| Standard | Indicator of Practice | Examples of Evidence for NDAP agencies |
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| Standard 1: Rights The service or program promotes individual rights to freedom of expression, self-determination and decision-making and actively prevents abuse, harm, neglect and violence. | The service or program, its staff and its volunteers treat individuals with dignity and respect. The service or program, its staff and its volunteers recognise and promote individual freedom of expression. The service or program supports active decision-making and individual choice, including the timely provision of information in appropriate formats to support individuals, families, friends and carers to make informed decisions and understand their rights and responsibilities. The service or program provides support strategies that are based on the minimal restrictive options and are contemporary, evidence-based, transparent and capable of review. The service or program has preventative measures in place to ensure that individuals are free from discrimination, exploitation, abuse, harm, neglect and violence. The service or program addresses any breach of rights promptly and systemically to ensure opportunities for improvement are captured. | All agencies Observations of the way advocates and agency staff talk and write about people with a disability. Feedback from people with disability who receive advocacy support about the attitude of agency staff to people with a disability. Feedback from external observers on the attitudes of the advocacy agency to people with disability. Evidence of staff knowledge/learning about human and legal rights. Evidence of advocacy agency activities to promote and uphold the legal and human rights of people with disabilities on either an individual or systemic basis. Observations of the way advocates interact with people with disability in making decisions about advocacy activities. Individuals are satisfied that they are provided timely information in suitable formats, and that the agency supports their decision-making and choice. Records show that staff participates in learning and development activities aimed at understanding contemporary practice frameworks (including minimal restrictive options internally and externally) and improving practice. Staff knowledge and skills in recognising and reporting criminal activities, abuse and neglect. Agency management and staff can provide practical examples of how they act to prevent abuse and neglect – (e.g. an outreach program which seeks out people with disability who are abused or neglected and who would not normally come to the attention of other agencies; community education to raise awareness about abuse of people with disabilities and strategies to prevent and respond to it, etc.). Documented and implemented policies and procedures around responding to/reporting in situations of abuse and neglect. Examples could include a flow chart on who to notify and/or stages of reporting sequence/steps. Documented and implemented policies and procedures reflect prevention of abuse that could occur internal to the agency and external to the agency. Eviden |

National Standards for Disability Services Indicators of Practice and Examples of Evidence for NDAP agencies

| 1.8 | individuals with information, and if needed, access to legal advice and/or advocacy. The service or program recognises the role of families, friends, carers and advocates in safeguarding and upholding the rights of people with disability. The service or program keeps personal information confidential and private. | decisions about advocacy activities. Evidence of the involvement of people with disability in agency decision-making (e.g. representation on the Board, participation in consultations that feed into agency's strategic plan or lead to improve practices, involvement in surveys that inform agency policies and procedures). Documented and implemented practices and policies for promotion and communication of agency aims and objectives with people with disability who receive advocacy support and stakeholders. Documented and implemented policies and practice of responding to the information needs of people with disabilities/families and providing referrals as appropriate. Reviews of agency management systems involving service users (e.g. people with disability who receive advocacy support, family members, citizen advocates) – including documented annual self assessments and continuous improvement plans. Observation of information, strategies and ideas presented to people with disabilities and families in ways that they can understand. Documented and implemented policies and practice of responding to the information needs of people with disabilities/families and providing referrals as appropriate. Evidence of practice of supporting/educating people with disabilities to advocate for themselves and/or of supporting/educating families to advocate on their behalf. Clear privacy policy ensuring compliance with relevant State/Territory and Federal legislation. Documented and implemented practices and policies for obtaining consent where relevant and possible, examples could include consent to use photographs for publicity or to share information. Confidential information afely stored e.g. locked filing cabinets. Staff [and volunteers and contractors] sign confidentiality agreements. Evidence that information about right to privacy is provided to people with disabilities and their families when they receive advoc |
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| | | Ethics guidelines for supporting people with disability in making decisions about advocacy activities. Feedback from people with disability who receive advocacy support about the |
| | | attitude of agency staff to people with disability. |

| Practice of recruiting advocates for people with a disability who are isolated and otherwise vulnerable, in order to ensure their protection of human rights and freedom from abuse, consistent with the mission of Citizen Advocacy. Content and practice of orientating advocates to their role in ensuring the protection of the human rights, and prevention from abuse, of peoples with a disability. Practice of supporting advocates in their role of ensuring the protection of the human rights, and prevention from abuse, of people with a disability. Content and practice of orienting advocates to the importance of recognising and respecting the right of people with disability to privacy, dignity and confidentiality. Evidence of induction and or training that orientates advocates to the need to support people with a disability, where appropriate, to make decisions and choices. Practice of supporting advocates to facilitate the process, where appropriate, of decisions and choices made by people with disability. Evidence of feedback gained from people with disability about how they are supported to make their choices. Documented and implemented policies and practices for developing and implementing individual advocacy plans in partnership with people with disability and/or their families/guardians (as appropriate). |
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| Documented and implemented practices and policies for reviewing the extent to which the needs of the person with a disability are being met. |
| Agencies undertaking family advocacy |
| Documented and implemented practices and policies for encouraging families to obtain the approval of the person with disability before sharing information about the person with disability in the pursuit of advocacy efforts, where appropriate. Documented and implemented practices and policies for encouraging families to include the views of the person with disability in advocacy efforts where appropriate. |
| Agencies undertaking individual advocacy/legal advocacy |
| Ethics guidelines for supporting people with disability in making decisions about advocacy activities. |
| • Procedures are established and implemented for the regular review of advocacy actions and these require review of the extent to which the agency promotes the person's choices and decisions. |
| Feedback is sought from people with disability on the extent to which the agency promotes choice and decision making. |

| | | Documented and implemented practices and policies for determining a decision on behalf of a person who has impaired decision making capacity e.g. consultation with them, documenting factors taken into account including knowledge gathered over time. Agencies undertaking systemic advocacy Documented and implemented practices and policies that demonstrates that people with disabilities influence decision making about advocacy activities. Observations of individual people with disability and/or their families becoming involved in systemic advocacy activities of their choice. Ethical guidelines inform systemic advocacy policy and practice. |
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| Standard 2: Participation and Inclusion The service or program works with individuals and families, friends and carers to promote opportunities for meaningful participation and active inclusion in society. | The service or program actively promotes a valued role for people with disability, of their own choosing. The service or program works together with individuals to connect to family, friends and their chosen communities. Staff of the service or program understand, respect and facilitate individual interests and preferences, in relation to work, learning, social activities and community connection over time. Where appropriate, the service or program works with an individual's family, friends, carer or advocate to promote community connection, inclusion and participation. The service or program works in partnership with other organisations and community members to support individuals to actively participate in | Details of public speaking at conferences, lectures and professional gatherings to promote a positive image of people with disabilities. Examples of issues raised or referrals made to systemic advocacy agencies and/or other agencies and authorities. Examples of activities and issues that the agency engages in that supports the valued status of people with a disability. Purpose statement that makes it clear that the agency seeks to promote participation and inclusion. People with disability connected to the organisation report that they feel valued and |

| 2.6 The strat | • • • • • • • • • • | Documented and implemented policies and practice of responding to the information needs of people with disabilities/families and providing referrals as appropriate. Management, staff and volunteer training in recognising and dealing with conflicts of interest. Agency policy on conflict of interest. Documented and implemented practices and policies for identifying and transparently dealing with conflicts of interest that arise for the organisation, Board and staff, for example, a Conflict of Interest register maintained for staff and Boards of Management, or evidence in minutes of a standing agenda item that flags the need to declare any conflict of interest. Written and communicated policy is in place that outlines the approach to working with family, friends and carers in the delivery of advocacy supports. Records show an active network of collaboration with other agencies aimed at supporting employment, learning, social activities and chosen communities. Examples of how the agency has taken into account the specific needs of people from Indigenous and CALD backgrounds, people with specific disabilities such as hearing impairment, people with literacy difficulties. Interpreters are provided where requested or where a need is identified. Evidence of staff participation in anti-discrimination and cultural awareness training and/or evidence of links with relevant specialist agencies as appropriate, such as MOUs or participation in joint projects with multicultural or indigenous advocacy agencies. Written and communicated policy is in place that outlines an organisation-wide commitment to supporting Aboriginal and Torres Strait Islander culture. Agency information is available in languages that are appropriate for Aboriginal and Torres Strait Islander individuals and their families, friends and carers. |
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| | | agency. |
| | • | Citizen advocacy orientation documentation includes information about valued |

| status and what this means in practice. |
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| Observation that community participation is covered in citizen advocate orientation. |
| Practice of recruiting advocates who—by virtue of being non-service, "ordinary" |
| members of the community—can facilitate the participation and integration of |
| people with a disability. |
| Content and practice of orienting advocates to their potential role in facilitating the participation and integration of people with a disability. |
| Independent evaluations of practices for developing the capacity of citizen advocates to assist people with disability meet their advocacy objectives. |
| Agencies undertaking individual advocacy/legal advocacy |
| Evidence of advocacy taken on behalf of individual people with disabilities aimed at increasing their participation and inclusion in the community. |
| Documented and implemented policies and practices for developing and implementing individual advocacy plans in partnership with people with disability and/or their families/guardians (as appropriate). |
| Evidence of collecting and reviewing feedback about the extent to which the needs of the person with a disability are met. |
| Agencies undertaking family advocacy /systemic advocacy/ self advocacy |
| Examples of events /activities hosted or engaged in which promote the inclusion of people with disabilities as valued and contributing members of community. |
| • Examples of evaluation forms from events or activities hosted by the organisation. |
| Agencies undertaking self advocacy |
| Observations of people with disabilities receiving support to develop advocacy action plans to address their wishes, needs or goals. |
| Agencies undertaking systemic advocacy |
| Documented and implemented practices and policies showing how people with disabilities influence the choice of advocacy objective. |
| Evidence of reporting of outcomes / review of advocacy process. |
| Evidence of advocacy plan, actions taken and people/agencies involved, or file notes detailing progress or justification for not having a plan in place. |
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| Outcomes Services and supports are assessed, planned, delivered and reviewed to build on individual strengths and enable individuals to reach their goals. | 3.1 The service or program works together with an individual and, with consent, their family, friends, carer or advocate to identify their strengths, needs and life goals. 3.2 Service planning, provision and review is based on individual choice and is undertaken together with an individual and, with consent, their family, friends, carer or advocate. 3.3 The service or program plans, delivers and regularly reviews services or supports against measurable life outcomes. 3.4 Service planning and delivery is responsive to diversity including disability, age, gender, culture, heritage, language, faith, sexual identity, relationship status, and other relevant factors. 3.5 The service or program collaborates with other service providers in planning service delivery and to support internal capacity to respond to diverse needs. | All agencies Evidence of practice of supporting/educating people with disabilities to advocate for themselves and/or of supporting/educating families to advocate on their behalf. Examples of how the agency has taken into account the specific insedilities such as hearing impairment, people with literacy difficulties. Interpreters are provided where requested or where a need is identified. Agency promotional material that makes it clear the extent, if at all, the agency provides training and support. Documented and implemented policies and practice of responding to the information needs of people with disabilities/families and providing referrals as appropriate. Agency policy on conflict of interest. Documented and implemented practices and policies for identifying and transparently dealing with conflicts of interest that arise for the organisation, Board and staff, for example, a Conflict of Interest register maintained for staff and Boards of Management, or evidence in minutes of a standing agenda item that flags the need to declare any conflict of interest. Monagement, staff and volunteer training in recognising and dealing with conflicts of interest. Documented and implemented non-discriminatory practices and policies for identifying and/or responding to requests for information, referral and/or advocacy support. Examples of how the agency has taken into account the specific needs of people from Indigenous and CALD backgrounds, people with specific disabilities such as hearing impairment, people with relevant specialist agencies as appropriate, such as MOUs or participation in joint projects with multicultural avareness training and/or evidence of links with relevant specialist agencies as appropriate, such as MOUs or participation in joint projects with multicultural or indigenous advocacy agencies. Examples of barriers to community participation being raised with other agencies and authorities for the |
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| supporting advocacy outcomes which may include employment, learning, social |
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| activities and community connection. |
| Management, staff and volunteer training in recognising and dealing with conflicts of interest. |
| Agency policy on conflict of interest. |
| • Documented and implemented practices and policies for identifying and transparently dealing with conflicts of interest that arise for the organisation, Board and staff, for example, a Conflict of Interest register maintained for staff and Boards of Management, or evidence in minutes of a standing agenda item that flags the need to declare any conflict of interest. |
| Agencies undertaking individual advocacy/ legal advocacy |
| Documented and implemented policies and practices for developing and implementing individual advocacy plans in partnership with people with disability and/or their families/guardians (as appropriate). |
| Evidence of collecting and reviewing feedback about the extent to which the needs of the person with a disability are met. |
| • Documented and implemented entry and exit policies and procedures highlighting non-discriminatory practice, which may include ongoing access for people with disability who receive advocacy support after their issue/case is closed. |
| Agencies undertaking self advocacy |
| Observations of people with disabilities receiving support to develop advocacy action plans to address their wishes, needs or goals. |
| Agencies undertaking systemic advocacy |
| Documented and implemented practices and policies showing how people with disabilities influence the choice of advocacy objective. |
| Evidence of reporting of outcomes / review of advocacy process. |
| Evidence of advocacy plan, actions taken and people/agencies involved, or file notes detailing progress or justification for not having a plan in place. |
| Policies and procedures to address how the agency selects and prioritises the systemic issues it addresses. |
| Agencies undertaking citizen advocacy |
| Documented and implemented practices and policies for developing confidential individual written profiles detailing 'need' and seeking advocates based on their skills in relation to these needs. |

| | | Observations of individual being given opportunity to discuss their advocacy needs and advocate role. Details of completed relationships, and/or those being rematched or awaiting rematching. Documented and implemented practices and policies for reviewing the extent to which the needs of the person with a disability are being met. Practice of one-to-one (or near one-to-one) matching of people with a disability with advocates to ensure that the individual needs of the person with the disability remains the focus of the advocacy relationship. Practice of recruiting advocates whose role is strictly voluntary, thereby avoiding any conflicts of interest arising from receipt of monetary and/or in-kind payments. Regular opportunities for the staff and board of management to avail themselves of Citizen Advocacy-related training, including participation in the independent evaluation of other Citizen Advocacy agencies, as a means to enhance conceptual and practical knowledge. |
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| Standard 4: Feedback and Complaints Regular feedback is sought and used to inform individual and organisation wide service or program reviews and improvement. | 4.1 Individuals, families, friends, carers and advocates are actively supported to provide feedback, make a complaint or resolve a dispute without fear of adverse consequences. 4.2 Feedback mechanisms, including complaints resolution and how to access independent support, advice and representation, are clearly communicated to individuals, families, friends, carers and advocates. 4.3 Complaints are resolved together with the individual, family, friends, carer or advocate in a proactive and timely manner. 4.4 The service or program seeks and, in conjunction with individuals, | All agencies Documented complaints policy and procedures. Documented and implemented practices and policies for investigating and resolving complaints – cover both internal and external complaints resolution mechanisms, including the Complaints Resolution and Referral Service (CRRS). File review demonstrates that the agency completes complaints investigations in accordance with its complaints procedures. People with disability who access the advocacy agency are provided with information about the agency's complaints policy and procedures. The agency reviews its complaints policy, procedures, processes and practices to ensure implementation is appropriate to complainants. Service user feedback about the complaints mechanism. Complaints register. Reviews of agency management systems involving service users (e.g. people with disability who receive advocacy support, family members, citizen advocates) – including documented annual self assessments and continuous improvement plans. Evidence of the involvement of people with disability in the agency's quality assurance activities. Individuals, families, friends and carers report a willingness to provide feedback, |

| | families, friends, carers and advocates, reviews feedback on service provision and supports on a regular basis as part of continuous improvement. 4.5 The service or program develops a culture of continuous improvement using compliments, feedback and complaints to plan, deliver and review services for individuals and the community. 4.6 The service or program effectively manages disputes. | including negative feedback or complaints. Individuals, families, friends and carers report active support when providing feedback, making a complaint or dealing with a dispute. Records show regular organisation-wide consultation processes and activities involve people with disability, families, friends, carers and advocates e.g. annual surveys, planning events, focus groups, and advisory committees. |
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| Standard 5: Service Access The service or program manages access, commencement and leaving a service in a transparent, fair and equal and responsive way. | 5.1 The service or program systematically seeks and uses input from people with disability, their families, friends and carers to ensure access is fair and equal and transparent. 5.2 The service or program provides accessible information in a range of formats about the types and quality of services available. 5.3 The service or program develops, applies, reviews and communicates commencement and leaving a service processes. 5.4 The service or program develops, applies and reviews policies and practices related to eligibility criteria, priority of access and waiting lists. 5.5 The service or program monitors and addresses potential barriers to | All Agencies Purpose statement that makes it clear who the agency works with to promote, protect and defend the welfare of and justice for people with disability. Evidence of staff participation in anti-discrimination and cultural awareness training and/or evidence of links with relevant specialist agencies as appropriate, such as MOUs or participation in joint projects with multicultural or indigenous advocacy agencies. Evidence that the organisation is aware of demographic information/ABS statistics and match of this to the profile of people with disability who receive advocacy support. Documented and implemented non-discriminatory practices and policies for identifying and/or responding to requests for information, referral and/or advocacy support. Agency management and staff can provide practical examples of how they operate to ensure they are as free as possible from things that conflict with the best interests of people with disability. Policies and procedures include referral to another agency if required to prevent a conflict of interest. Agency policy on conflict of interest. Documented and implemented practices and policies for identifying and transparently dealing with conflicts of interest register maintained for staff and Boards |

| | access. | need to declare any conflict of interest. |
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| 5.6 | The service or program provides | Management, staff and volunteer training in recognising and dealing with conflicts of interest. |
| | clear explanations when a service is not available along with information | Observation of information, strategies and ideas presented to people with disabilities and families in ways that they can understand. |
| | and referral support for alternative access. | Documented and implemented policies and practice of responding to the information needs of people with disabilities/families and providing referrals as |
| 5.7 | The service or program collaborates | appropriate. |
| | with other relevant organisations and community members to establish and maintain a referral network. | Reviews of agency management systems involving service users (e.g. people with disability who receive advocacy support, family members, citizen advocates) – including documented annual self assessments and continuous improvement plans. |
| | | Evidence that the feedback from people with disability who receive advocacy support is used to influence the development of policies, procedures and practice of the agency. |
| | | Examples of issues raised or referrals made to systemic advocacy agencies and/or other agencies and authorities. |
| | | Individuals, families, friends, carers and (other) advocates report their involvement in providing feedback about access to advocacy support, including barriers to access. |
| | | Records show the involvement of individuals, families, friends and carers in the development and review of information according to their needs. |
| | | Information, in appropriate formats, is provided to individuals, families, friends and carers, and where appropriate, advocates, on the processes for commencement and finalisation of advocacy support. |
| | | Management and staff can identify potential barriers to access for advocacy support and describe how these have been addressed. |
| | | Records indicate the agency is an active member of referral networks. |
| | | Agencies undertaking individual advocacy/ legal advocacy |
| | | • Documented and implemented entry and exit policies and procedures highlighting non-discriminatory practice, which may include ongoing access for people with disability who receive advocacy support after their issue/case is closed. |
| | | Agencies undertaking systemic advocacy |
| | | Documented and implemented practices and/or policies for deciding and communicating which systemic issues the agency will work on. |
| | | Documented and implemented practices and policies showing how people with |

| | | disabilities influence/contribute to the prioritising processes that determine which issues receive attention. Agencies undertaking citizen advocacy Annual protégé recruitment plan that reflects diversity and level of vulnerability of people with disability. Consistent practice of "seek-out" recruitment of people with a disability who need advocacy, but who would not ordinarily come to the attention of the agency if it relied solely on (self- or other-initiated) referrals. Established Advisory Support Group (e.g. Sub-Committee), which can assist in the implementation of the appropriate Protégé entry and exit policies and procedures. Practice of recruiting advocates whose role is strictly voluntary, thereby avoiding any conflicts of interest arising from receipt of monetary and/or in-kind payments. |
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| Standard 6: Service Management The service or program has effective and accountable service management and leadership to maximise outcomes for individuals. | 6.1 Frontline staff, management and governing bodies are suitably qualified, skilled and supported. 6.2 Practice is based on evidence and minimal restrictive options and complies with legislative, regulatory and contractual requirements. 6.3 The service or program documents, monitors and effectively uses management systems including Work Health Safety, human resource management and financial management. 6.4 The service or program has monitoring, feedback, learning and reflection processes which support continuous improvement. 6.5 The service or program has a clearly communicated organisational vision, mission and values which are consistent with contemporary | |

| | practice. | Documented policy on agency independence. |
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| 6.6 | The service or program has systems to strengthen and maintain organisational capabilities to directly support the achievement of individual goals and outcomes. | Agency management and staff can provide practical examples of how they operate to ensure they are as free as possible from things that conflict with the best interests of people with disability. Policies and procedures include referral to another agency if required to prevent a conflict of interest. Evidence of the involvement of people with disability in the agency's quality assurance activities. Minutes of management committee meetings. Documented roles and responsibilities of management committee office bearers. Evidence of the involvement of people with disability in agency decision-making (e.g. representation on the Board, participation in consultations that feed into agency's strategic plan or lead to improve practices, involvement in surveys that inform agency policies and procedures). Evidence that the feedback from people with disability who receive advocacy support is used to influence the development of policies, procedures and practice (such as database searches or information exchange with similar agencies/services). Records show that staff participates in learning and development activities aimed at understanding contemporary practice frameworks (including minimal restrictive options) and improving practice. |
| | | understanding contemporary practice frameworks (including minimal restrictive |
| | | Regular Work Health Safety audits are undertaken to identify potential safety hazards, ensure issues are addressed and inform continuous improvement. |
| | | Written policies and procedures are in place and followed for financial management, including administration, delegation, approvals and other obligations (e.g. funding agreements). |
| | | • A range of consultation approaches are developed and implemented that meet the unique needs of people with disability, families, friends, carers and advocates. |
| | | Agencies undertaking individual advocacy/ legal advocacy |
| | | Evidence of collecting and reviewing feedback about the extent to which the needs of the person with a disability are met. |
| | | Procedures are established and implemented for the regular review of advocacy actions and these require review of the extent to which the agency promotes the person's choices and decisions. |

| Agencies undertaking citizen advocacy |
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| Independent evaluations of practices for developing the capacity of citizen advocates to assist people with disability meet their advocacy objectives. |
| Regular opportunities for the staff and board of management to avail themselves of Citizen Advocacy-related training, including participation in the independent evaluation of other Citizen Advocacy agencies, as a means to enhance conceptual and practical knowledge. |
| Agencies undertaking systemic advocacy Documented and implemented practices and policies that demonstrates that people with disabilities influence decision making about advocacy activities. |