

Homelessness Accreditation Framework: Addendum 1 – Accreditation background

Background to the Homelessness Accreditation Framework

How does accreditation support the commissioning process?

Commissioning focuses on achieving the best possible outcomes for clients in the most efficient, effective and sustainable way. We do this by collaborating with our partners to design, deliver and manage the services which best address our clients' needs. One aim of commissioning is to improve overall quality and apply more rigour to the design and delivery of our programs.

DCJ is moving towards commissioning for outcomes for homelessness services. This approach shifts the emphasis from the services a provider offers to the outcomes they achieve for their clients. The aim is to drive continuous improvement and demonstrate how services are delivering outcomes for clients.

An effective quality system needs to be embedded in the commissioning for outcomes approach to:

- promote fair access and consistent services, and
- achieve long term, positive, sustainable outcomes for clients.

Details about the move to commissioning for outcomes are available on the [DCJ website](#).

What are the benefits of accreditations?

The implementation of accreditation in NSW brought the homelessness sector in line with other sectors¹. It also delivers the following benefits:

- Provides a framework for providers to ensure systems are in place that support good service provision for staff, clients and stakeholders
- Provides clients with confidence that services are at an acceptable quality level with continuous improvement
- Increases the capability of providers while supporting greater organisational efficiency
- Provides tools to improve performance, outcomes, and quality assurance
- Builds a strong culture of quality across the homelessness sector
- Reduces organisational risk and supports greater sustainability of the sector.

¹ Such as community housing, disability and out-of-home care

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How did DCJ select the approved standards and accreditation programs?

- In April 2018, the DCJ Housing and Homelessness Strategy Steering Committee endorsed the adoption of accreditation for DCJ-funded homelessness providers. The ASES accreditation was initially selected as the preferred accreditation and quality improvement program because it was supported by the sector and peaks.
- The ASES is a set of standards and a national quality improvement program that aims to assist non-government organisations to improve their business systems, management practices and service delivery. The ASES are owned by the South Australian Government but have been adopted nationally across a range of human services and health programs. DCJ worked closely with the Department of Human Services South Australian (DHS SA) to implement the standards in NSW.
- A wide range of organisations in the community services sector use the ASES including homelessness, mental health, low-income support agencies, employment agencies, health, and community centres. The ASES can be implemented in any size organisation.
- The ASES also built on work already conducted by providers. When compared to other sets of standards, the ASES was most similar² to the SHS Standards that providers were familiar with.
- In November 2020, DCJ announced that the QIC Health and Community Standards (QIC) delivered by Quality Innovation Performance Limited (QIP) were recognised as equivalent to the ASES. Providers could then gain accreditation against the QIC as an alternative to the ASES. The QIC maps well to the ASES and is also accepted alongside the ASES in other areas such as Alcohol and Other Drug services³ and in other jurisdictions.
- In July 2023, DCJ made the decision to recognise the Evaluation and Quality Improvement Program (EQulP) by the Australian Council on Healthcare Standards (ACHS) to further align with the Department of Health NSW (DOH). This decision was informed by consultation with the Centre for Alcohol and Other Drugs, DOH.
- The Accreditation Alliance Australia–New Zealand (AAA-NZ) Quality Standards for Community Based Services by the Te Wana Trust were also adopted in July 2023 based on independent equivalency mapping which determined they were highly equivalent to the ASES. Consideration was given to the AAA-NZ based on the request of Aboriginal Community-Controlled Organisations (ACCOs) entering the homelessness service system.
- DCJ has established formal relationships with DHS SA, QIP and the Te Wana Trust that are guided by letters of exchange which outline joint responsibilities and information sharing protocols.

² Until recently, the ASES and the SHS Standards mapped perfectly to each other. But because the ASES is continually being reviewed and updated, there are now some additional requirements to achieving ASES accreditation when compared to meeting the SHS Standards.

³ [Organisation Accreditation for Alcohol and Other Drug Services - Fact Sheet](#)

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How was the implementation process informed by the ASES accreditation pilot?

The first stage of implementation commenced in the second half of 2018 through an accreditation pilot. The pilot was coordinated by Homelessness NSW in partnership with DCJ and DHS SA. This pilot involved nine providers⁴ going through the accreditation process and they provided feedback on their experience. DCJ Contract Managers also participated and tested the processes and resources available to them.

To test the accreditation process, DCJ and Homelessness NSW ensured a mix of providers participated. The pilot providers provided feedback on:

- **Resources:** Existing resources, including ASES evidence guides. Suggestions made through the pilot aligned the evidence guides to the NSW homelessness context.
- **Support:** The support requirements for different services to progress through the accreditation process. This included costs, staff skills and other resources. The pilot also considered the support required by subcontractors and the usefulness of the support provided by mentors from South Australia.
- **Gaps:** Any additional resources/ training required for any of the stakeholders.
- **Processes:** Their experience of going through the process of ASES accreditation. Pilot providers were used for case studies. Their experience also informed the development of ASES processes for the NSW context.

⁴ Originally 10 providers