Victorian Early Childhood Intervention



(ECI) Standards 2016

Self-Assessment and Quality Improvement Plan

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Victorian Early Childhood Intervention (ECI) Standards 2016

# Background

The *Victorian Early Childhood Intervention Standards 2016* (ECI Standards) support funded early childhood intervention providers to understand the Victorian Government’s expectations in regard to the quality of service delivery for young children with disability or developmental delay and their families.

The ECI Standards reflect the early intervention outcomes for young children with disabilities or developmental delays and their families, and are underpinned by the key principle of family centred practice. They recognise that the foundation of effective early childhood intervention is based on national and international evidence based research.

All service providers funded by the Department of Education and Training (the Department) to deliver in-scope services (ECIS project code 718360) are required to meet the ECI Standards. The ECI Standards consist of four service delivery standards and one organisational performance standard.

The title of each Standard indicates the main focus and the accompanying statements summarise the goal of each standard. The criteria describe the key components that make up the standard.

The ECI Standards are primarily a quality improvement tool. The Department must ensure services purchased for consumers are of a high quality, are effective and reflect the needs of consumers.

When services implement the ECI Standards they set in place the framework that will guide continuous quality improvement in their organisation. The Department will assist providers to achieve the ECI Standards through a process of monitoring and support.

It is important that all organisations adopt a team approach that assists the service to meet the Standards through:

* their documentation
* the knowledge and awareness of their governing bodies, management, service delivery staff and users
* ongoing monitoring and evaluation practices.

# Relationship between the ECI Standards and Quality & Safeguarding requirements in Victoria during the transition to the NDIS.

Providers seeking to register with the NDIS to deliver *Early Childhood Supports* in Victoria will be required to provide proof of either current *Victorian* or *Commonwealth Approved NDIS Provider - Early Childhood Supports* status in order to finalise registration with the NDIS. Providers who do not have this status must apply for *Victorian Approved NDIS Provider- Early Childhood Supports* status from Victoria by undertaking a self-assessment against the *Victorian* *ECI Standards* that demonstrates their compliance with the standards.

**Currently** the Department reviews all self-assessments against the ECI Standards at no cost to providers. However, this may change in the future and providers may be required to purchase this self-assessment review at their own cost.

Where a provider has *Victorian Approved NDIS Provider* status to deliver other NDIS supports and seeks to expand their service delivery to include *Early Childhood Supports,* the provider will be required to undertake self-assessment and quality improvement planning processes against the *ECI Standards* in order to finalise registration to deliver early childhood supports.

*Providers who obtain Victorian Approved NDIS Provider- Early Childhood Supports* status will be subject to independent review against the *ECI Standards* within 12 months of gaining *this* status. This independent review will be at the provider’s expense and must be purchased from a Department approved independent review body of their choice.

For further information on applying for and maintaining *Victorian Approved NDIS Provider- Early Childhood Supports* status, please note the following Departmental website: [ECIS and the NDIS](http://www.education.vic.gov.au/childhood/providers/needs/Pages/ecisframework.aspx)

## What is self-assessment and why is it important?

Self-assessment involves an organisation reflecting on how it does things and how it measures against criteria. By engaging in a self- assessment process, an organisation can identify its strengths, weaknesses and opportunities for improvement.

The self-assessment should include each service provider’s findings about how well it is meeting the *ECI Standards*, including organisational performance.

Self-assessment needs to be informed by input from clients. In early childhood intervention, families are seen as intrinsic partners and services are underpinned by family centred practices. Self-assessment for organisations providing *early childhood supports* under the NDIS must be informed by input from families receiving the *early childhood supports.*

Organisations must ensure there are accessible ways for families to provide feedback and actively contribute to how services are delivered. Organisations benefit when they link quality management with child and family outcomes, staff competence and wellbeing, organisational sustainability and service improvement.

Self-assessment is an opportunity for providers to:

* confirm where the service is meeting the *ECI Standards*
* identify gaps in current systems and processes that do not meet the *ECI Standards*
* plan actions to address any identified gaps in systems and processes
* identify additional opportunities for improvement
* support continuous improvement.

The *ECI Standards* assessment tools

The *Victorian ECI Standards* are a set of service quality standards for organisations delivering services to young children with disability or developmental delay in Victoria.

The *ECI Standards* are summarised as:

* Family centred practice
* Access and engagement
* Outcomes for children and families
* Inclusion and participation
* Organisational performance

All funded organisations are required to meet the *ECI Standards*. National Disability Insurance Agency (NDIA) providers who seek to obtain or maintain *Victorian Approved NDIS provider* status (to deliver *Early Childhood Supports*) are also required to meet the *ECI Standards*.

# The self-assessment tool

The self-assessment tool includes:

* Self-assessment record
* Assessment matrix
* Quality improvement plan
* Checklist of actions.

# Self-assessment record

The self-assessment record is used to document evidence of current good practice and identify areas for further improvement. Priority action issues can also be identified.

# Assessment matrix

The assessment matrix is a summary of the findings of the self-assessment, and allows providers to identify their overall performance against the standards and the governance and management standards.

* **Met**: written and verbal evidence clearly demonstrates that the provider meets all the requirements of the criteria
* **Partly Met**: written and verbal evidence clearly demonstrates that the provider only meets part of the requirements of the criteria.
* **Not Met**: written and verbal evidence clearly demonstrates that the provider does not meet the requirements of the criteria.
* **Not Applicable**: a not applicable rating may apply, for example, where a provider has been granted an exemption by the Department from undertaking a review against Standard 5 Organisational Performance.

Providers are required to self-assess and rate against all of the *ECI Standards* criteria and indicators.

The self-assessment must demonstrate the provider’s compliance with the *ECI Standards*.

Where the Department or an independent review body deems a self-assessment to be insufficient (i.e. it does not demonstrate compliance with the *ECI Standards*), it may require the service provider to undertake an independent review or advise the provider that is proposes to refuse or revoke *Victorian Approved NDIS Provider – Early Childhood Supports* status.

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## Quality improvement plan

The quality improvement plan provides a summary of the actions required to meet the indicators. This section is compulsory where standards have been rated as partly met or not met.

Providers should document any opportunities for improvement even when the criteria are fully met. These are optional actions to promote continuous quality improvement and ensure the provider keeps up to date with best practice. These should also be documented in the quality improvement plan.

The quality improvement plan assists providers prioritise actions required to meet the *ECI Standards* and ensures the self-assessment is linked to continuous quality improvement.

# Client and staff file audit tools

Where requested, providers may be required to complete either client and/or staff file audits using the included file audit forms. The sample size should be the square root of the total number of staff files plus one. Where the provider is a sole provider, staff file information provided will be their own. The client file audit results should be the square root of the total number of open and closed client files in the last 12 months, plus one.

# Checklist of actions

A checklist is included at the end of the self-assessment tool to assist service providers in reviewing the completed self-assessment prior to submission.

Conducting the self-assessment

## Preparing for the self-assessment

The self-assessment process should be completed by people within your organisation who have the skills to coordinate the process, such as engaging other staff in examining the standards and criteria, conducting interviews and deciding which policies, records or other documents might need to be examined or revised. Depending on the size of your organisation this activity may require the cooperation of a number of people.

A number of methods can be used to conduct the self-assessment including:

* Feedback from staff, management, board of management and families
* Desktop review of your organisation’s policies and procedures
* Workshops/meetings to discuss what is working well and where there are gaps

To promote involvement it is useful to explain why the self-assessment is being undertaken and why their feedback is important.

## Collecting evidence

The self-assessment involves collecting and assessing evidence for each standard. Organisations must provide evidence to demonstrate they are addressing each of the following evidence categories:

* Documents
* Knowledge and awareness
* Evaluation and monitoring.

The *ECI Standards Evidence Guide* section in this document includes evidence examples that can be used to demonstrate that each applicable criterion and evidence category has been met.

## Categories of evidence

The three categories of evidence are described below.

## Documents

The documents category includes a wide **range of written material** that demonstrates how an organisation meets the *ECI Standards* while also addressing relevant external requirements for example legislation, regulations, and departmental and program specific requirements. Documentation might include:

* Policies, procedures, protocols, work instructions describing the organisations processes and practices
* Information available and/or provided to families or displayed, such as: brochures, pamphlets, newsletters, photographs, posters or other written material given to families who use the service or other stakeholders
* Records and other tools used by staff or families who use the service, examples may include: referrals, intake and assessment tools, plans, attendance records, feedback and complaint forms, improvement forms, personnel files, meeting minutes, memorandums and emails.

The self-assessment should list the relevant documents, hard copies are not required. Where these documents are publically available on the provider’s website, please include the relevant website link. The independent review body may request copies of documents referred to in the provider’s self-assessment where compliance with the *ECI Standards* is unclear.

## Knowledge and awareness

The knowledge and awareness category provides information about **the methods** the organisation uses to demonstrate implementation of the documented processes and systems. This should include assisting board members, management, staff, carers, volunteers and other stakeholders in understanding the processes and service delivery systems.

This might include:

* Training plans/records (planned training, orientation)
* Agenda items in meetings
* Manuals/guidelines/memos.

For families who use the service, this may include:

* When, how and what information is provided
* Provision of information in other formats to facilitate understanding and to meet the language, cultural and communication needs of individuals
* Use of interpreters.

Monitoring and evaluation

The monitoring and evaluation category provides **information to demonstrate the organisation’s approach** to continuous quality improvement and the **methods used to measure** the effectiveness of processes and systems. Evidence should confirm implementation and identify outcomes or outputs of systems and processes. This might include:

* Complaints register, incident register
* Reports, including: management reports, financial reports, annual reports and audit reports
* Feedback mechanisms, for example focus groups, surveys, complaints
* Documentation audits, for example client files/records, personnel files/records
* Internal and/or external audits
* Benchmarking
* Quality plans and associated activities
* Risk management plans
* Other monitoring processes, for example incident reports and hazard identification
* Minutes of meetings
* Observations
* Interviews.

## 

Assessing the evidence and applying a rating

This requires an organisation to examine the three categories of evidence against the standards to identify strengths and areas requiring improvement. As part of this process providers are required to apply a self-assessment rating of met, partly met, not met or not applicable for each criteria.

To achieve a met status, a provider must have evidence that processes and systems are documented, the appropriate people are aware of them (staff, people using the service and stakeholders) and that these are regularly monitored and reviewed. Where a provider identifies a partly met or a not met, improvements must be identified and documented in the Quality Improvement Plan.

## 

Completing the Quality Improvement Plan

Following the self-assessment, a quality improvement plan must be developed where the provider does not fully meet a criterion and areas for improvement are identified. These should be included in the quality improvement plan to assist prioritising actions for improvement.

Improvement plans should include the following details:

* The improvement action that is planned
* The name/position of the person responsible for completing the action
* The timeframe within which action is to be completed
* The outcome of the action and the date the action is completed.

Examples of the type of improvement that may be required are:

* Develop and introduce new or additional policies and/or procedures
* Review current policies and/or procedures
* Review orientation and/or staff training programs
* Further develop written information for clients
* Consistently implement the agreed organisational processes
* Introduce new or additional quality improvement processes
* Increase opportunities for stakeholders to provide feedback.

## 

Completing the assessment matrix

Once the self-assessment is finalised, the assessment matrix should be completed. This requires inserting a rating against each criterion, reflecting the self-assessment findings.

Where a provider considers a criterion is not applicable to their service type, they should tick ‘not applicable’ in the assessment matrix.

Sole providers

Sole providers and small organisations of four or less staff (including any contractors/sub-contractors) are required to demonstrate compliance against the *ECI Standards* using the forms and tools in this document. The Department recognises that sole or very small providers may not have the documented policies in place to be able to demonstrate the required level of compliance. Where this is the case these providers must indicate in their response to each section of the self-assessment how they will provide supports in compliance with the ECI Standards. This group of providers must also submit evidence (documentation) with their self-assessment of the following:

* Qualifications
* Registration/membership with the relevant professional body
* Disclosure of any conditions on that registration/membership or negative findings from any professional review
* Experience in providing early childhood interventions for young children with a disability or developmental delay
* Experience providing services within a transdisciplinary or collaborative team framework
* Professional development in place related to the provision of early childhood intervention
* Current Working With Children check
* Documented complaints process
* Documented incident management process

The ECI Standards evidence guide

An evidence guide has been developed to help organisations prepare for and participate in internal (self – assessment) and external (independent) reviews against the *ECI Standards* and can be found on the following webpage link: : [ECIS and the NDIS](http://www.education.vic.gov.au/childhood/providers/needs/Pages/ecisframework.aspx)

Overview of the *ECI Standards*

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| **Standard** |  | **Criterion** |
| 1. Family centred practice *Families can expect to be involved in a respectful, collaborative working partnership with service providers* | 1.1 | Service delivery is underpinned by family centred and strength based practices |
| 1.2 | Families have a goal-oriented and outcome focussed family service and support plan |
| 2. Access and engagement *Children and families have access to services appropriate to their needs without being disadvantaged by their cultural, financial or geographic situation* | 2.1 | Children and families have access to services relevant to their needs |
| 2.2 | The service is responsive to the diversity of children and families |
| 2.3 | The service establish linkages with other services to support a coordinated approach for children and families |
| 3. Outcomes for children and families *Service delivery focuses on functional outcomes for children and families that support the achievement of their goals* | 3.1 | Service delivery enhances children’s learning, wellbeing and development |
| 3.2 | The service builds the capacity of families to support their child’s learning, wellbeing and development |
| 4. Inclusion and participation *The inclusion and participation of children in everyday family and community life is promoted* | 4.1 | The service promotes the inclusion and participation of children in family and community life |
| 4.2 | The service assists early childhood education and care settings to support the inclusion and participation of all children |
| 5. Organisational performance *Sound governance and management guides critical for quality service delivery* | 5.1 | The service has effective governance and management processes to deliver high quality services |
| 5.2 | The service has effective risk management policies and processes to manage client issues, human resources and the sustainability of services |
| 5.3 | The service manages human resources to ensure that appropriately skilled and trained staff are available to safely provide services to clients |
| 5.4 | The service has effective information systems to sensitively manage client information, improve services and meet identified client needs |

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| ***ECI Standards*****Self-assessment report and quality improvement plan** | |
| **Service provider** |  |
| **Legal entity name** |  |
| **Trading name** |  |
| **Entity telephone contact** |  |
| **Entity email address** |  |
| **Main site address** |  |
| **Additional sites** |  |
| **Number of staff, including subcontractors:** |  |
| **Contact name** |  |
| **Position** |  |
| **Date submitted:** |  |
| **Submitted to:** |  |
| **Declaration:** | In providing this self-assessment I:   * declare that this information is true and correct * agree to provide required supporting information/documentation to demonstrate compliance with the ECI Standards if requested by the Department * commit that the above named provider will work within the intent of the *Victorian ECI Standards* * understand that entities registered or contracted by the NDIA are required to comply with the Victorian Quality and Safeguards Arrangements for Transition and any other conditions or restrictions placed on registration by the Victorian Department of Education and Training * Confirm I am authorised to submit this self-assessment on behalf of the entity named |
| **Signature of authorised person:** |  |
| **Name, date and position:** |  |

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| **Standard 1: Family centred practice** |
| ***Families can expect to be involved in a respectful, collaborative working partnership with service providers*** |
| **Criterion 1.1 Service delivery is underpinned by family centred and strength based practices** |
| Indicators   * ECI professionals understand and implement the principles of family centred and strength based practice * ECI professionals recognise and respect the central role of families in children’s lives * Families are provided with objective information about the service and what level of service will be provided * ECI professionals provide relevant information to enable families to make informed choices and decisions * ECI professionals recognise, and incorporate in their work, families’ understanding of their child’s strengths, interests and needs * ECI supports are individualised to reflect the unique strengths and needs of each child * Family members and professionals work together and share information routinely and collaboratively to achieve family identified outcomes * Information is provided in an accessible format about: the quality of service families can expect to receive from the service provider; their right to an advocate, including how to access one; their right to privacy and confidentiality; the process for accessing records; feedback processes; complaints process and this information is provided on entry to the service * The service provides families with information to support their linkages with other local specialist and universal services relevant to their child and family’s needs * Families have an opportunity to provide information and feedback on all aspects of the services they are receiving * Family feedback information is documented and informs the service’s annual planning and review process * The service maintains a record of all complaints and their outcomes |
| Documents |
| Knowledge and awareness |
| Evaluation and monitoring |
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| ***Action to support continuous quality improvement:*** *Must be transcribed to quality improvement plan* |
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| **Standard 1: Family centred practice** |
| ***Families can expect to be involved in a respectful, collaborative working partnership with service providers*** |
| **Criterion 1.2 Families have a goal-oriented and outcomes focussed family service and support plan** |
| Indicators   * Families actively participate in the planning and development of a Family Service Support Plan * All plans are individualised to respond to the identified needs of the child and family * All families have a documented plan(s) that: * Reflects the strengths, needs, goals, supports and outcomes specified by the family * Describes how these goals will be achieved, including timelines * Includes input from family, carers and other service providers, as appropriate * Is reviewed within timeframes agreed with the family to reflect changing needs * The plan reflects the shared ideas, skills and knowledge of families and professionals * The plan promotes interactions and activities that enhance the child’s competencies and development and is underpinned by the *Victorian Early Years Learning and Development Framework* * Families receive a copy of their plan and any revised plans in a format that they can understand * The service supports families to be actively involved in monitoring and reviewing the plan * The outcomes of the goals in the plan are measured and reported in ways that are meaningful to the family |
| Documents |
| Knowledge and awareness |
| Evaluation and monitoring |
| **SELF-ASSESSMENT RATING: MET / PART MET / NOT MET (delete as applicable)** |
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| **Standard 2: Access and engagement** |
| ***Children and families have access to services appropriate to their needs without being disadvantaged by their cultural, financial or geographic situation*** |
| **Criterion 2.1 Children and families have access to services relevant to their needs** |
| Indicators   * The service creates an inclusive and welcoming environment where all families are encouraged to participate in and contribute to their child’s learning and development * Service delivery hours are responsive to the needs of children and families accessing the service * Policies and processes are in place which document eligibility; priority of access; demand management * Information is provided to families in an accessible format that facilitates understanding regarding: entry and exit processes; criteria to determine priority for service; conditions that may apply to services being provided; any fees or costs, as applicable * Data and feedback mechanisms are in place to identify and address barriers to access * The service identifies service accessibility issues and implements strategies to address these * The service enables access for families living in geographically isolated areas * The service environment uses resources and symbols that are responsive to the needs of all families * The service environment uses resources and symbols that are responsive to the needs of all families * The service implements the *Child Safe Standards 2015*   Compliance with the Child Safe Standards is a requirement for Victorian government approval. Victoria has introduced compulsory minimum standards for organisations that provide services for children to help protect children from abuse. This includes services that provide early childhood intervention. The Victorian Commission for Children and Young People administers and enforces the Child Safe Standards. Further information is at <http://www.ccyp.vic.gov.au> |
| Documents |
| Knowledge and awareness |
| Evaluation and monitoring |
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| **Standard 2: Access and engagement** |
| ***Children and families have access to services appropriate to their needs without being disadvantaged by their cultural, financial or geographic situation*** |
| **Criterion 2.2 The service is responsive to the diversity of children and families** |
| Indicators   * The service provides culturally respectful and responsive services which respect the diversity of families, including vulnerable families, families who identify as Aboriginal or Torres Strait Islander background and those who are from cultural and linguistically diverse backgrounds * Interpreters are used, as required, to support more effective communication * Families and professionals work together as a collaborative team to achieve common goals * An ECI practitioner undertakes the role of key worker to be the family’s main point of contact and main person working with the family * The key worker is supported by a transdisciplinary team of relevant professionals who work collaboratively * The service demonstrates a cohesive and holistic approach to planning and implementing programs for children and their families * The service adopts active engagement strategies |
| Documents |
| Knowledge and awareness |
| Evaluation and monitoring |
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| **Standard 2: Access and engagement** |
| ***Children and families have access to services appropriate to their needs without being disadvantaged by their cultural, financial or geographic situation*** |
| **Criterion 2.3 The service establishes linkages with other services to support a coordinated approach for children and families** |
| Indicators   * The service strives to achieve greater coordination for families within and between specialist and universal services * The service maintains links with other specialist and universal services in the area ensuring current knowledge of these services and a complementary approach to service delivery * The service provides or directs families to information on other local specialist and universal services which may be able to meet their needs * The service collaborates with other services to enhance transition/exit planning to meet the needs of the child and family * The service has documented processes for transition arrangements (to school, disability services, universalist services), case closure and this information is communicated to families * The service provider is visible and active in referral networks with clear referral pathways to relevant universal and specialist services |
| Documents |
| Knowledge and awareness |
| Evaluation and monitoring |
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| **Standard 3: Outcomes for children and families** |
| ***Service delivery focuses on functional outcomes for children and families that support achievement of their goals*** |
| **Criterion 3.1 Service delivery enhances children’s learning, wellbeing and development** |
| Indicators   * Program goals reflect functional outcomes relevant to the child’s access and meaningful participation in their everyday settings * The service supports families to identify and build on a child’s strengths interests and capabilities * Goals and strategies focus on functional outcomes that support children’s learning, development and wellbeing and are appropriate to their development and cultural circumstances * Assessment of children’s development is authentic and holistic and includes collaboration with families and other professionals as well as the child’s functionality in their everyday routines and activities * The service promotes and supports children’s participation in daily routines, at home, in the community, and in early childhood settings * The service promotes and supports the learning and development opportunities alongside peers in everyday community settings e.g. play group, kindergarten * Flexibility of service delivery allows for interventions to take place in environments that are responsive to the family situation * Service delivery is informed by the outcomes and practice principles identified in the Victorian Early Years Learning and Development Framework |
| Documents |
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| Evaluation and monitoring |
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| **Standard 3: Outcomes for children and families** |
| ***Service delivery focuses on functional outcomes for children and families that support achievement of their goals*** |
| **Criterion 3.2 The service builds the capacity of families to support their child’s learning, wellbeing and development** |
| Indicators   * ECI professionals build the knowledge, skills and abilities of the individuals who will spend the most time with the child in order to maximise the learning and development opportunities in their everyday life * ECI professionals assist families to understand how their family routines and everyday activities can support their child’s development * Interventions build on family support and resources assisting them to strengthen formal and informal supports to match their needs and interests * Goals are able to be integrated into the child and family’s daily routine and in other settings within which the child participates * ECI professionals link families with local community resources which may meaningfully meet their needs * Decisions on equipment requirements are made in consideration of the family, home and community settings * Families are satisfied with the support they receive to achieve stated goals |
| Documents |
| Knowledge and awareness |
| Evaluation and monitoring |
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| **Standard 4: Inclusion and participation** |
| ***The inclusion and participation of children in everyday family and community life is promoted*** |
| **Criterion 4.1 The service promotes the inclusion and participation of children in family and community life** |
| Indicators   * The service promotes the child’s access and participation in family and community life * Goals and strategies focus on building the child’s capacity to meaningfully participate in naturally occurring, developmentally appropriate activities with families and peers * Wherever possible, intervention supports are provided within the family setting, building family confidence to implement these strategies in their everyday life * The service has clearly documented policies and processes that acknowledge and support the rights of children with disabilities and their families to access and participate in their community * The service supports every child, regardless of their needs, to fully participate in family and community life * The service promotes and supports the learning and development opportunities alongside peers in everyday community settings e.g. play group, kindergarten * The service provides families with information, in a format that is understood to enhance informed decision making and choice * The service supports families to develop the skills and confidence to be their child’s ongoing advocate |
| Documents |
| Knowledge and awareness |
| Evaluation and monitoring |
| **SELF-ASSESSMENT RATING: MET / PART MET / NOT MET (delete as applicable)** |
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| **Standard 4: Inclusion and participation** |
| ***The inclusion and meaningful participation of children in everyday family and community life is promoted*** |
| **Criterion 4.2 The service assists early childhood education and care settings to support the inclusion and participation of all children** |
| Indicators   * ECI professionals are available to support children within other early childhood settings * The key worker acts as the main contact between the client ECI service and the early childhood education and care setting * The service provides families with resources and information to support their participation in early childhood education and care settings * ECI professionals respect and collaborate with early childhood education and care professionals to facilitate sharing of knowledge and understanding of the child * ECI professionals support early childhood education and care professionals to identify and implement strategies and adaptations that assist the child’s inclusion in the learning and development opportunities offered in the early childhood education and care program * The ECI service provides families and early childhood education and care staff with information and support to promote the smooth transition of children from home to early childhood education and care, between early childhood education and care settings and onto school |
| Documents |
| Knowledge and awareness |
| Evaluation and monitoring |
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| **Standard 5: Organisational performance** |
| ***Sound governance and management guides quality service delivery*** |
| **Criterion 5.1: The service has effective governance and management processes to deliver high quality services** |
| Indicators   * The service’s governance and management processes are effective and transparent and there are clear management and staff accountabilities * The service’s strategic and annual planning informs the delivery of services to improve outcomes for children and families accessing services * The service effectively meets its legal obligations and contract management requirements * The service works actively with children and their families and other external stakeholders to improve the quality of its services * The governing body possess the skills, knowledge and experience required to fulfil their role * The service has robust financial management systems in place * The service has robust legislative compliance systems in place * The service has a continuous quality improvement system in place |
| Documents |
| Knowledge and awareness |
| Evaluation and monitoring |
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| **Standard 5: Organisational performance** |
| ***Sound governance and management guides quality service delivery*** |
| **Criteria 5.2: The service has effective risk management policies and processes to manage client issues, human resources and the sustainability of services** |
| Indicators   * The service has an effective risk management plan that meets policy requirements * The service complies with relevant accountancy standards * The service has an active workplace health and safety policy and process * The service’s insurance policies are maintained |
| Documents |
| Knowledge and awareness |
| Evaluation and monitoring |
| **SELF-ASSESSMENT RATING: MET / PART MET / NOT MET (delete as applicable)** |
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| **Standard 5: Organisational performance** |
| ***Sound governance and management guides quality service delivery*** |
| **Criteria 5.3: The service manages human resources to ensure that appropriately skilled and trained staff are available to safely provide services to clients** |
| Indicators   * The service’s recruitment processes ensure that staff, carers and volunteers provide safe and high quality services to children and families accessing services * The service has a thorough process for pre-employment criminal history and referee checks and ensuring the currency of staff Working With Children checks * The service employs staff with appropriate discipline tertiary qualifications, who are registered with their regulatory body where appropriate, and either hold or are eligible for membership of their professional association * The service’s recruitment, supervision, training and development processes support staff to respond to the diversity of families, including vulnerable families, families who identify as Aboriginal or Torres Strait Islander background and those who are from cultural and linguistically diverse backgrounds |
| Documents |
| Knowledge and awareness |
| Evaluation and monitoring |
| **SELF-ASSESSMENT RATING: MET / PART MET / NOT MET (delete as applicable)** |
| ***Action required to meet the criteria:*** *Must be transcribed to quality improvement plan* |
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| ***Action to support continuous quality improvement:*** *Must be transcribed to quality improvement plan* |
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| **Standard 5: Organisational performance** |
| ***Sound governance and management guides quality service delivery*** |
| **Criteria 5.4: The service has effective information systems to sensitively manage client information, improve services and meet identified client needs** |
| Indicators   * The service sensitively manages client information and maintains client privacy and confidentiality in line with legislative requirements * Client information is retained and disposed of appropriately and sensitively * Information is provided to families in ways that are accessible to families seeking information * The service has an effective information management system in place which is easily accessible to staff to support planning and service delivery |
| Documents |
| Knowledge and awareness |
| Evaluation and monitoring |
| **SELF-ASSESSMENT RATING: MET / PART MET / NOT MET (delete as applicable)** |
| ***Action required to meet the criteria:*** *Must be transcribed to quality improvement plan* |
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| ***Action to support continuous quality improvement:*** *Must be transcribed to quality improvement plan* |
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| **Assessment Matrix** | | | | | | | | | |
| CRITERIA | *Place a tick in the appropriate box* | | **Met** | | **Partly Met** | | | **Not Met** | |
| **Standard 1: Family centred practice** | |  | |  | | |  | |
| 1.1 Service delivery is underpinned by family centred and strength based practices | |  | |  | | |  | |
| 1.2 Families have a goal-oriented and outcomes focussed family service and support plan | |  | |  | | |  | |
| **Standard 2: Access and engagement** | |  | |  | | |  | |
| 2.1 Children and families have access to services relevant to their needs | |  | |  | | |  | |
| 2.2 The service is responsive to the diversity of children and families | |  | |  | | |  | |
| 2.3 The service establishes linkages with other services to support a coordinated approach for children and families | |  | |  | | |  | |
| **Standard 3: Outcomes for children and families** | |  | |  | | |  | |
| 3.1 Service delivery enhances children’s learning, wellbeing and development | |  | |  | | |  | |
| 3.2 The service builds the capacity of families to support their child’s learning, wellbeing and development | |  | |  | | |  | |
| **Standard 4: Inclusion and participation** | |  | |  | | |  | |
| 4.1 The service promotes the inclusion and participation of children in family and community life | |  | |  | | |  | |
| 4.2 The services assists early childhood education and care settings to support the inclusion and participation of all children | |  | |  | | |  | |
| **Standard 5: Organisational performance** | | | | | | | |
|  | **Met** | | **Partly Met** | | **Not Met** | **Not applicable** | |
| 5.1 The service has effective governance and management processes to deliver high quality services |  | |  | |  |  | |
| 5.2 The service has effective risk management policies and processes to manage client issues, human resources and the sustainability of services |  | |  | |  |  | |
| 5.3 The service manages human resources to ensure that appropriately skilled and trained staff are available to safely provide services to clients |  | |  | |  |  | |
| 5.4 The service has effective information systems to sensitively manage client information, improve services and meet identified client needs |  | |  | |  |  | |

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| **ECI Service Quality Improvement Plan** | | | | |
| ***Criteria*** | ***Planned action*** | ***Who is responsible*** | ***Due date*** | ***Outcome/review*** |
| ***Date complete*** |
| ***Action required to meet the criteria*** | | | | |
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| ***Optional areas for improvement*** | | | | |
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| **Self-assessment checklist** | |
| ***Please ensure you have completed the following information before submitting your self-assessment to the required contact.*** | |
| Your service provider details |  |
| The assessment matrix |  |
| Your evidence examples for each criteria |  |
| Self-assessment findings for each criteria |  |
| A self-assessment rating for each applicable criteria |  |
| The quality improvement plan ‘Actions required to meet the criteria’ where you have rated an expected outcome as part met or not met. (Transcribed from applicable standard/s) |  |
| The quality improvement plan ‘Optional action to support continuous quality improvement’ where you have rated an expected outcome as Met, but identified improvement opportunities. (Transcribed from applicable standard/s.) |  |
| Previous quality improvement plan submitted showing progress and actions completed  (Where second or subsequent self-assessment) |  |
| Client file audit completed and results submitted (Where requested) |  |
| Staff file audit completed and results submitted (Where requested) |  |
| Sole providers and small organisation of four or less staff – provide evidence of:   * Qualifications * Registration/membership with the relevant professional body * Disclosure of any conditions on that registration/membership or negative findings from any professional review * Experience in providing early childhood interventions for young children with a disability or developmental delay * Experience providing services within a transdisciplinary or collaborative team framework * Professional development in place related to the provision of early childhood intervention * Current Working With Children check * Documented complaints process * Documented incident management process |  |