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# National Panel of Assessors Performance Framework Guidelines and Ongoing Support Assessments Quality Framework

V1.0

**Disclaimer:** This document is not a stand-alone document and does not contain the entirety of Disability Employment National Panel of Assessors Providers’ obligations. It should be read in conjunction with the Disability Employment National Panel of Assessors Grant Program Agreement (2018-2023) and any relevant Guidelines or reference material issued by the Department under or in connection with the Grant Agreement of Standing Offer.

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**National Panel of Assessors Performance Framework Guidelines and Ongoing Support Assessments Quality Framework**

### Document Change History

| Version | Effective Date | End Date | Change & Location |
| --- | --- | --- | --- |
| 1.0 | 1 July 2018 |  | Original Version |

### Background

The National Panel of Assessors provides a range of Assessment Services to assist with the needs of people with disability in the workplace. No funding is provided on appointment to the National Panel of Assessors. Panel Providers (providers) are required to enter into a non-exclusive Grant Agreement with the Department of Social Services (DSS). Assessment Services are allocated to providers as required by the department. Assessment Services must be completed by approved assessors, who meet mandatory qualifications and industry experience requirements.

This Guide is designed to inform providers about the NPA performance framework for Supported Wage System (SWS) and Ongoing Support Assessments (OSA). Evaluation and management of provider performance will be measured against the Key Performance Indicators (KPIs) in the Disability Employment National Panel of Assessors Grant Program Agreement 2018-2023 (the Grant Agreement). The NPA performance framework applies to SWS and OSA assessment services.

Workplace Modifications Scheme (WMS) assessments are managed through the JobAccess service in accordance with the performance and reporting requirements in the JobAccess Deed. In future, consideration will be given to including WMS assessments in this framework.

The department assesses the quality of service delivery through evidence of compliance with the Grant Agreement, the Employment Services Code of Practice and the Disability Employment National Panel Assessors Service Guarantee, using feedback, complaints, stakeholder satisfaction surveys, Post Program Monitoring surveys, evaluation and audit strategies, quality assurance projects and contract management.

Assessing quality of service delivery includes the following requirements:

* Panel Providers must act with due care and diligence when conducting all aspects of an Ongoing Support Assessment, especially when communicating with Disability Employment Services Participants.
* Developing respectful relationships with the parties to an assessment is an important part of service delivery. The Department will use feedback, complaints and results of satisfaction surveys to measure the behaviours of assessors when delivering the ongoing support assessment services.
* Ongoing Support Assessments can only be conducted by Approved Assessors with the required qualifications and experience. The Department may conduct quality assurance projects to check qualifications of Assessors and to check that assessments are completed by Approved Assessors.
* Services must be conducted at or above the minimum standards in the Code of Practice and the Service Guarantee, and the Panel Provider makes these documents available to Customers.
* Maintain a Customer feedback register, which needs to be made available to the department on request.
* Criminal records checks are completed for Personnel who conduct the Ongoing Support Assessment services.

Any changes in control of the Panel Provider’s organisation are reported to the department.

### NPA Performance Framework

The framework has been designed to aid performance and continuous improvement in the delivery of quality services to Participants. The following elements support the framework:

* a Service Guarantee reflecting the services that Participants can expect from providers
* a Code of Practice that reflects the Australian Government’s expectations of providers’ interactions with Participants, employers and each other
* the OSA quality framework, and
* performance discussions with DSS Account Managers.

### Key Objectives of the Framework

The NPA performance framework aims to deliver:

* assistance to contracted organisations to deliver highly effective assessment services to job seekers with disability
* assessment that measures provider performance and produces reliable evaluation data, and
* continuous performance improvement.

### Performance Management

The department will undertake evaluation activities for purposes of evaluating the assessment services, including the provider’s performance.

Providers will be able to access data about their own performance relative to the KPI measures. This data will be provided on a quarterly basis. The department will also conduct yearly performance reviews, more often if required, to provide the department’s views on where performance is good and where it can be improved. Where a provider is not performing well, the department will work with the provider to improve performance, including sharing best practice. Performance Reviews will normally be completed by phone and email.

Where a provider’s performance does not meet the KPIs, and is not subsequently improved, the department may reduce or stop the allocation of work orders to the provider. This is in accordance with Section 27 of the Grant Agreement.

### NPA Key Performance Indicators

The assessment of a provider’s performance is directly linked to the KPIs that are specified in the Grant Agreement. The business rules for measurement of OSA and SWS performance are outlined at Attachment A and Attachment B.

### Efficiency and Effectiveness

A provider’s performance evaluation will be based on the measurement of their performance against KPI1 and KPI2 as follows:

| KPI | Description | Measure |
| --- | --- | --- |
| KPI1 Efficiency | 1. Timeliness | 1. 90% of assessments are completed within the timeframes set out in the Grant Agreement. 2. 90% of allocated assessments are accepted by the Panel Provider. 3. Where Panel Providers reject allocated assessments, the Panel Provider provides acceptable reasons for all rejections. 4. Where the department has returned Assessment Reports to the Panel Provider for corrective action, all subsequent reports are finalised and submitted to the Department within five Business Days of receipt of request by the Panel Provider for SWS and OSA, and within 2 Business Days of receipt of request by the Panel Member for WMS. |
| KPI2 Effectiveness | 1. Accurate, individualised assessments 2. Thorough assessment reports | 1. Assessments are conducted in a manner that responds to the individual’s circumstances, measured by:   (i) the department sampling of assessment reports, and  (ii) taking into consideration where there is a higher than average level of appealed decisions that are overturned.   1. 90% of assessment reports sampled by the department are accepted as complete, without requiring further work. |

### Ongoing Support Assessments Quality Framework

Panel Providers are required to meet the KPIs in providing Ongoing Support Assessment Services. DSS will measure the Provider’s performance against the KPOIs taking into consideration:

* Deliverables specified in the Grant Agreement and Work Order
* each Assessment
* feedback, complaints and disputes, and
* performance audits conducted by DSS including customer satisfaction surveys

Ongoing Support Assessors are guided by the Ongoing Support Guidelines and the Ongoing Support Assessment guidelines when undertaking assessments. In addition, Ongoing Support Panel Providers are expected to deliver the services in accordance with other supporting documents listed under the reference documents section of the Framework.

In addition to the measurement of efficiency and effectiveness, **KPI 3 Quality** - the delivery of quality services, is managed through the OSA quality framework for providers of OSA services. The performance against KPI3 is measured as follows:

| KPI | Description | Measure |
| --- | --- | --- |
| KPI3 Quality | 1. Stakeholder satisfaction | DSS’s satisfaction with the delivery of the Services, as measured by performance data including results of stakeholder satisfaction surveys, feedback (including from other assessors subsequently assessing the same client) and complaints. |

The Ongoing Support Assessments Quality Framework enables the department to assess Panel Providers’ performance against KPI 3 in a fair and objective manner. The Framework provides the basis for assessing quality using three categories:

* Quality of Service Delivery
* Quality of Ongoing Support Assessment Reports
* OSA Provider Capability

Note: There is some overlap between the Quality Framework, the Performance Framework and the other KPIs, especially KPI 2 – Effectiveness, however, this overlap does not result in duplicated or unnecessary reporting. The Effectiveness KPI focuses on Ongoing Support Assessment delivery and reports and the quality of Ongoing Support Assessments and is a major part of ongoing support assessment services.

OSA service delivery is included under the OSA quality framework which emphasises the requirement on providers to act with due care and diligence, to ensure that Participants, Disability Employment Services (DES) providers and employers receive the services for which the provider is receiving payment. The department will assess this component through evidence of compliance with the Grant Agreement. Any non-compliance will be detected through program assurance and contract monitoring arrangements.

Issues identified in feedback from sources including quality assurance projects, evaluation activities, Post Program Monitoring survey, Fair Work Commission information, the National Customer Service Line (NCSL) and quality audits may also be taken into account when measuring provider performance against KPI 3.

The Department will give providers clear and timely feedback and the opportunity to consider and rectify issues raised. KPI 3 will also encourage the continuous improvement of service delivery.

### Quality of Ongoing Support Assessment Reports

An Ongoing Support Assessment Report should deliver a comprehensive, consistent and appropriate assessment of a Participant’s ongoing support that they require to maintain their current employment.

The department will regular audits of Ongoing Support Assessment Reports and reserves the right to change the frequency of the audits. A minimum sample of Assessment Reports will be quality audited by the department. Samples will be selected to ensure Assessment Reports completed by each Panel Provider are audited each six months.

Panel Providers will be given an Ongoing Support Assessment Audit Report within six weeks of the end of each quarterly reporting period, outlining the Assessment Reports that were audited, the results and any qualitative feedback that may be useful to consider in future assessments.

The three main areas which form the focus of the quality audits of Ongoing Support Assessment reports are comprehensiveness, consistency and appropriateness and are detailed below.

### Comprehensiveness

Each Ongoing Support Assessment Report should demonstrate that the Assessor has taken a thorough approach to gathering information from all relevant people including the DES Provider, the Employer, the Participant and an Advocate (if applicable), where the Participant has nominated an Advocate be involved.

Where the Assessment Report has excluded any components of an Ongoing Support Assessment, the Ongoing Support Assessor has obtained an exemption to exclude those components, and the Assessment Report further substantiates the reasons for the exclusion.

The quality audits of Assessment Reports will assess whether the following parts of the Assessment Report demonstrate a comprehensive gathering of evidence and comprehensive summary of the conclusions from the relevant part of the Assessment:

* Provider interview
* Participant interview
* Employer interview
* Workplace visit
* File summary

### Consistency

The quality audits will assess whether all parts of each Assessment Report are cohesive and where there are any inconsistencies between any parts of the Assessment Report, that there is acceptable explanation or reasons for the differences.

The Assessor must gather all available and relevant information and it will not always be the case that all parts of the assessment will be fully consistent, however, where there are important differences in views or information provided to the Assessor, the Assessment Report must adequately synthesise all relevant information so that the Assessment Summary contains no unsubstantiated or unexpected recommendations.

### Appropriateness

The Assessment Report clearly identifies the Participant’s ongoing support requirements including the type of support, frequency and amount.

The Assessment Report clearly articulates why the recommended future level of support is required to maintain the Participant’s current employment, and relates the nature of support to the Participant’s barriers to working independently in their current job.

The Assessment Report’s statements about the Participant’s support requirements and the support received are relevant to the requirements in the Ongoing Support Guidelines.

The Report and its recommendation demonstrate the Assessor understands the requirements of the Ongoing Support Guidelines and the Ongoing Support Assessment Guidelines.

The language used in the Assessment Report is appropriate, respectful and non-offensive.

### Quality of Panel Provider Capability

Quality of Assessment Services is influenced by the capabilities of the Organisation. The department assesses performance at an organisation level. National Panel of Assessors are contracted and administered at organisation level.

The department will provide ongoing support assessment data to assist Panel Providers to analyse, assess and continually improve their performance.

The department will include the following factors in its ongoing contract management arrangements of Ongoing Support Assessment Panel Providers:

* The Panel Provider complies with the Information Privacy Principles of the *Privacy Act 1988* to protect and respect the rights of individual Disability Employment Services Participants. The Panel Provider does not disclose personal information about Participants without their informed consent.
* The Panel Provider has management systems in place that facilitate quality management practices and continuous improvement.
* The Panel Provider has management systems in place to ensure that all Ongoing Support Assessors have appropriate skills and qualifications.
* The Panel Provider has systems in place to provide training, skills development including ensuring that they have completed the ECSN Learning Modules and they have read the relevant guidelines relating to the delivery of the assessment services.
* The Panel Provider demonstrates responsiveness to feedback received about its delivery of Assessment Services.
* The Panel Provider has management systems in place to identify any new and amended guidelines, IT systems or instructions related to Ongoing Support Assessment Services.
* The Panel Provider is aware of its responsibilities to manage its availability and capacity to deliver assessment services and to communicate with their contract manager, especially in relation to extensions of due dates for completion of assessments.

### Other Performance Information

In addition to the KPIs outlined in the Grant Agreement, the department considers all available information in assessing and monitoring performance.

### Performance Information for NPA Providers

#### Performance and Administrative Reporting

Administrative and performance data will be made available to providers through the provision of assessment management reports. This will allow providers to evaluate their performance and take appropriate action to improve servicing strategies and processes. Providers can use the reports to examine quantitative data relating to assessment timeliness, and rejection of assessment allocations.

#### Assessing Performance

The assessment management reports will allow providers to manage their performance against KPI1 requirements and to monitor this over time. This data will be at the national level.

The department is committed to monitoring and reviewing the Quality Framework to ensure that it is achieving its aim of delivering high quality disability employment services.

## 

### Attachment A – Ongoing Support Assessment (OSA) - Performance Evaluation Method

| Description | Measure | Evaluation Method |
| --- | --- | --- |
| 1. Timeliness | 1. 90% of assessments are completed within the timeframes set out in the Grant Agreement. | Percentage of submitted OSA Reports where the submitted date is on or before the OSA Due Date.  Note: If a Report was placed ‘Under Review’ then the original submission date is used, rather than the date the report was re-submitted. If an OSA Due Date is amended then the KPI is measured using the amended OSA Due Date. |
| 1. 90% of allocated assessments are accepted by the Panel Provider. | Percentage of allocated assessments accepted.  Note: Calculation will ignore Work Orders where the Rejection reason is ‘Conflict of Interest’ or ‘Outside Coverage Area’. |
| 1. Where Panel Providers reject allocated assessments, the Panel Provider provides acceptable reasons for all rejections. | Where a provider rejects a significant number (more than 10%) of allocated assessments, DEEWR will contact the provider to discuss the acceptability of the rejection reasons. |
| 1. Where DSS has returned Assessment Reports to the Panel Provider for corrective action, all subsequent reports are finalised and submitted to the Department within five Business Days of receipt of request by the Panel Provider. | Number of OSA Reports set to ‘Under Review’ for reason of ‘Requested by DSS’ and resubmitted more than 5 Business days later, where the reasons are outside the assessor’s control. E.g. the employee is unavailable. |
| 1. Accurate individualised assessments | 1. Assessments are conducted in a manner that responds to the individual with disability’s circumstances, measured by: 2. The Department sampling of assessment reports; and 3. taking into consideration where there is a higher than average level of appealed decisions that are overturned. | Outcomes of disputed OSA Reports requiring adjudication by the Department will be monitored.  Where a provider has had a significant number of disputed reports DEEWR will arrange a performance discussion to facilitate improvement, if required.  The Department will provide feedback to providers regarding disputed reports. |
| 1. Thorough assessment reports | 1. 90 per cent of assessment reports sampled by the Department are accepted as complete, without requiring further work. | Report quality will be assessed in accordance with the OSA quality framework using a checklist available to providers. |
| Acceptance of Work Orders | Providers must accept or reject each Work Order within one Business Day of receiving it. | Percentage of Work Orders accepted/not accepted within one Business Day of allocation. |

### Attachment B – Supported Wage System (SWS) - Performance Evaluation Method

| Description | Measure | Evaluation Method |
| --- | --- | --- |
| * 1. Timeliness | 1. 90% of assessments are completed within the timeframes set out in the Grant Agreement. | Percentage of submitted SWS Reports where the submitted date is on or before the SWS Contract End Date.  Note: If a SWS Contract End Date is amended in response to a Panel Provider request then the KPI is measured using the amended OSA Due Date. |
| 1. 90% of allocated assessments are accepted by the Panel Provider. | Percentage of allocated assessments accepted. |
| 1. Where Panel Providers reject allocated assessments, the Panel Provider provides acceptable reasons for all rejections. | Number of allocated assessments not accepted, without an acceptable reason.  Where a provider does not accept an allocated assessment, the Department will consider the acceptability of the reason provided. The Department will contact the provider for clarification if the reason provided does not appear acceptable. |
| 1. Where DEEWR has returned Assessment Reports to the Panel Provider for corrective action, all subsequent reports are finalised and submitted to the Department within five Business Days of receipt of request by the Panel Provider. | Number of SWS Reports declined by the Department and re-submitted by the provider greater than five Business Days later, where the reasons are outside the assessor’s control. E.g. the employee is unavailable. |
| * 1. Accurate individualised assessments | 1. Assessments are conducted in a manner that responds to the individual with disability’s circumstances, measured by: 2. DEEWR sampling of assessment reports; and 3. taking into consideration where there is a higher than average level of appealed decisions that are overturned. | DEEWR will review submitted SWS Reports, and all reported feedback and complaints about SWS assessments.  Where a provider has had a significant number of disputed reports DEEWR will arrange a performance discussion to facilitate improvement, if required. |
| * 1. Thorough assessment reports | 1. 90 per cent of assessment reports sampled by DEEWR are accepted as complete, without requiring further work. | Percentage of SWS Reports accepted by DEEWR as being of acceptable quality, not requiring further work. If a SWS Report is declined by DEEWR due to an error or omission then the Report is considered to require further work. |
| Acceptance of Work Orders | Providers must accept or reject each Work Order within one Business Day of receiving it. | Percentage of Work Orders accepted/rejected within one Business Day of allocation. |