**Legislative Compliance Strategy**

Disability Services

# Introduction

The Department of Families, Seniors, Disability Services and Child Safety (the department) works together with people with disability, their families and carers so they can thrive culturally, socially and economically. Disability Services strives to achieve high quality, safe and cost-efficient services for people with disability.

Disability Services administers the *Disability Services Act 2006,* the *Forensic Disability Act 2011* and the *Guide Hearing and Assistance Dogs Act 2009*.

Disability Services is also responsible for delivering outcomes through service agreements with providers across a range of disability programs and initiatives. It is able to rely on the provisions for the *Community Services Act 2007* to ensure compliance by funded service providers.

See Attachment A for an outline of the compliance provisions under each of these Acts.

The above legislation and the terms and conditions of the service agreements:

* provide an enabling and regulatory framework for funding and delivering disability services in a way that meet expectations of quality and safety
* promote and protect the rights and safety of people with a disability, increasing their wellbeing and encouraging their participation in the community
* ensure people with a disability who rely on guide, hearing or assistance dogs have the same access rights as others to public places and public passenger vehicles and to ensure the quality and accountability of guide, hearing and assistance dog training services, and
* oversee control systems to ensure compliance by departmentally funded organisations and sole traders relating to service agreements, in relation to funding and service quality.

Disability Services’ compliance actions and interventions operate as both proactive checks on legislative compliance, and an escalation point for serious or protracted non-compliance with legislation, and service agreements. This work sits within and supports the department’s broader assurance and enterprise risk-management efforts.

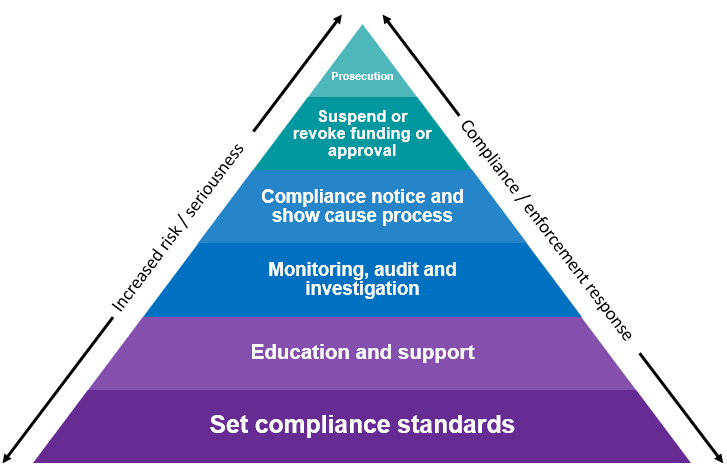
This Strategy is best considered one part of a multi-layered safeguarding, assurance and risk management approach to the provision of seniors and disability services. It fulfils the second tier of monitoring and intervention in the below compliance hierarchy.

* **Tier 1** – governance, management and controls internalto organisations. This level of monitoring includes the role of boards, councils, internal controls, risk management and performance and annual reporting.
* **Tier 2 -** externalmonitoring by regulators and funding bodies. This includes monitoring and assessing financial and non-financial performance of service providers under contracts, receipt and investigation of complaints and actioning any non-compliance concerns. For NDIS services, Tier 2 responsibilities are undertaken by both Disability Services and the NDIS Quality and Safeguards Commission. Collectively, the functions administered create a suite of comprehensive safeguards. This is achieved by the NDIS Quality and Safeguards Commission regulating providers.
* **Tier 3** - independent, external monitoring and investigation by statutory and other agencies, including the Queensland Audit Office, Queensland Ombudsman, Crime and Corruption Commission and Queensland Police Service.

## Disability Services Compliance Model

Disability Services has adopted a responsive model of compliance with a focus on education and engagement with stakeholders to promote compliance with the Acts and relevant service agreements, contracts and policies.

The model is represented in figure 1 (Compliance pyramid) which shows how Disability Services takes a responsive and proportionate approach to compliance, applying the strongest actions to the most serious issues and breaches. It also demonstrates the ability to escalate actions if an initial response does not achieve the intended outcome.



When non-compliance is identified, the response is proportionate to risk and determined on a case-by-case basis and considers factors such as:

* the impact of the non-compliance on people with disability
* the willingness and/or ability of the service provider or individual to comply (taking into consideration their level of knowledge around compliance)
* the likelihood of further non-compliance
* compliance history, and
* the level of reputational risk.

The compliance and enforcement actions available include [[1]](#footnote-1):

* administrative - such as education, financial reviews [[2]](#footnote-2), formal warning letters, compliance notices, suspension of or revoking funding, suspension or cancellation of approval of an approved trainer or training institution and show cause processes, and
* court-based - such as prosecution [[3]](#footnote-3).

If Disability Services takes enforcement action, factors such as the nature and severity of the harm caused, the compliance history and cooperation of the entity or subject officer and the deterrence value of the enforcement measure are all considered. When investigating potential compliance issues with a funded provider under a service agreement or contract, a cooperative approach should be considered, prior to invoking any powers under the *Community Services Act 2007 [[4]](#footnote-4).*

Disability Services will seek to educate and inform where genuine attempts at compliance are being made and investigate allegations of serious non-compliance or systemic or repetitive breaches. Where the Acts prescribe offences and penalties and voluntary compliance activities are not available, Disability Services is responsible for commencing proceedings that can be applied and enforced by a Court.

## The Compliance Approach

Monitoring

Disability Services will encourage compliance through informing, educating, investigating and enforcing compliance, while conducting continuous monitoring to identify compliance trends and whether measures of success have been met.

**Inform**

* Set compliance standards in line with the legislation and engage with service providers and individuals through various publications and channels of communication to inform them of their compliance obligations.
* Promote understanding of obligations under the legislation and the importance of complying, including by publishing Compliance Guidelines.

**Educate**

* Educate individuals and service providers on how to improve their levels of compliance through the provision of guidance and advice.
* Educate and empower seniors and people with disability with the knowledge they need to advocate for their rights.

**Investigate**

* Investigate individuals and service providers in a consistent and risk-based manner to ensure obligations are met.
* Conduct risk-based, proactive audits to identify breaches and where breaches are identified, apply the most appropriate intervention or enforcement response.
* Undertake complex financial and service quality assessments on funded organisations to recover debt or correct service quality concerns.

**Enforce**

* In instances of non-compliance, Disability Services will ensure each intervention or enforcement response is proportionate to the safety risk and compliance behaviour identified in each circumstance.
* Refer matters to external agencies such as the NDIS Quality and Safeguards Commission, Queensland Police Service and the Crime and Corruption Commission as appropriate.

**Monitor**

* Monitor compliance matters to drive better practice and processes, ensuring service providers are acting according to standards required by the department and to identify whether measures of success have been met.
* Regular assessment of performance and financial reporting under contracts as per the terms of the contracts to ensure performance is as planned.

## The compliance response

Where a complaint or other information is received, the Enquiries and Assistance Team will be responsible for assessing whether the complaint raises potential compliance issues or a breach of legislation.

If it appears that there are compliance issues or a breach of legislation, the complaint will then be referred to the appropriate unit, who will be responsible for determining the appropriate compliance response.

## Guiding Principles

**Consistent:** Disability Services will assess, investigate and enforce compliance consistently across comparable situations. This approach will reduce inconsistency related to enforcement activities and responses.

**Effective:** Disability Services will plan and conduct efficient and effective compliance, enforcement and investigative activities and by doing so seek to improve the overall governance of the sector.

**Proportionate:** Disability Services will undertake compliance and enforcement activities that are proportionate to the risks and compliance history and behaviour of the individual or service provider.

**Fair and Transparent:** Disability Services will conduct compliance and enforcement activity in a consistent and transparent manner, based on the principles of procedural fairness and accountability.

## Types of response

The proportionate response to non-compliance is used to discourage non-compliance or where co-operative approaches are not available, to protect people with disability in Queensland.

The Acts provide the following tools to help identify, manage and respond to non-compliance, including:

* Co-operative Approach (s.15 *Community Services Act 2007*)
* Compliance Notice (s.19 *Community Services Act 2007*)
* Compliance Investigation (s.16 *Community Services Act 2007*)
* Proceedings (s.103 *Guide Hearing and Assistant Dogs Act 2009*, Part 7 of *Community Services Act 2007*).

Some actions or compliance tools are alternatives, while others are used in combination. Using a range of tools may often achieve compliance quickly without needing to escalate to more serious enforcement action. However, it is open to Disability Services to proceed directly with the strongest actions in a particular case.

Examples of **high risk/serious non-compliance** mayinclude:

* the alleged abuse, neglect or exploitation of a client
* allegation of a criminal offence against the law of the State or Commonwealth
* repeated breaches of the legislation, despite receiving education and support to comply, and
* the non-compliance is suggestive of a broader systemic issue.

Examples of **medium risk non-compliance** mayinclude**:**

* the alleged non-compliance may lead to an increased risk of abuse, neglect or exploitation of a client, and
* an alleged misuse of funds provided under a funding agreement (that is not an offence against the law of the State or Commonwealth).

Examples of **low-risk non-compliance** mayinclude:

* breaches that can be effectively and efficiently dealt with other than by investigation, or behaviour unlikely to impact on the sector or cause client detriment.

## Authorised Officers

In order to perform the full range of compliance, inquiry and enforcement functions, officers must be appointed as Authorised Officers under the *Community Services Act 2007* and/or *Guide Hearing and Assistance Dogs Act 2009*. Power to authorise these appointments rests with the Director-General of the department.

Prior to appointment as an Authorised Officer, a person must satisfy the Chief Executive of their suitability for appointment, including providing evidence of their capabilities to conduct investigative functions.

## Monitoring Action under the Compliance Strategy

The Compliance Strategy will be reviewed every two years.

**Date of approval:** April 2023

**Date to be reviewed:** April 2025

**Office:** Office of the Deputy Director-General, Disability Services

**Help Contact:** [ODDG\_DSC@dcssds.qld.gov.au](mailto:ODDG_DSC@dcssds.qld.gov.au)

**Links:**

[*Community Services Act 2007*](https://www.legislation.qld.gov.au/view/whole/html/inforce/current/act-2007-038)

[*Disability Services Act 2006*](https://www.legislation.qld.gov.au/view/whole/html/inforce/current/act-2006-012)

[*Forensic Disability Act 2011*](https://www.legislation.qld.gov.au/view/whole/html/inforce/current/act-2011-013)

[*Guide, Hearing and Assistance Dogs Act 2009*](https://www.legislation.qld.gov.au/view/whole/html/inforce/current/act-2009-004)

[NDIS Quality and Safeguards Commission](https://www.ndiscommission.gov.au/)

## Appendix 1 – Disability Services Compliance Functions

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| ***Disability Services Act 2006* - Positive Behaviour Support & Restricted Practices** | |
| Part 6 of the DSA relates to positive behaviour support and restrictive practice. Under sections 200D and 200E an Authorised Officer may investigate a breach of Part 6. However, compliance enforcement action cannot be taken unless the service provider is a Funded Entity. Concerns regarding a NDIS non-government service provider should be referred to the NDIS Q&S Commission for it to take appropriate enforcement action. Where non-compliance relates to an individual Accommodation Support and Respite Services (AS&RS) staff member, Responsibility for investigating allegations of non-compliance rests with the department’s Ethical Standards area.  Referrals to QPS should also be considered in all cases of alleged unauthorised restrictive practice. | |
| Person harmed by authorised or unauthorised Restrictive Practices | s 139 outlines the principles that service providers should take into account in providing services; and regulates the use of restrictive practice so that the client’s human rights are protected, they and others are safeguarded from harm, opportunity for positive outcomes are maximised, the use of restrictive practice is minimised and transparency and accountability in the use of restrictive practice is ensured. |
| Restricted Practices Approvals | Part 6 Divisions 3, 4 and 5 detail the approvals and consultation required to implement restrictive practices. |
| Containment or Seclusion | Part 6 Division 3 details the authorisation requirements for the use of containment or seclusion of an adult including approvals and assessments. |
| Chemical, Mechanical or Physical restraint or restricting access | Part 6 Division 4 details the authorisation requirements for the use of chemical, mechanical or physical restraint or restricting access including approvals and assessments. |
| Restrictive practices in Respite Services | Part 6 Division 5 details requirements for the use of restrictive practices for respite or community access services. |
| Information sharing, recording, reporting and confidentiality | Part 6 Division 7 outlines requirements in terms of information sharing, maintenance of records, reporting and confidentiality. |
| ***Guide, Hearing and Assistance Dogs Act 2009*** | |
| The compliance provisions under the *Guide Hearing and Assistance Dogs Act* *2009* extend to persons exercising control of places of accommodation, public places and public passenger vehicles, trainers and training institutions, identity cards for handlers, trainers and puppy carers, and the screening of approved employee trainers. | |
| Rights of accompaniment | s 8 and s 9 states people with a disability, Trainers and Carers may be accompanied by guide, hearing, assistance and trainee support dogs |
| Persons exercising control | s 11 states people with a disability, Trainers and Carers must be provided access to accommodation, public places and public passenger vehicles in accordance with the rights of accompaniment |
| Approvals of trainers and training institutions | Trainers and training institutions are required to meet the obligations outlined in Part 3 to gain and maintain approval |
| Identity cards for handlers, trainers and carers | Part 5 details the eligibility, application and requirements of handlers, trainers and carers related to identity cards |
| Screening trainers | Under s 58*,* the Chief Executive has powers to obtain information relating to the screening of employee trainers, and requirements of employee trainers |
| ***Community Services Act 2007*** | |
| The compliance provisions under the *Community Services Act 2007* can only apply if the department has a funding agreement with the service provider for funding which is the subject of a funding declaration under the *Community Services Act 2007*. | |
| Serious Concern | s. 16 defines serious concerns as:   * The funding received by the funded entity is improperly used * The funded entity significantly fails to deliver a funded product or service * An act done or omission made by the funded entity in providing a funded product or service results in harm to an individual * If the funded entity received funding to deliver disability services to which the *Disability Services Act 2006* applies – the funded entity contravenes a provision of the *Disability Services Act 2006* |

1. Where appropriate, referrals to be made to the NDIS Quality and Safeguard Commission and/or QPS etc. [↑](#footnote-ref-1)
2. In accordance with Clause 13 of Service Agreement – Standard Terms [↑](#footnote-ref-2)
3. Under s 206 of the DSA, an offence against this Act is an indictable offence if the maximum penalty for the offence is 500 penalty units or more of 5 years imprisonment or more. Otherwise, an offence against this Act is a summary offence For the CSA and GHAD Act, an offence against the Act is a summary offence. [↑](#footnote-ref-3)
4. In accordance with section 15 of the CSA, before the Chief Executive or an Authorised Officer exercises a power under the CSA, the Chief Executive or Authorised Officer must consider whether it would be more appropriate to seek the cooperation of the service provider or to use a remedy under a funding agreement instead of exercising the power. [↑](#footnote-ref-4)