general statistics/trends and service data collection.

ESSENTIAL CRITERIA

- a The agency has a current policy and procedure to guide organisational planning.
- b The agency conducts regular consultations with their community.
- c Management can describe how the community, including key stakeholders, are involved in the planning process.
- d Management can describe how they provide input into and action items in the strategic plan.
- e Staff can describe how they provide input into organisational planning.

GOOD PRACTICE CRITERIA

- f The agency has developed and implemented a Reconciliation Action Plan (RAP).
- g The agency has implemented an organisational planning process to assist in achieving the goals in the strategic plan.
- h The agency can demonstrate community consultation is undertaken as part of the service planning process.
- i The agency provides feedback to the community on the outcomes of consultations.

6.8 PARTNERSHIP AND INTEGRATION

The agency collaborates with primary stakeholders and other community agencies and has developed policies, procedures and partnership agreements to ensure better outcomes for consumers.

ESSENTIAL CRITERIA

- a The agency has a current policy on partnership and integration.
- b The agency facilitates staff attendance at relevant local network meetings.
- c The agency has established linkages with local culturally diverse services and other relevant agencies.

GOOD PRACTICE CRITERIA

- d The agency has formal partnership agreements where appropriate.
- e Formal partnership agreements and Memorandums of Understanding (MOU's) include measures to evaluate the effectiveness of collaborations.
- f The agency can demonstrate a commitment to working collaboratively with other agencies to meet the complex needs of its consumers.

PERFORMANCE EXPECTATION 7: ORGANISATIONAL GOVERNANCE

Governance practices maximise organisational transparency, effectiveness and ensure accountability and compliance with legislation.

7.1 DEFINED AND DOCUMENTED ROLES AND RESPONSIBILITIES

The roles and responsibilities of the Board of Management/Management Committee members are clearly defined and documented, provided to individuals on appointment to their position, supported by appropriate policies and procedures and reviewed as needed.

ESSENTIAL CRITERIA

- a The agency has appropriate current policies and procedures to support the functions of the Board of Management/Management Committee.
- b The organisation has documented roles and responsibilities for Board of Management/Management Committee members.
- c The chairperson can describe the orientation process for new members of the Board of Management/Management Committee.
- d The composition of the Board of Management/Management Committee contains an appropriate mix of stakeholders.

GOOD PRACTICE CRITERIA

- e The organisation can demonstrate that it has a process for ensuring renewal of the Board of Management/Management Committee, which supports continuity of experience and organisational knowledge.
- f The organisation can demonstrate that individuals are provided with orientation and any necessary skills development upon joining the Board of Management/Management Committee.
- g Standing committees and/or working groups have documented terms of reference, which include definition of the scope of their authority.

7.2 FINANCIAL MANAGEMENT

The Board of Management/Management Committee exercises appropriate oversight of the agency's financial management.

ESSENTIAL CRITERIA

- a The Board of Management/Management Committee approves the financial delegations and budgetary planning policies, which are reviewed and revised as necessary.
- b The Board of Management/Management Committee approves the agency's annual budget.
- c The Board of Management/Management Committee receives regular reports comparing the agency's progress to the approved budget.

GOOD PRACTICE CRITERIA

- d The Board of Management/Management Committee has established financial strategies to ensure sustainable service provision, which are incorporated into the agency's strategic plan.

7.3 MONITORING PERFORMANCE

The Board of Management/Management Committee has implemented strategies for performance monitoring and management.

ESSENTIAL CRITERIA

- a The Board of Management/Management Committee receives regular reports from management on the agency's compliance with contractual obligations.
- b The Board of Management/Management Committee can demonstrate that the agency complies with the requirements of its constitution.
- c The Board of Management/Management Committee has implemented a process to monitor performance against the objectives in the strategic plan.
- d The Board of Management/Management Committee has approved a risk management framework for the organisation.
- e The Board of Management/Management Committee conducts regular performance appraisals of the executive officer/chief executive officer.

GOOD PRACTICE CRITERIA

- f The Board of Management/Management Committee undertakes a periodic assessment of their own performance.

7.4 ORGANISATIONAL PLANNING PROCESS

The Board of Management/Management Committee exercises effective leadership in the strategic direction of the organisation.

ESSENTIAL CRITERIA

- a The Board of Management/Management Committee has developed and/or approved the current strategic plan, which includes the values/vision and mission/purpose of the organisation.
- b The Board of Management/Management Committee receives regular reports on progress against the objectives in the strategic plan and advises on remedial action to be taken by agency management, if required.



Level 1, 25 Gladstone Street, East Perth 6000
PO Box 8048 Perth WA 6849
P: (08) 6365 6365
F: (08) 9328 1682
E: drugpeak@wanada.org.au
W: www.wanada.org.au
ABN 22 106 585 976