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**HUMAN SERVICES**

Quality Framework

Measuring quality, improving services

Version 6.0

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# Introduction

The Human Services Quality Framework (HSQF) is a system for assessing and improving the quality of human services.

The HSQF incorporates:

* a set of quality standards, known as the Human Services Quality Standards (the standards), which cover the core elements of human service delivery
* an assessment process to measure the performance of service providers against the standards (through independent third-party certification, self-assessment or recognition of accreditation under another approved quality system), and
* a continuous improvement framework, which supports the participation of people who use services in quality improvement.

The HSQF was developed by the Queensland Government in collaboration with the non-government sector to increase consistency in service quality, ensure public confidence in service delivery and maintain important safeguards for people who use services. It is designed to reduce duplication and red tape for human service organisations seeking to demonstrate continuous quality improvement thus allowing those organisations to focus their resources on service provision.

Participation in the HSQF offers benefits for all parties:

|  |  |  |
| --- | --- | --- |
| **People using services, families and carers** | **Human service organisations** | **Government** |
| * Access to better, more reliable services * Greater focus on individual rights * Confidence in the organisation’s systems and processes * Opportunity to contribute to service improvement. | * A clear and consistent framework for planning, operating and improving services * Reduction in administrative burden and compliance costs * A holistic assessment of the organisation’s systems and processes * The opportunity to position the organisation to deliver services in other areas of human services. | * A streamlined, consistent process to monitor the quality of services funded by government * Increased confidence in government investment in services * Improved public accountability. |

## This booklet

This booklet describes how the Human Services Quality Framework applies to in-scope organisations and services.

**Part 1** contains information about the:

* organisations in-scope of the HSQF
* quality pathways to assess performance against the standards and how these apply to in-scope organisations
* resources available to support organisations.

**Part 2** outlines the Human Services Quality Standards.

**Part 3** provides detailed information about the quality pathways for all services in-scope of the HSQF.

**Part 4** provides information about the funding thresholds that apply to some organisations.

In this booklet, the following terms are used:

|  |  |
| --- | --- |
| ***Audit*** | Assessment by a third-party auditor/certification body of an organisation’s performance against the standards. |
| ***Demonstrate performance against the standards*** | Showing the extent to which the human service organisation is complying with the requirements contained within the Human Services Quality Standards. Also referred to as demonstrating compliance with the standards. |
| ***Human Services Quality Framework team*** | The Queensland Government team, located in the Department of Communities, Disability Services and Seniors (DCDSS), that is responsible for administering the HSQF. |
| ***Organisation*** | The legal entities that deliver publicly funded human services including organisations funded by a Queensland Government department.  Organisation may also be used interchangeably with human service organisation, non-government organisation (NGO), funded organisation, provider or supplier. |
| ***Quality pathway*** | Quality pathway, or demonstration method, is the method that a human service organisation uses to demonstrate that it is complying with the requirements contained within the Human Services Quality Standards. Quality pathway may be used interchangeably with demonstration method. |
| ***Service stream*** | A broad category of service delivery in-scope of the HSQF such as, but not limited to, Community Services and Seniors, Child and Family Services, and Disability Services. |
| ***Service/service type*** | A care, support activity, class of supports or service provided by a human service organisation. Service types are listed by service stream in Part 3 of this document. |

# Part 1 – Scope and application of HSQF

## Organisations in-scope of the HSQF

The HSQF applies to a range of human service organisations as described below.

|  |  |
| --- | --- |
| **1** | Organisations funded by the Department of Communities, Disability Services and Seniors (DCDSS) and the Department of Child Safety, Youth and Women (DCSYW) |
| The HSQF is required to be implemented by:   * Organisations funded to deliver human services under service agreements, or other specified arrangements, with the DCDSS and DCSYW[[1]](#footnote-1). * Organisations funded to deliver child protection placement services in-scope of licensing under an Individual Client Service Agreement with DCSYW (Child Related Costs Placement and Support (CRC PAS)). * Disability services delivered directly by DCDSS.   All organisations funded by DCDSS and DCSYW are required to deliver human services in compliance with the standards. Some organisations are required to demonstrate their compliance with the standards through the applicable quality pathway specified in Part 3. | |
| The contractual requirement to comply with the HSQF is specified in:   * Clause 3.3 of the Service Agreement – Standard Terms and clauses 4.1 to 4.8 of the Service Agreement – Funding and Service Details, and/or * Clause 4.1 of the (Short Form) Terms and Conditions and clause 7 of Short Form — Particulars (Service Provision), and/or * Notification or variation to agreement.   Providers of child protection placement services funded through CRC PAS which have been confirmed as in-scope of licencing are required to achieve and maintain HSQF certification as a condition of their Licence to Provide a Care Service. | |

|  |  |
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| **2** | Organisations funded by Queensland Health |
| The HSQF is available to some organisations funded by Queensland Health to deliver services listed in Part 3. | |
| Organisations that have been advised by Queensland Health they can use HSQF certification to meet quality requirements for the Queensland Health services listed in Part 3 may include those services in their HSQF audit/certification processes. | |

|  |  |
| --- | --- |
| **3** | Other organisations |
| The HSQF is available to other organisations for services delivered in Queensland where approved by the HSQF team and, if relevant, the Queensland Government department funding the human service delivery. | |
| Organisations not already in-scope of the HSQF that wish to obtain certification against the Human Services Quality Standards must apply to the HSQF team for approval. Where another Queensland Government department is funding the organisation, that department will be consulted.  Note: No approval is required to implement the Human Services Quality Standards or to use HSQF self-assessment tools on the HSQF website. | |

## Quality pathways – overview and general information

There are three pathways for demonstrating performance, or compliance, with the standards:

1. Certification
2. Self-assessment
3. Evidence of accreditation under another approved quality system

The quality pathway that applies to an organisation is based on the:

* type and complexity of services provided
* vulnerability of people using services
* level of DCSYW/DCDSS investment in service delivery and/or
* specific departmental requirements.

The HSQF recognises that many organisations deliver a range of different services from various locations across the state. As a general rule to simplify processes, organisations only need to demonstrate compliance through one method[[2]](#footnote-2), regardless of the number of services and/or service sites or outlets they operate.

The tables below provides an overview of each quality pathway.

|  |  |
| --- | --- |
| U:\SPP\CoS\CSPR\HSQFDSQ\HSQF\Quality Standards Project\Administration\Templates\HSQF_New Templates 2018\2. Certification Templates\Icon_Certification.png | **Certification** |
| **Applies to** | * Generally applies to direct service delivery to vulnerable people. |
| **Description** | * Organisations in-scope of certification are required to achieve and maintain certification against the Human Services Quality Standards. * Certification is granted when an organisation has been assessed by an independent third-party (known as a certification body) as meeting the standards. Certification bodies are accredited by the Joint Accreditation System of Australia and New Zealand (JAS-ANZ) which is the government-appointed body for accrediting and monitoring certification bodies and designing certification systems. * Organisations are required to contract a JAS-ANZ accredited certification body to assess their suitability for certification. |
| **Expected outcome** | * Standards are being met and organisational performance is being enhanced through continuous improvement. |
| **Timeframes** | * Organisations new to HSQF are required to achieve certification within 18 months of either: * signing a service agreement with DCDSS or DCSYW to deliver services * being notified of the requirement to achieve HSQF certification * being approved to use HSQF as a quality system of choice. * Organisations that already hold certification are required to include new/additional services into their next HSQF audit. * For organisations funded by DCDSS and DCSYW, the timeframes for certification, that are consistent with the above, are specified in the *Service Agreement - Funding and Service Details*. |
| **Further information** | * Part 3 provides detailed information about the services in-scope for certification. * Part 4 provides information about how funding thresholds apply. * Further information, tools and resources to support certification are available on the HSQF website at [www.communities.qld.gov.au/industry-partners/funding-grants/human-services-quality-framework/certification-quality-requirements-resources](http://www.communities.qld.gov.au/industry-partners/funding-grants/human-services-quality-framework/certification-quality-requirements-resources). |

| **U:\SPP\CoS\CSPR\HSQFDSQ\HSQF\Quality Standards Project\Administration\Templates\HSQF_New Templates 2018\3. Self-Assessment Templates\Icon_Self Assessment.png** | | **Self-assessment** | |
| --- | --- | --- | --- |
| **Applies to** | | * Generally applies to non-direct service delivery and/or to universal or low-intensity service delivery. * For organisations funded by DCDSS or DCSYW, self-assessment may also apply where the level of departmental investment falls within a set threshold, as outlined in Part 4. | |
| **Description** | | * Organisations in-scope of self-assessment complete a HSQF self-assessment to rate their performance against the Human Services Quality Standards. * Further guidance on the process is detailed in the *Self-assessment and Continuous Guide – Self-Assessable Organisations* published on the HSQF website. | |
| **Expected outcome** | | * Standards are being met and identified improvements are being implemented. * Simpler assessment process for lower risk service delivery. | |
| **Timeframes** | | * New self-assessable organisations complete a self-assessment against the standards and submit this to their contract officer within 18 months of signing a *Service Agreement – Funding and Service Details*. * A continuous improvement plan, showing organisational progress made implementing improvements identified in the self-assessment, is due within 30 months of signing the service agreement (i.e. 12 months after the self-assessment). * Another self-assessment is completed 18 months later. * For organisations moving from HSQF certification to self-assessment, the first self-assessment will be due on the date when the next HSQF audit would have occurred. * Disability services funded organisations approved to use restrictive practices with Continuity of Support (CoS)service users are required, at a minimum, to complete and submit a HSQF self-assessment against HSQF quality indicators relating to restrictive practices within three months of the restrictive practice approval. Further details are provided in Part 3 - Disability Services – Notes and Exceptions. | |
| **Further information** | | * Part 3 provides detailed information about the services in-scope for self-assessment. * Part 4 provides information about how funding thresholds apply. * Further information, tools and resources to support self-assessment are available on the HSQF website at [www.communities.qld.gov.au/industry-partners/funding-grants/human-services-quality-framework/self-assessable-quality-requirements-resources](http://www.communities.qld.gov.au/industry-partners/funding-grants/human-services-quality-framework/self-assessable-quality-requirements-resources). | |

| **U:\SPP\CoS\CSPR\HSQFDSQ\HSQF\Quality Standards Project\Administration\Templates\HSQF_New Templates 2018\4. Other Accreditation\Icon_Other Accreditation.png** | **Evidence of accreditation under another approved quality system** |
| --- | --- |
| **Applies to** | * Applies on a case-by-case basis where an organisation is accredited or certified against another approved quality system for other services. |
| **Description** | * This method enables an organisation to submit evidence of current accreditation or certification under another quality system to demonstrate their performance against the Human Services Quality Standards. * Applications for recognition of other accreditation are assessed by HSQF on a case-by-case basis. Factors considered include whether an organisation’s existing certification or accreditation aligns well with HSQF and is appropriate for the types of services being delivered. * Where an organisation’s other accreditation is only partially recognised, the organisation will be required to complete a periodic gap self-assessment against the Human Services Quality Standards. * It is important to note that, in addition to HSQF, some services are required to implement practice standards such as the *Queensland Aboriginal and Torres Strait Islander Child Protection Peak Practice Standards*. These practice standards are an additional requirement and do not exempt organisations from the requirement to demonstrate compliance with HSQF. |
| **Expected outcome** | * Standards are being met and organisational performance is being enhanced through continuous improvement. * Reduced duplication for organisations accredited or certified under another quality system. |
| **Timeframes** | * Organisations must keep up-to-date copies of their other accreditation documents (report and certificate) current with their contract officer. * Where organisations are required to complete a gap self-assessment, this will be determined on a case-by-case basis but usually will be due 18 months after approval to use this demonstration method. |
| **Further information** | * Part 3 provides detailed information about the services for which other accreditation is accepted. * Part 4 outlines how funding thresholds apply to organisations approved to use other accreditation. * Further information about approved other accreditation and the process of applying for recognition of other accreditation are available on the HSQF website at [www.communities.qld.gov.au/industry-partners/funding-grants/human-services-quality-framework/other-accreditation-process-resources](http://www.communities.qld.gov.au/industry-partners/funding-grants/human-services-quality-framework/other-accreditation-process-resources). |

## Quality pathways – application to in-scope organisations

The quality pathway for all services in-scope of the HSQF is specified in Part 3 and is subject to the relevant notes and exceptions in the applicable table and the funding thresholds outlined in Part 4.

| **How to identify your organisation's quality pathway** | |
| --- | --- |
| **Step 1** | In Part 3, look-up the quality pathway for all the in-scope services you deliver. |
| **Step 2** | In Part 3, check the Notes and Exceptions listed in the tables for your in-scope services. |
| **Step 3** | In Part 4, check if funding thresholds change your quality pathway. |
| **Step 4** | Confirm your quality pathway with your contract officer or the HSQF team. |

Changes in funding levels or the types of services funded may change an organisation’s quality pathway. When changes occur, organisations should discuss HSQF implications with their contract officer. In-scope organisations will be advised about changes to quality pathways and related HSQF requirements by their Queensland Government funding department.

Despite the exceptions described in Part 3 and funding thresholds outlined in Part 4, the HSQF team in consultation with an organisation’s funding department, may determine that it is not appropriate for an organisation or service to demonstrate compliance with the HSQF or that a different demonstration method will apply than indicated in Part 3 or Part 4. This will be determined on a case-by-case basis.

For services in-scope of HSQF but not listed in Part 3, the applicable demonstration method will be determined on a case-by-case basis.

### Subcontracting and application of HSQF to subcontracted services

For organisations funded under a service agreement with DCDSS or DCSYW, the Service Agreement – Standard Terms, clause 22 states that organisations may only subcontract services where there is prior written consent from the department/s. Organisations that subcontract services must have a contract with the subcontractor.

Responsibility for ensuring that services are delivered in compliance with the standards rests with the funded organisation, even in relation to the services delivered by a subcontractor. Funded organisations that are required to implement the HSQF remain liable under their service agreement for all conditions, including HSQF provisions, even if services are subcontracted. Therefore funded organisations should ensure that any subcontracting arrangements require the subcontractor to meet the HSQF and other contractual responsibilities applicable to the service being subcontracted.

Where the organisation is required to achieve certification of the services, the subcontract must include a term that the subcontractor agrees to allow an independent certification body to access its premises to conduct an assessment of subcontracted services against the standards.

Examples of HSQF related issues to be included in subcontracts include specifying that HSQF auditors can access the physical environment of subcontracted service delivery sites, interview staff delivering services, obtain feedback from people using subcontracted services and review their files (subject to consent).

Subcontracted services that are in-scope of certification must be assessed against the HSQF in one of the following ways:

1. Included in the funded organisation’s HSQF audit as a subcontracted service delivery site.
2. The subcontractor may complete a separate HSQF audit for the subcontracted services.
3. Where the subcontractor is already in-scope of HSQF certification for other services, the subcontracted services may be included in the subcontractor’s own HSQF audit.

If the service being subcontracted is only self-assessable under the HSQF, the subcontractor’s role and input into the self-assessment needs to be considered and planned.

Organisations providing services through consortiums, local alliances or other collaborative arrangements need to consider how HSQF requirements will be met.

### Further information

For information about how the framework applies to your organisation please contact your departmental contract officer.

Further enquiries about all aspects of HSQF, including information about tools and resources to support your organisation to meet the requirements of the standards, can be directed to the HSQF team.

Telephone: 1800 034 022

Email: [hsqf@communities.qld.gov.au](mailto:hsqf@communities.qld.gov.au)

Website: [www.communities.qld.gov.au/hsqf](http://www.communities.qld.gov.au/industry-partners/funding-grants/human-services-quality-framework)

# Part 2 – Human Services Quality Standards

The Human Services Quality Standards set a benchmark for the quality of service provision. Each Standard is supported by a set of performance indicators which outline what an organisation is required to demonstrate to meet that standard.

| **Standard** | | **Indicator** | |
| --- | --- | --- | --- |
| **1** | **Governance and Management**  Sound governance and management systems that maximise outcomes for stakeholders | 1.1 | The organisation has accountable and transparent governance arrangements that ensure compliance with relevant legislation, regulations and contractual arrangements. |
| 1.2 | The organisation ensures that members of the governing body possess and maintain the knowledge, skills and experience required to fulfil their roles. |
| 1.3 | The organisation develops and implements a vision, purpose statement, values, objectives and strategies for service delivery that reflect contemporary practice. |
| 1.4 | The organisation’s management systems are clearly defined, documented and monitored and (where appropriate) communicated including finance, assets and risk. |
| 1.5 | Mechanisms for continuous improvement are demonstrated in organisational management and service delivery processes. |
| 1.6 | The organisation encourages and promotes processes for participation by people using services and other relevant stakeholders in governance and management processes. |
| 1.7 | The organisation has effective information management systems that maintain appropriate controls of privacy and confidentiality for stakeholders. |
| **2** | **Service Access**  Sound eligibility, entry and exit processes facilitate access to services on the basis of relative need and available resources | 2.1 | Where the organisation has responsibility for eligibility, entry and exit processes, these are consistently applied based on relative need, available resources and the purpose of the service. |
| 2.2 | The organisation has processes to communicate, interact effectively and respond to the individual’s decision to access and/or exit services. |
| 2.3 | Where an organisation is unable to provide services to a person due to ineligibility or lack of capacity, there are processes in place to refer the person to an appropriate alternative service. |
| **3** | **Responding to Individual Need**  The assessed needs of the individual are being appropriately addressed and responded to within resource capacity | 3.1 | The organisation uses flexible and inclusive methods to identify the individual strengths, goals and aspirations of people using services. |
| 3.2 | The organisation formulates service delivery that respects and values the individual (e.g. identity, gender, sexuality, culture, age and religious beliefs). |
| 3.3 | The organisation ensures that services to the individual/s are delivered, monitored, reviewed and reassessed in a timely manner. |
| 3.4 | The organisation has partnerships and collaborates to enable it to effectively work with community support networks, other organisations and government agencies as relevant and appropriate. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Standard** | | **Indicator** | |
|  |  | 3.5 | The organisation has a range of strategies to ensure communication and decision-making by the individual is respected and reflected in goals set by the person using services and in plans to achieve service delivery outcomes. |
| **4** | **Safety, Wellbeing and Rights**  The safety, wellbeing and human and legal rights of people using services are protected and promoted | 4.1 | The organisation provides services in a manner that upholds people’s human and legal rights. |
| 4.2 | The organisation proactively prevents, identifies and responds to risks to the safety and wellbeing of people using services. |
| 4.3 | The organisation has processes for reporting and responding to potential or actual harm, abuse and/or neglect that may occur for people using services. |
| 4.4 | People using services are enabled to access appropriate supports and advocacy. |
| 4.5 | The organisation has processes that demonstrate the right of the individual to participate and make choices about the services received. |
| **5** | **Feedback, Complaints and Appeals**  Effective feedback, complaints and appeals processes that lead to improvements in service delivery | 5.1 | The organisation has fair, accessible and accountable feedback, complaints and appeals processes. |
| 5.2 | The organisation effectively communicates feedback, complaints and appeals processes to people using services and other relevant stakeholders. |
| 5.3 | People using services and other relevant stakeholders are informed of and enabled to access any external avenues or appropriate supports for feedback, complaints or appeals and assisted to understand how they access them. |
| 5.4 | The organisation demonstrates that feedback, complaints and appeals processes lead to improvements within the service and that outcomes are communicated to relevant stakeholders. |
| **6** | **Human Resources**  Effective human resource management systems, including recruitment, induction and supervisory processes, result in quality service provision. | 6.1 | The organisation has human resource management systems that are consistent with regulatory requirements, industrial relations legislation, work health and safety legislation and relevant agreements or awards. |
| 6.2 | The organisation has transparent and accountable recruitment and selection processes that ensure people working in the organisation possess the knowledge, skills and experience required to fulfil their roles. |
| 6.3 | The organisation provides people working in the organisation with induction, training and development opportunities relevant to their roles. |
| 6.4 | The organisation provides ongoing support, supervision, feedback and fair disciplinary processes for people working in the organisation. |
| 6.5 | The organisation ensures that people working in the organisation have access to fair and effective systems for dealing with grievances and disputes. |

# Part 3 – Quality pathways for in-scope services

The tables in Part 3 show the HSQF quality pathways or demonstration methods for all services   
in-scope of HSQF, categorised by service streams. Quality pathways are shown as one of the following:

* Certification
* Self-assessment
* Evidence of accreditation under another approved quality system
* Not required to demonstrate compliance.

Notes and exceptions related to each service stream are listed in the tables.

| **Service stream** | **How services are categorised** | **Includes** |
| --- | --- | --- |
| **Department of Child Safety, Youth and Women** | | |
| **Child and Family Services** | Funding Area/  Investment Specification  Service Type  Service User | Services funded through a service agreement with the Department of Child Safety, Youth and Women under the Child Protection Placement Services, Child Protection Support Services, Families, Individuals, Community and Service System Support and Development Investment Specifications.  Child protection placement services in-scope of licensing funded through Child Related Costs Placement and Support (CRC PAS).  Organisations contracted to deliver services under a Social Benefit Bond for the Department of Child Safety, Youth and Women. |
| **Women, Violence Prevention and Youth Services** | Funding Area/  Investment Specification  Service Type  Service User | Services funded through a service agreement with the Department of Child Safety, Youth and Women under the Domestic and Family Violence Support Services, Sexual Violence and Women’s Support Services, Individuals and Young People, Community and Service System Support and Development Investment Specifications. |
| **Department of Communities, Disability Services and Seniors** | | |
| **Community Services and Seniors** | Funding Area/  Investment Specification  Service Type  Service User | Services funded through a service agreement with the Department of Communities, Disability Services under the Community, Individuals, Older People and Service System Support and Development Investment Specifications.  Queensland Community Support Scheme (QCSS)- Supports funded through a service agreement with the Department of Communities, Disability Services and Seniors. |
| **Disability Services** | Output Category  Output Code | Services funded through a service agreement with the Department of Communities, Disability Services and Seniors to deliver Disability Services.  Disability Services delivered directly by DCDSS. |
| **Queensland Health[[3]](#footnote-3)** | | |
| **Health Services** | Program Area  Service Type | Services funded through a service agreement with Queensland Health specifying HSQF as an option to meet Queensland Health quality requirements |

The service types and service users referenced in the tables in Part 3 for organisations funded by DCDSS and DCSYW are included in the following investment specification versions:

* Child Protection (Support Services) – Version 3.3, effective April 2020.
* Child Protection (Placement Services) – Version 2.2, effective April 2019.
* Families – Version 7, effective May 2019.
* Domestic and Family Violence – Version 3.0, effective 1 April 2018.
* DCSYW - Individuals – Version 4.4, effective 13 December 2018.
* Young People – Version 4.0, effective October 2019.
* Community – Version 3.0, effective 1 December 2016.
* Service System Support and Development – Version 3.0, effective 1 July 2016.
* Sexual Violence and Women's Support Services – Version 1.0, effective 1 October 2019.
* DCDSS – Individuals – Version 4.3, effective 21 September 2018
* Older People – Version 5.0, effective 8 January 2019.

Note that investment specifications are subject to change - additions or changes to service types, service users and requirements may occur from time to time. Updated versions are published on the departments’ websites at:

[www.communities.qld.gov.au/industry-partners/funding-grants/investment-specifications](http://www.communities.qld.gov.au/industry-partners/funding-grants/investment-specifications)

[www.csyw.qld.gov.au/about-us/funding-grants/investment-specifications](http://www.csyw.qld.gov.au/about-us/funding-grants/investment-specifications).

Investment Specifications are not used for Disability or Queensland Community Support Scheme services.

## Department of Child Safety, Youth and Women

| Child and Family Services | | | |
| --- | --- | --- | --- |
| **Funding Area** | **Service Users** | **Service Types** | **HSQF Quality PathwayA,B,C** |
| **Child Protection (Placement Services) Investment Specification** | **Family Based Care** | | |
| Children and young people aged under 18 years requiring family based care, who have been assessed as having a complex or extreme level of support needs (U2260) | Placement Services - Intensive Foster Care (T205) | Certification |
| Children and young people aged under 18 years requiring family based care, who have been assessed as having a complex or extreme level of support needs (U2260) | Placement Services – Intensive Foster Care (T205) with Direct Care1 | Certification |
| Children and young people aged under 18 years requiring family based care, who have been assessed as having a moderate or high level of support needs (U2270) | Placement Services - Foster and Kinship Care (T204) | Certification |
| Children and young people aged under 18 years requiring family based care, who have been assessed as having a moderate or high level of support needs (U2270) | Placement Services – Foster and Kinship Care (T204) with Direct Care2 | Certification |
| **Non Family-Based Care** | | |
| Children and young people aged under 18 years requiring non-family based care in Aboriginal and Torres Strait Islander communities, who have been assessed as having a moderate or high level of support needs (U2273) | Placement Services - Safe Houses (T207) | Certification |
| Young people aged 15 to under 18 years requiring non- family based care, who have been assessed as having a moderate, high or complex level of support needs and are in the process of transitioning to independent living (U2289) | Placement Services - Supported Independent Living (T208) | Certification |
| Young people, aged 12 to under 16 years requiring intensive non-family based care in a therapeutic living environment, who have been assessed as having a complex or extreme level of support needs (U2296) | Placement Services - Therapeutic Residential Care (T209) | Certification |
| Young people, aged 12 to under 18 years requiring non-family based care, who have been assessed as having moderate, high, complex or extreme levels of support needs (U2307) | Placement Services - Residential Care (T206) | Certification |
| **Child Protection (Support Services) Investment Specification** | Children and young people under 18 years who are subject to statutory intervention and require counselling or other support as a result of abuse (physical, emotional or sexual) or neglect (U2310) | Support - Counselling and Intervention (T319) | Certification |
| Support - Evolve Therapeutic Services (T323) | Not required to demonstrate compliance |
| Support - Educational Support (T330) | Self-assessment |
| Support - Sexual Abuse Counselling (T335) | Certification |
| Young people transitioning from statutory care - 15-21 year olds (U2325) | Support – Transition to Adulthood (T329) | Certification |
| Families and carers of children and young people in care (U2319) | Support - Counselling and Intervention Support (T319) | Certification |
| Support - Sexual Abuse  Counselling (T335) | Certification |
| Young people transitioning from statutory care – 15-25 year olds (U2326) | Support – Transition to Adulthood (T329) | Certification |
| **Families Investment Specification** | At risk families (U3050) | Support – Intensive Family Support (T327) | Certification |
| Support – Family and Child Connect (T347) | Certification |
| Support – Assessment and Service Connect (T448) | Certification |
| Support – Clinical Nursing Services, Child and Family (T337) | Certification |
| Aboriginal and Torres Strait Islander families in three discrete Indigenous communities experiencing or witnessing domestic violence (U3113) | Support – Safe Haven (T331) | Certification |
| Statutory Service Users (U3310) | Support – Tertiary Family Support (T339) | Certification |
| Vulnerable families with children (U3330) | Support – Secondary Family Support (T334) | Certification |
| Support – Targeted Family Support (T336) | Certification3 |
| Vulnerable and/or at risk Aboriginal or Torres Strait Islander families (U3333) | Support – Aboriginal and Torres Strait Islander Family Wellbeing (T313) | Certification |
| Referrers and enquirers (U3340) | Support – Family and Child Connect (T347) | Certification |
| Aboriginal and Torres Strait Islander families subject to a notification or involved in the child protection system (U1214) | Support – Family Participation Program (T601) | Certification |
| **Individuals Investment Specification** | Adults impacted by adoption (U1170) | Access - Information, advice and referral (T103) | Certification |
| Support – Counselling (T318) | Certification |
| System Support – Capability Building (T440)  *Refer Service System Support & Development Investment Specification* | Certification |
| Children and young people impacted by adoption (U1171) | Access - Information, advice and referral (T103) | Certification |
| Support – Counselling (T318) | Certification |
| System Support – Capability Building (T440)  *Refer Service System Support & Development Investment Specification* | Certification |
| Aboriginal and Torres Strait Islander men who are affected by alcohol and/or who perpetrate domestic and family violence (U1253) | Support - Case management (T314) | Certification |
| Adults who identify either as Forgotten Australians or former child migrants (U1160) | Access – Community Support (T101) *Refer Community Investment Specification (T101)* | Certification |
| Access - Information, advice and referral (T103) | Certification |
| Support - Case management (T314) | Certification |
| Health Practitioners participating in Redress Counselling (U1051) | Redress Counselling Practitioner registration and billing (T104) | Certification |
| **Community Investment Specification** | People who live in a defined geographic area (U4180)  People who identify with and/or share a similar interest or issue with others (U4190) | Access - Information, advice and referral (T103) | Certification4 |
| Access – Events (T102) | Not required to demonstrate compliance |
| **Service System Support and Development Investment Specification** | Service Providers including NGOs and local councils – Industry (U5230)  Indigenous service providers - Industry (U5233)  Workforce including paid workers, volunteers and foster carers – Industry (U5235)  Services Users, families and carers – Industry (U6010) | System Support – Capability building (T440) | Evidence of accreditation under ISO 90015 |
| System Support – Research and advice (T443) | Evidence of accreditation under ISO 90015 |
| System Support – Dissemination of information (T441) | Evidence of accreditation under ISO 90015 |
| System Support - Systemic and group advocacy and representation to government and other decision makers (T446) | Evidence of accreditation under ISO 90015 |

| **Notes and Exceptions – Child and Family Services** |
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| 1. This indicates the HSQF Quality Pathway subject to the funding thresholds outlined in Part 4 and/or other applicable exceptions detailed below. Where certification is indicated but an organisation’s funding only meets the threshold for self-assessment, performance will be demonstrated through a self-assessment only – **except for Child Protection Placement Services that are in-scope of Child Safety Licensing, which are required to achieve certification regardless of funding levels.** 2. **Multi-service providers:** Where organisations deliver multiple in-scope services listed in Part 3:  * Certification usually takes precedence, so if one or more services delivered requires certification, this is the method that must be used by the organisation. * As organisations generally only demonstrate compliance using one pathway, those delivering services that are required to be certified do not need to complete a separate self-assessment for services listed as self-assessable Part 3 and self-assessable services do not need to be included in third-party audits. * Organisations that deliver more than one self-assessable service, only need to complete a combined self-assessment that includes all of their self-assessable services funded across DCDSS and DCSYW.  1. **Queensland Government agencies:** As a general rule, Queensland Government agencies delivering Child and Family Services are not required to demonstrate compliance with the HSQF. These providers will remain subject to regulation by their own specific sets of quality standards and safeguards. 2. T205 with Direct Care and T205 without Direct Care are nor separated in the Child Protection Placement Service Investment Specification, however must be separately addressed in audits. 3. T204 with Direct Care and T204 without Direct Care are nor separated in the Child Protection Placement Service Investment Specification, however must be separately addressed in audits. 4. Certification applies except for **Health Visiting Program** services, which are not required to demonstrate compliance with HSQF. 5. Certification applies to Information, advice and referral (T103) except where it is determined by HSQF that the services being delivered are low risk and in this case, self-assessment will apply. 6. ISO 9001 accreditation applies, or where agreed accreditation under another quality system, except for certain **representative networks** where notified by the department, which are required to achieve certification. |

| Women, Violence Prevention and Youth Services | | | |
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| **Funding Area** | **Service Users** | **Service Types** | **HSQF Quality PathwayA,B,C** |
| **Domestic and Family Violence Support Services Investment Specification** | Adults experiencing (or at risk of experiencing) or using domestic and family violence (All adults) (U1110) | Support – Court Based Services (T321) | Certification |
| Support – Telephone Services (T338) | Certification |
| Adults experiencing (or at risk of experiencing) or using domestic and family violence (Female) (U1111) | Support – Domestic Violence Counselling (T320) | Certification |
| Adults experiencing (or at risk of experiencing) or using domestic and family violence (Male) (U1190) | Support – Perpetrator Intervention Programs (T328) | Certification |
| Aboriginal and Torres Strait Islander people experiencing (or at risk of experiencing) or using domestic and family violence (U1113) | Support – Aboriginal and Torres Strait Islander Services (T310) | Certification |
| Children and Young People experiencing (or at risk of experiencing) domestic and family violence (U2110) | Support – Children’s Domestic Violence Counselling (T315) | Certification |
| Government and non-government service providers (U5080) | System Support – Local Domestic and Family Violence Service Systems (T437) | Certification |
| System Support – Research (T442) | Not required to demonstrate compliance |
| Women and children experiencing domestic and family violence (SU3520)  Aboriginal and/or Torres Strait Islander Women and children experiencing domestic and family violence (SU3530) | Support - Temporary Supported Accommodation - Immediate (ST6) | Certification |
| Support - Mobile Support (ST5) | Certification |
| Support - Centre Based Support (ST4) | Certification |
| People who live in a defined geographic area (U4180) | Access – Events (T102) | Not required to demonstrate compliance |
| **Sexual Violence and Women’s Support Services Investment Specification** | Adults and young people who have been affected by sexual violence (U1199) | Support – Sexual Violence Counselling (T701) | Certification |
| Women who require assistance to achieve better health and wellbeing (U1198) | Support – Women’s Health and Wellbeing Counselling (T702) | Certification |
| Individuals, government and non-government service providers who would benefit from greater awareness of gender-based violence, health and wellbeing issues (U1197) | System Support – Prevention, Capacity Building and Awareness Raising (T703) | Certification |
| **Individuals Investment Specification** | Adults affected by sexual violence (U1040) | Access – Community Support - Refer Community Investment specification (T101) | Certification |
| Access - Information, advice and referral (T103) | Certification |
| Support - Case management (T314) | Certification |
| Support – Counselling (T318) | Certification |
| Adults experiencing personal, family, relationship and/or financial issues (U1150) | Access – Community Support - *Refer Community Investment specification* (T101) | Certification |
| Access - Information, advice and referral (T103) | Certification |
| Support - Case management (T314) | Certification |
| Support – Counselling (T318) | Certification |
| Young people aged 12 – 18 years who are at risk of disconnection (U2107) | Information Advice and Referral (T103) | Certification |
| **Community Investment Specification** | People who live in a defined geographic area (U4180)  People who identify with and/or share a similar interest or issue with others. (U4190) | Access - Information, advice and referral (T103) | Certification1,2 |
| Access – Events (T102) | Not required to demonstrate compliance3 |
| **Young People Investment Specification** | Young people aged 8–21 years who are at risk of disconnection (U2107) | Access – Information, advice and referral (T103) | Certification |
| Support – Support and case management (T314) | Certification |
| Support – Community support (T317) | Certification |
| Young people aged 12–21 years who are at risk of homelessness, or who are homeless (U2347) | Support – Support and Case management (T314) | Certification |
| Young people aged 12–25 years who will benefit from participation, leadership and development opportunities (U2078) | Support – Community support (T317) | Not required to demonstrate compliance |
| Young people aged 15–25 years who will benefit from opportunities to increase community representation or engagement (U2065) | Support – Community support (T317) | Self-assessment |
| Young people transitioning from statutory care – aged 15–21 years (U2325) | Support – Transition to Independence (T329)  *Refer to Child Protection (Support Services) Investment Specification* | Certification |
| Service Providers including NGOs and local councils – Industry (U5230) | System Support – Capability building (T440)  *Refer to the Service System Support and Development Investment Specification* | Certification |
| **Service System Support and Development Investment Specification** | Service Providers including NGOs and local councils – Industry (U5230)  Indigenous service providers - Industry (U5233)  Workforce including paid workers, volunteers and foster carers – Industry (U5235)  Services Users, families and carers – Industry (U6010) | System Support – Capability building (T440) | Evidence of accreditation under ISO 90014 |
| System Support – Research and advice (T443) | Evidence of accreditation under ISO 90014 |
| System Support – Dissemination of information (T441) | Evidence of accreditation under ISO 90014 |
| System Support - Systemic and group advocacy and representation to government and other decision makers (T446) | Evidence of accreditation under ISO 90014 |

| **Notes and Exceptions – Women, Violence Prevention and Youth Services** |
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| 1. This indicates the HSQF Quality Pathway subject to the funding thresholds outlined in Part 4 and/or other applicable exceptions detailed below. Where certification is indicated but an organisation’s funding only meets the threshold for self-assessment, performance will be demonstrated through a self-assessment only – **except for Women’s shelters (Temporary Supported Accommodation – Immediate (ST6)) and Domestic and Family Violence Men’s Perpetrator Invention Programs (T328), which are required to achieve certification regardless of funding levels.** 2. **Multi-service providers:** Where organisations deliver multiple in-scope services listed in Part 3:  * Certification usually takes precedence, so if one or more services delivered requires certification, this is the method that must be used by the organisation. * As organisations generally only demonstrate compliance using one pathway, those delivering services that are required to be certified do not need to complete a separate self-assessment for services listed as self-assessable Part 3 and self-assessable services do not need to be included third-party audits. * Organisations that deliver more than one self-assessable service, only need to complete a combined self-assessment that includes all of their self-assessable services funded across DCDSS and DCSYW.  1. **Queensland Government agencies**: As a general rule, Queensland Government agencies delivering Women, Violence Prevention and Youth Services are not required to demonstrate compliance with the HSQF. These providers will remain subject to regulation by their own specific sets of quality standards and safeguards. 2. Certification applies to Information, advice and referral (T103) services except where it is determined by HSQF that the services being delivered are low risk and in this case, self-assessment will apply. 3. **Safer Schoolies** services funded for this service type are only required to complete a self-assessment. 4. No demonstration of compliance is required for Access - Events (T102) services except where delivered by organisations funded to deliver **Safer Schoolies** responses, when the services will be self-assessable.   4. ISO 9001 accreditation applies, or where agreed, accreditation under another quality system. |

## Department of Communities, Disability Services and Seniors

| Community Services and Seniors | | | |
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| **Funding Area** | **Service Users** | **Service Types** | **HSQF Quality PathwayA,B,C** |
| **Individuals Investment Specification** | Adults affected by alcohol (U1020) | Support – Assertive Outreach (T316) | Certification |
| Support - Rest and Recovery (T322) | Certification |
| Adults affected by alcohol (Aboriginal and Torres Strait Islander people) (U1023) | Access – Community Support (T101)  *Refer Community Investment Specification (T101)* | Certification |
| Support - Assertive Outreach (T316) | Certification |
| Support - Rest and Recovery (T322) | Certification |
| Support - Case management (T314) | Certification |
| Adults affected by problem gambling (U1030) | Access – Community Support (T101)  *Refer Community Investment specification (T101)* | Certification |
| Access - Information, advice and referral (T103) | Certification |
| Support - Case management (T314) | Certification |
| Support – Counselling (T318) | Certification |
| Adults experiencing personal, family, relationship and/or financial issues (U1150) | Access – Community Support - *Refer Community Investment specification* (T101) | Certification |
| Access - Information, advice and referral (T103) | Certification |
| Support - Case management (T314) | Certification |
| Support – Counselling (T318) | Certification |
| Support - Financial and material assistance (T333) | Not required to demonstrate compliance1 |
| Support – Financial Counselling and Advocacy/Financial Resilience (T447) | Certification |
| School student (U2600)2 | Support – Financial and material assistance (T333) | Not required to demonstrate compliance |
| **Older People Investment Specification** | Older People – experiencing (or at risk of experiencing barriers accessing the service system (U1094) | Support Service – Community Support (T317) | Certification |
| Support– Information, advice and referral (T325) | Certification |
| Older People - experiencing (or at risk of experiencing) elder abuse (U1124) | Support – Case Management (T314) | Certification3 |
| Support – Community Support (T317) | Certification3 |
| Support – Information, advice and referral (T325) | Certification3 |
| Older People - experiencing (or at risk of experiencing) social isolation (U1144) | Support – Information, advice and referral (T325) | Certification |
| Support Service – Community Support (T317) | Certification |
| Support – Case Management (T314) | Certification |
| Older People and interested stakeholders – Seniors Week (U4190) –  *Refer to Community Investment Specification (U4190)* | Access – Events (T102) | Not required to demonstrate compliance |
| Seniors Peak Service – Refer to Service System Support and Development Investment Specification – Service Providers- Part Industry (U5230) | System Support – Capability Building (T440) | Evidence of accreditation under ISO 9001 |
| System Support – Research and Advice (T443) | Evidence of accreditation under ISO 9001 |
| System Support – Dissemination of information (T441) | Evidence of accreditation under ISO 9001 |
| System Support – System and group advocacy (T446) | Evidence of accreditation under ISO 9001 |
| **Community Investment Specification** | People who live in a defined geographic area (U4180)  People who identify with and/or share a similar interest or issue with others. (U4190) | Access - Information, advice and referral (T103) | Certification4 |
| Access - Community support (T101) | Self-assessment |
| Access – Events (T102) | Not required to demonstrate compliance |
| **Service System Support and Development Investment Specification** | Service Providers including NGOs and local councils – Industry (U5230)4  Indigenous service providers - Industry (U5233)  Workforce including paid workers, volunteers and foster carers – Industry (U5235)3  Services Users, families and carers – Industry (U6010) | System Support – Capability building (T440) | Evidence of accreditation under ISO 90015,6 |
| System Support – Research and advice (T443) | Evidence of accreditation under ISO 90017 |
| System Support – Dissemination of information (T441) | Evidence of accreditation under ISO 90017 |
| System Support - Systemic and group advocacy and representation to government and other decision makers (T446) | Evidence of accreditation under ISO 90017 |
| **Social Cohesion8** | Young people (12-25 years)  Queenslanders of all ages, backgrounds and abilities  Service providers – Local Government Authorities, Not-for-profits, Social Enterprises, ATSI community controlled organisations. | Youth engagement  Community engagement  Global citizenship education  Social cohesion planning  Economic inclusion  Community Support (T101) | Not required to demonstrate compliance |
| **Queensland Community Support Scheme (QCSS)8** | People who have a disability (who are not eligible for NDIS) or who have a chronic illness, mental health or other condition that are:   * under 65, or an Aboriginal and Torres Strait Islander people under 50; * who are at risk of losing their independence in their home and live in the community (U7010)   Aboriginal and Torres Strait Islander Peoples, who are eligible for QCSS supports (U7020)  People from Cultural and Language Diverse backgrounds, who are eligible for QCSS supports (U7030)  People who are homeless or at risk of homelessness, who are eligible for QCSS supports (U7040) | In-Home Supports (T502)  Community Connection Supports (T503) | Certification |
| Referrers and enquirers (U3340) | Information Assessment and Referral (T501) | Certification |
| **Community Transport8** | People who live in defined geographical area (U4180) | Other | Not required to demonstrate compliance9 |
| **Meals on Wheels8** | People who live in defined geographical area (U4180) | Community Support (T101) | Not required to demonstrate compliance |

| **Notes and Exceptions – Community Services and Seniors** |
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| 1. This indicates the HSQF Quality Pathway subject to the funding thresholds outlined in Part 4 and/or other applicable exceptions detailed below. Where certification is indicated but an organisation’s funding only meets the threshold for self-assessment, performance will be demonstrated through a self-assessment only. 2. **Multi-service providers:** Where organisations deliver multiple in-scope services listed in Part 3:  * Certification usually takes precedence, so if one or more services delivered requires certification, this is the method that must be used by the organisation. * As organisations generally only demonstrate compliance using one pathway, those delivering services that are required to be certified do not need to complete a separate self-assessment for services listed as self-assessable Part 3 and self-assessable services do not need to be included third-party audits. * Organisations that deliver more than one self-assessable service, only need to complete a combined self-assessment that includes all of their self-assessable services funded across DCDSS and DCSYW.  1. **Queensland Government agencies**: As a general rule, Queensland Government agencies delivering Community and Seniors Services are not required to demonstrate compliance with the HSQF. These providers will remain subject to regulation by their own specific sets of quality standards and safeguards. 2. No demonstration of compliance required for emergency relief services except where delivered by a **Financial Counselling and Advocacy Service** (T447), when they will be in-scope for certification. 3. Update to Individuals Investment Specification reflecting this new service type may not be available at the time of publication. 4. Certification applies except for **Seniors Legal and Support Services**, which are approved to demonstrate compliance with HSQF using accreditation under the National Accreditation Scheme for Community Legal Centres. 5. Certification applies to Information, advice and referral (T103) services except where it is determined by HSQF that the services being delivered are low risk and in this case, self-assessment will apply. 6. Accreditation under ISO 9001 applies, or where agreed accreditation under another quality system, except for certain **volunteer/training services**, where notified by the department, which are required to achieve and maintain registration under the Australian Quality Training Framework. 7. Accreditation under ISO 9001 applies, or where agreed accreditation under another quality system, except for **multi-tenant service centres**, where notified by the department, which are not required to demonstrate compliance. 8. ISO 9001 accreditation applies, or where agreed, accreditation under another quality system. 9. **Social Cohesion, Queensland Community Support Scheme (QCSS), Community Transport and Meals on Wheels services** were not funded under an investment specification document at the Quality Framework V7.0 publication date, however this may change in the future. 10. Organisations funded to deliver **Community Transport services** providing time limited transport support are not required to demonstrate compliance as funding is less than 18 months duration. |

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| Disability Services | | |
| **Output Category** | **Output code (DS NMDS code)** | **HSQF Quality PathwayA,B** |
| **Accommodation Support** | All output codes from 1.01 – 1.083 inclusive | Certification1 |
| **Community Support** | All output codes from 2.01 – 2.073 inclusive | Certification1 |
| **Community Access** | All output codes from 3.01 – 3.033 inclusive | Certification1 |
| **Respite** | All output codes from 4.01 – 4.052 inclusive | Certification1 |
| **Advocacy** | 6.01 – 6.013 inclusive | Evidence of accreditation under the National Disability Advocacy Program (NDAP)or, subject to approval, evidence of accreditation under the NDIS Practice Standards or ISO 9001. Where other accreditation not held or approved, certification applies. |
| **Information/referral and alternative forms of communication2** | All output codes from 6.02 – 6.05 inclusive | Certificationor evidence of accreditation under the NDIS Practice Standards or, subject to approval, ISO 9001. |
| **Other Support2** | All output codes from 7.01 – 7.04 inclusive | Evidence of accreditation under ISO 9001, or subject to approval, other relevant accreditation. |
| **Notes and Exceptions – Disability Services** | | |
| 1. This indicates the HSQF Quality Pathway subject to the funding thresholds outlined in Part 4 and/or other applicable exceptions detailed below. Where certification is indicated but an organisation’s funding only meets the threshold for self-assessment, performance will be demonstrated through a self-assessment only – **except for disability services approved to use restrictive practices.**   In addition to existing quality requirements outlined above, organisations approved to use restrictive practices with Continuity of Support (CoS) service users are required, at a minimum, to complete and submit a HSQF self-assessment against HSQF quality indicators relating to restrictive practices. The self-assessment must be submitted to the departmental contract officer within three months of the restrictive practice approval. The department will assess the context and risks associated with each restrictive practice approval and may require CoS service providers to meet additional safeguarding measures to those outlined above.   1. **Multi-service providers:** Where organisations deliver multiple in-scope services listed in Part 3:  * Certification usually takes precedence, so if one or more services delivered requires certification, this is the method that must be used by the organisation. * As organisations generally only demonstrate compliance using one pathway, those delivering services that are required to be certified do not need to complete a separate self-assessment for services listed as self-assessable Part 3 and self-assessable services do not need to be included third-party audits. * Organisations that deliver more than one self-assessable service, only need to complete a combined self-assessment that includes all of their self-assessable services funded across DCDSS and DCSYW.  1. For **Continuity of Support (CoS) services**, certification applies until the organisation achieves NDIS Practice Standards Accreditation. 2. Includes funding for **Peak Bodies**. | | |

| Queensland Health |
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| Health Services | | | |
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| **Program Area** | **Service Types** | **Description** | **HSQF Quality Pathway** |
| **Mental Health** | Mental Health – Individual Support and Rehabilitation | Non-clinical psychosocial wraparound support services tailored to the individual in their focus of care and intensity of support. They include a range of one-on-one activities provided by appropriately qualified workers directly to the individual in their homes or local community setting. Activities may include improving daily living skills, relapse prevention, social inclusion, build capacity for self-advocacy, stress management, skill development etc. | Certification |
| Mental Health – Group Support and Rehabilitation | Non-clinical psychosocial support services tailored to provide the individual with activities aimed to improve their quality of life and psychosocial functioning, through the provision of group-based social, recreational or prevocational activities. The services can be hosted in many community settings and would generally be of short duration (e.g. group program of two (2) hours). The activities delivered may or may not be structured (e.g. two-hour session for six (6) weeks) and might be time-limited or ongoing depending on the identified recovery needs of the individual | Certification |
| Mental Health – Individual Peer Work | Non-clinical psychosocial support services that are led and self-managed by peer workers that aim to empower and support the individual by sharing life experiences with people who have similar experiences and help to develop support networks for crisis situations. Includes individual self-help activities and can be face to face, telephone based, in-home and involve structured activities tailored to individual needs. | Certification |
| Mental Health – Group Based Peer Work | Non-clinical psychosocial support services that are led and self-managed by peer workers which aim to empower and support the individual, by working through group processes and sharing life experiences with people who have similar experiences, and to help develop support networks for crisis situations. The services can be hosted in many community settings and would generally be of short duration (e.g. group program of two (2) hours). The activities delivered may or may not be structured (e.g. two-hour session for six (6) weeks) and might be time-limited or ongoing depending on the identified recovery needs of the individual. | Certification |
| Mental Health –Individual Carer Support | Support services provided to a family/friend/support person or carer (in contrast to personalised support for the person experiencing a mental illness). Activities are designed to support the individual to fulfil their caring role, while maintaining their own health and wellbeing. Activities may include improving individual’s mental health literacy to facilitate detection, early intervention and support, crisis management, enhancing relationships etc. The support services may or may not be provided by a peer worker. | Certification |
| Mental Health – Group Carer Support | Support services provided to a family/friend/support person or carer (in contrast to personalised support for the person experiencing a mental illness) in a group basis. Activities may include practical skills for maintaining home and living well, enhancing relationships and social participation, health management and supporting access to education and employment opportunities. The support services may or may not be provided by a peer worker. | Certification |
| Mental Health – Other Residential Services | Services established in community settings in a domestic style environment that provide non- clinical psychosocial support to the individual residing on an overnight basis. Staff are on-site for a minimum of 6 hours a day and at least 50 hours per week. Accommodation may be provided on a short, medium or long-term basis. | Certification |
| Mental Health – Individual Advocacy | Services that represent the rights and interests of people with mental illness, on a one-to-one basis by addressing issues of discrimination, abuse and neglect. | Not required to demonstrate |
| Suicide Prevention – Individual Support and Rehabilitation | Lived experience peer support services that enhance therapeutic care options for people following their presentation to Queensland Health emergency departments and acute settings with a suicidal crisis. | Certification |
| **Child and Family** | Therapy Services – Individual | Services that provide clinical intervention, prevention and health promotion services and support to guide and assist individuals, who suffer, or are at risk of suffering, emotional, social, behavioural or developmental difficulties, to address a range of psycho-social, health and personal issues relevant to their needs. Services may include identification of personal goals, strategies and skills to enhance consumer’s health, wellbeing, personal capacity, independent functioning within the community and counselling services. | Certification |
| Therapy Services - Group | Services that provide group-based clinical intervention, prevention and health promotion services and support where consumers, who suffer, or are at risk of suffering, emotional, social, behavioural or developmental difficulties, can meet in a safe, supportive environment to address a range of identified social, health and other personal issues relevant to their needs. Services may include a range of planned social, educative and/or interactive activities that support consumers to increase their resilience and develop skills and strategies that improve their personal capacity to manage life events and support children’s development. | Certification |

# Part 4 – Funding Thresholds

Part 4 applies to DCDSS or DCSYW funded service delivery and outlines how the type and/or duration of funding and funding levels impact on quality pathways.

Part 4 does not apply to Queensland Health services. Funding from these sources is not included in the calculation of funding thresholds outlined below.

### Funding duration/type

Organisations are only required to demonstrate performance against the standards for ongoing services that are funded for a period of 18 months or more.

Organisations that receive one-off, short-term or pilot funding are not required to demonstrate compliance with the HSQF, although these services must still be delivered in accordance with the Human Services Quality Standards. For HSQF purposes, short-term funding is defined as service delivery funded for a period of less than 18 months.

### Funding thresholds

For DCDSS or DCSYW funded services, the level of funding provided may determine the quality pathway. Funding thresholds for DCDSS and DCSYW funded organisations operate as follows:

* For organisations delivering services with a quality pathway of certification specified in Part 3, the level of total annual defined-term/ongoing funding for those services (across both DCDSS and DCSYW), determines the final quality pathway for the services.
* The funding thresholds for 2020-21 are outlined below.

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| **Funding – DCDSS + DCSYW** | **Applicable quality pathway** |
| More than $263,000 pa | Certification |
| $100,000 up to $263,000 pa | Self-assessment |
| Less than $100,000 | Not required to demonstrate compliance |

* The thresholds apply to funding for services that would normally be in-scope for certification. Organisations with funding that meets the threshold for self-assessment, that receive additional funding for service types that are specified in Part 3 as self-assessable, will only be required to undertake self-assessment.

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| ***Example:*** An organisation that receives funding of $90,000 for Targeted Family Support Services (in-scope for certification but meets funding threshold for self-assessment) as well as funding of $220,000 for neighbourhood centre services (self-assessable), will only be required to undertake a self-assessment. |

* The funding thresholds above also apply to organisations demonstrating compliance with HSQF through their accreditation under another set of quality standards (with or without a gap self-assessment) as follows:
* Organisations that receive more than $263,000 per annum in total funding from DCDSS and DCSYW for service types for which other accreditation is accepted, are required to provide and keep evidence of their other accreditation (report and certificate) current with DCDSS and/or DCSYW.
* Organisations that receive $100,000 up to $263,000 per annum in total funding from DCDSS and DCSYW for service types for which other accreditation is accepted, may only be required to complete a HSQF self-assessment where they do not already hold the other accreditation.
* Organisations that receive less than $100,000 per annum in total funding from DCDSS and DCSYW for service types for which other accreditation is accepted, are not required to evidence their other accreditation to DCDSS and/or DCSYW.
* Funding thresholds are reviewed annually considering factors such as indexation and are published on the HSQF website.
* Changes in DCDSS or DCSYW funding levels or the types of services funded may change an organisation’s quality pathway. When changes occur, organisations should discuss HSQF implications with their contract officer.

### Funding threshold exceptions

1. Services that are required to be certified regardless of funding level and the funding thresholds outlined above include:

* Child protection placement services in-scope of licensing
* Disability services using restrictive practices as relevant[[4]](#footnote-4)
* Domestic and family violence perpetrator intervention programs, and
* Women’s shelters (Temporary Supported Accommodation – Immediate).

1. The funding thresholds may not apply when DCDSS and/or DCSYW services are assessed as higher or lower risk or are subject to specific regulatory requirements. This will be assessed on a case-by-case basis by the HSQF team in consultation with an organisation’s funding department.
2. The funding thresholds may not apply when a DCDSS/DCSYW funded organisation has services funded by another Queensland Government department that are required to achieve HSQF certification. For example, if Queensland Health requires an organisation’s Queensland Health funded services to achieve HSQF certification, the organisation may be required to include its DCDSS/DCSYW funded services into its HSQF certification, regardless of the funding level.

1. There are a small number of service agreements where the HSQF does not apply e.g. for products or assets. Other specified arrangements may include contracts where the organisation has been notified of the need implement and demonstrate compliance with HSQF. [↑](#footnote-ref-1)
2. In a small number of cases, organisations using accreditation under another approved quality system that only partially meets HSQF requirements may be required to complete an additional ‘gap’ self-assessment against the HSQF. [↑](#footnote-ref-2)
3. Queensland Health may, over time, determine that other service streams or service types will be in-scope of the HSQF. If additional services are added, Queensland Health will advise relevant organisations. [↑](#footnote-ref-3)
4. In line with Part 3 – *Notes and Exceptions – Disability Services* [↑](#footnote-ref-4)