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# Introduction

The Human Services Quality Framework (HSQF) is a system for assessing and improving the quality of human services.

The HSQF incorporates:

* A set of quality standards, known as the Human Services Quality Standards (the Standards), which cover the core elements of human service delivery.
* An assessment process to measure the performance of service providers against the standards (either independent third-party certification, self-assessment or recognition of accreditation under another approved quality system).
* A continuous improvement framework, which supports the participation of people who use services in quality improvement.

The HSQF was developed by the Queensland Government in collaboration with the non-government sector to increase consistency in service quality, ensure public confidence in service delivery and maintain important safeguards for people who use services. It is designed to reduce duplication and red tape for human service organisations seeking to demonstrate continuous quality improvement thus allowing those organisations to focus their resources on service provision.

Participation in the HSQF offers benefits for all parties:

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| **People using services, families and carers** | **Human service organisations** | **Government** |
| * Access to better, more reliable services * Greater focus on individual rights * Confidence in the organisation’s systems and processes * Opportunity to contribute to service improvement | * A clear and consistent framework for planning, operating and improving services * Reduction in administrative burden and compliance costs * A holistic assessment of the organisation’s systems and processes * The opportunity to position the organisation to deliver services in other areas of human services | * A streamlined, consistent process to monitor the quality of services funded by government * Increased confidence in government investment in services * Improved public accountability |

## This booklet

This booklet describes how the HSQF applies to in-scope organisations and services.

**Part 1** contains information about the:

* organisations in-scope of the HSQF and options for out-of-scope organisations and service types
* quality pathways to assess performance against the standards and how these apply to in-scope organisations
* resources available to support organisations.

**Part 2** outlines the standards.

**Part 3** provides detailed information about the quality pathways for all services in-scope of the HSQF.

**Part 4** provides information about the funding thresholds that apply to some organisations.

In this booklet, the following terms are used:

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| ***Audit*** | Assessment by a third-party auditor/certification body (CB) of an organisation’s performance against the standards. |
| ***Demonstrate performance against the standards*** | Showing the extent to which the human service organisation is complying with the requirements contained within the Human Services Quality Standards. Also referred to as demonstrating compliance with the standards. |
| ***HSQF Operations team*** | The Queensland Government team, located in the Department of Child Safety, Seniors and Disability Services (DCSSDS), that is responsible for administering the HSQF. |
| ***Organisation*** | The legal entities, including non-government organisations, that deliver human services funded by a Queensland Government department.  Organisation may also be used interchangeably with ‘human service organisation’, ‘non-government organisation (NGO)’, ‘funded organisation’, ‘provider’ or ‘supplier’. |
| ***Participating Queensland Government department*** | Queensland Government departments that are approved to utilise the HSQF for all or some of the non-government human services they fund. |
| ***Quality pathway*** | Quality pathway, or demonstration method, is the method that a human service organisation uses to demonstrate that it is complying with the requirements contained within the standards. Quality pathway may be used interchangeably with ‘demonstration method’. |
| ***Service stream*** | A broad category of service delivery in-scope of the HSQF such as, but not limited to, Community Services, Seniors Services, Child and Family Services and Disability Services. |
| ***Service/service type*** | A care, support activity, class of supports or service provided by a human service organisation. Service types are listed by service stream in Part 3 of this document. |

All website links are current at the time of publication. It is acknowledged that these may change - any changes will be reflected in future versions. If a link is not accessible, please access the materials via the relevant department website, or via a search engine.

# Part 1 – Scope and application of HSQF

## Organisations in-scope of the HSQF

The HSQF applies to a range of human service organisations as described below.

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| **1** | Organisations funded by participating Queensland Government departments (excluding Queensland Health) |
| The HSQF is required to be implemented by:   * Organisations funded to deliver human services under service agreements, or other specified arrangements[[1]](#footnote-1), with the following three participating Queensland Government departments: * Department of Child Safety, Seniors and Disability Services (DCSSDS) * Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities and the Arts (DTATSIPCA) * Department of Justice and Attorney-General (DJAG) * Organisations funded by DCSSDS to deliver child protection placement services in-scope of licensing under an Individualised Placement and Support (IPS) Agreement[[2]](#footnote-2). * Disability services delivered directly by DCSSDS through Accommodation Support and Respite Services.   All organisations funded by these departments are required to deliver human services in compliance with the standards. Some organisations are required to demonstrate their compliance with the standards through the applicable quality pathway specified in Part 3. | |
| The contractual requirement to comply with the HSQF is specified in:  For services delivered under a Service Agreement:   * Clause 3.3 of the *Service Agreement – Standard Terms* and clauses 4.1 to 4.8 of the *Service Agreement – Funding and Service Details*, and/or * Clause 4.1 of the *(Short Form) Terms and Conditions* and clause 7 of *Particulars (Service Provision)*, and/or * Notification or variation to agreement.   For services delivered under an *Individualised Placement and Support Agreement*:   * Clause 5 of the *Terms and Conditions* of the *Individualised Placement and Support Agreement*.   For licensed care services, it is a condition of the care service licence to comply with and maintain HSQF Certification. | |

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| **2** | Organisations funded by Queensland Health |
| The HSQF is available to some organisations funded by Queensland Health to deliver services listed in Part 3. | |
| Organisations that have been advised by Queensland Health they can use HSQF certification to meet quality requirements for the Queensland Health services listed in Part 3 may include those services in their HSQF audit/certification processes. | |

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| **3** | Other organisations and out-of-scope services |
| Organisations can apply to use the HSQF certification process for services not listed in Part 3 of this booklet (out-of-scope services) delivered in Queensland, however this is subject to prior approval from HSQF Operations. | |
| Organisations that deliver services out-of-scope of HSQF, even if they hold existing HSQF certification for in-scope services, must have prior approval from the relevant funding department and HSQF Operations before bringing out-of-scope services into their HSQF certification.  To apply the organisation seeks approval from their funding department to include the services in HSQF certification and provides evidence of this approval to their certification body.  The certification body forwards the request to the HSQF Operations detailing the:   * name of the organisation * current certification status of organisation * date and type of next audit (or estimated date if not yet booked) * service type name/s and funding department of the out-of-scope services * funding department’s approval that the services can be included in HSQF certification * name and contact details for an officer in the funding department.   HSQF Operations will review requests and advise an outcome within 10 business days. Audit planning should not be finalised until approval is provided.  Note: No approval is required to implement the standards or to self-assess against the standards. | |

## Quality pathways – overview and general information

There are three pathways for demonstrating performance, or compliance, with the standards:

1. Certification.
2. Self-assessment.
3. Evidence of accreditation under another approved quality system.

The quality pathway that applies to an organisation is based on the:

* type and complexity of services provided
* vulnerability of people using services
* level of Queensland Government investment in service delivery
* specific departmental requirements.

The HSQF recognises that many organisations deliver a range of different services from various locations across the state. As a general rule to simplify processes, organisations only need to demonstrate compliance through one method[[3]](#footnote-3), regardless of the number of services and/or service sites or outlets they operate.

The tables below provides an overview of each quality pathway.

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|  | **Certification** |
| **Applies to** | * Generally applies to direct service delivery to vulnerable people. |
| **Description** | * Organisations in-scope of certification are required to achieve and maintain certification against the Human Services Quality Standards (the standards). * Certification is granted when an organisation has been assessed by an independent third-party (known as a certification body or ‘CB’) as meeting the standards. * Certification bodies are accredited by the Joint Accreditation System of Australia and New Zealand (JAS-ANZ) which is the government-appointed body for accrediting and monitoring certification bodies and designing certification systems. * Organisations are required to contract a JAS-ANZ accredited certification body to assess their suitability for certification. |
| **Expected outcome** | * Standards are being met and organisational performance is being enhanced through continuous improvement. |
| **Timeframes** | * Organisations new to HSQF are required to achieve certification within 18 months of either: * The Schedule Start Date of the Service Agreement with a participating Queensland Government department to deliver services. * Being notified of the requirement to achieve HSQF certification. * Being notified that they are deemed to be in-scope of care service licensing by DCSSDS. * Being approved to use HSQF as a quality system of choice. * Organisations that already hold certification are required to include new/additional services into their next HSQF audit. * The timeframes for certification are specified in the *Service Agreement - Funding and Service Details* or in the relevant notification issued. * The department may agree a different timeframe for achieving certification if appropriate or reasonable. |
| **Further information** | * Part 3 provides detailed information about the services in-scope for certification. * Part 4 provides information about how funding thresholds apply. * Further information, tools and resources to support certification are available on the HSQF website at <https://www.dcssds.qld.gov.au/our-work/human-services-quality-framework>. |

|  | | **Self-assessment** | |
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| **Applies to** | | * Generally applies to non-direct service delivery and/or to universal,  low-intensity or lower-risk service delivery. * For organisations funded by a participating Queensland Government department (excluding Queensland Health), self-assessment may also apply where the level of departmental investment falls within a set threshold, as outlined in Part 4. | |
| **Description** | | * Organisations in-scope of self-assessment complete a HSQF self-assessment to rate their performance against the Human Services Quality Standards (the standards). * Further guidance on the process is detailed in the *Self-assessment and Continuous Guide – Self-Assessable Organisations* published on the HSQF website. | |
| **Expected outcome** | | * Standards are being met and identified improvements are being implemented. * Simpler assessment process for lower-risk service delivery. | |
| **Timeframes** | | * The self-assessment timeframes outlined below are current and applicable at the publication date of this document, however these may change in any future online self-assessment system implemented. * New self-assessable organisations complete a self-assessment against the standards and submit this to their contract officer within 18 months of signing a *Service Agreement – Funding and Service Details* or *Particulars (Service Provision)*. * A continuous improvement plan, showing organisational progress made implementing improvements identified in the self-assessment, is due within  30 months of signing the service agreement (i.e. 12 months after the self-assessment). * Another self-assessment is completed 18 months later. * For organisations moving from HSQF certification to self-assessment, the first self-assessment will be due on the date when the next HSQF audit would have occurred. * Disability services funded organisations approved to use restrictive practices with Continuity of Support (CoS)service users are required, at a minimum, to complete and submit a HSQF self-assessment against HSQF quality indicators relating to restrictive practices within three months of the restrictive practice approval. Further details are provided in Part 3 - Disability Services – Notes and Exceptions. | |
| **Further information** | | * Part 3 provides detailed information about the services in-scope for  self-assessment. * Part 4 provides information about how funding thresholds apply. * Further information, tools and resources to support self-assessment are available on the HSQF website at <https://www.dcssds.qld.gov.au/our-work/human-services-quality-framework/self-assessable-quality-requirements-resources>. | |

|  | **Evidence of accreditation under another approved quality system** |
| --- | --- |
| **Applies to** | * Applies on a case-by-case basis where an organisation is accredited or certified against another approved quality system for other services. |
| **Description** | * This method enables an organisation to submit evidence of accreditation or certification under another quality system to demonstrate their performance against the Human Services Quality Standards (the standards). * Applications for recognition of other accreditation are assessed by the HSQF Operations team on a case-by-case basis. Factors considered include whether an organisation’s existing certification or accreditation aligns well with HSQF and is appropriate for the types of services being delivered. * Where an organisation’s other accreditation is only partially recognised, the organisation may be required to complete a periodic gap self-assessment against the standards. * It is important to note that, in addition to HSQF, some services are required to implement practice standards such as the *Queensland Aboriginal and Torres Strait Islander Child Protection Peak Practice Standards*. These practice standards are an additional requirement and do not exempt organisations from the requirement to demonstrate compliance with HSQF. |
| **Expected outcome** | * Standards are being met and organisational performance is being enhanced through continuous improvement. * Reduced duplication for organisations accredited or certified under another quality system. |
| **Timeframes** | * Organisations must keep up-to-date copies of their other accreditation documents (report and certificate) current with their contract officer. * Where organisations are required to complete a gap self-assessment, this will be determined on a case-by-case basis but will usually be due 18 months after approval to use this demonstration method. |
| **Further information** | * Part 3 provides detailed information about the services for which other accreditation is accepted. * Part 4 outlines how funding thresholds apply to organisations approved to use other accreditation. * Further information about approved other accreditation and the process of applying for recognition of other accreditation are available on the HSQF website at <https://www.dcssds.qld.gov.au/our-work/human-services-quality-framework/other-accreditation-process-resources>. |

## Quality pathways – application to in-scope organisations

The quality pathway for all services in-scope of the HSQF is specified in Part 3 and is subject to the relevant notes and exceptions in the applicable table and the funding thresholds outlined in Part 4.

| **How to identify your organisation's quality pathway** | |
| --- | --- |
| **Step 1** | In Part 3, look-up the quality pathway for all the in-scope services you deliver. |
| **Step 2** | In Part 3, check the Notes and Exceptions listed in the tables for your in-scope services. |
| **Step 3** | In Part 4, check if funding thresholds change your quality pathway. |
| **Step 4** | Confirm your quality pathway with your contract officer or the HSQF Operations team. |

Changes in funding levels or the types of services funded may change an organisation’s quality pathway. When changes occur, organisations should discuss HSQF implications with their contract officer. In-scope organisations will be advised about changes to quality pathways and related HSQF requirements by their Queensland Government funding department.   
  
Despite the exceptions described in Part 3 and funding thresholds outlined in Part 4, the HSQF Operations team, in consultation with an organisation’s funding department, may determine that it is not appropriate for an organisation or service to demonstrate compliance with the HSQF or that a different demonstration method will apply than indicated in Part 3 or Part 4. This will be determined, and organisations will be advised, on a case-by-case basis.   
  
Where it has been agreed that a service is in-scope of HSQF, but it is not listed in Part 3, the applicable demonstration method will be determined, and organisations will be advised, on a case-by-case basis.

### Subcontracting and application of HSQF to subcontracted services

For organisations funded under a service agreement with a participating Queensland Government department, the *Service Agreement – Standard Terms*, clause 22 states that organisations may only subcontract services where there is prior written consent from the department/s. Organisations that subcontract services must have a contract with the subcontractor.   
  
Responsibility for ensuring that services are delivered in compliance with the standards rests with the funded organisation, even in relation to the services delivered by a subcontractor. Funded organisations that are required to implement the HSQF remain liable under their service agreement for all conditions, including HSQF provisions, even if services are subcontracted. Therefore, funded organisations should ensure that any subcontracting arrangements require the subcontractor to meet the HSQF and other contractual responsibilities applicable to the service being subcontracted.   
  
Where the organisation is required to achieve certification of the services, the subcontract must include a term that the subcontractor agrees to allow an independent certification body to access its premises to conduct an assessment of subcontracted services against the standards.   
  
Examples of HSQF related issues to be included in subcontracts include specifying that HSQF auditors can access the physical environment of subcontracted service delivery sites, interview staff delivering services, obtain feedback from people using subcontracted services and review their files (subject to consent).

Subcontracted services that are in-scope of certification must be assessed against the HSQF in one of the following ways:

1. Included in the funded organisation’s HSQF audit as a subcontracted service delivery site.
2. The subcontractor may complete a separate HSQF audit for the subcontracted services.
3. Where the subcontractor is already in-scope of HSQF certification for other services, the subcontracted services may be included in the subcontractor’s own HSQF audit.

If the service being subcontracted is only self-assessable under the HSQF, the subcontractor’s role and input into the self-assessment needs to be considered and planned.  
  
Organisations providing services through consortiums, local alliances or other collaborative arrangements need to consider how HSQF requirements will be met.

### Further information

For information about how the framework applies to your organisation please contact your departmental contract officer.

Further enquiries about all aspects of HSQF, including information about tools and resources to support your organisation to meet the requirements of the standards, can be directed to the HSQF Operations team.

Telephone: 1800 034 022

Email: [hsqf@qld.gov.au](mailto:hsqf@qld.gov.au)

Website: <https://www.dcssds.qld.gov.au/our-work/human-services-quality-framework>

# Part 2 – Human Services Quality Standards

The Human Services Quality Standards set a benchmark for the quality of service provision. Each Standard is supported by a set of performance indicators which outline what an organisation is required to demonstrate to meet that standard.

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| **Standard** | | **Indicator** | |
| **1** | **Governance and Management**  Sound governance and management systems that maximise outcomes for stakeholders | 1.1 | The organisation has accountable and transparent governance arrangements that ensure compliance with relevant legislation, regulations and contractual arrangements. |
| 1.2 | The organisation ensures that members of the governing body possess and maintain the knowledge, skills and experience required to fulfil their roles. |
| 1.3 | The organisation develops and implements a vision, purpose statement, values, objectives and strategies for service delivery that reflect contemporary practice. |
| 1.4 | The organisation’s management systems are clearly defined, documented and monitored and (where appropriate) communicated including finance, assets and risk. |
| 1.5 | Mechanisms for continuous improvement are demonstrated in organisational management and service delivery processes. |
| 1.6 | The organisation encourages and promotes processes for participation by people using services and other relevant stakeholders in governance and management processes. |
| 1.7 | The organisation has effective information management systems that maintain appropriate controls of privacy and confidentiality for stakeholders. |
| 2 | **Service Access**  Sound eligibility, entry and exit processes facilitate access to services on the basis of relative need and available resources | 2.1 | Where the organisation has responsibility for eligibility, entry and exit processes, these are consistently applied based on relative need, available resources and the purpose of the service. |
| 2.2 | The organisation has processes to communicate, interact effectively and respond to the individual’s decision to access and/or exit services. |
| 2.3 | Where an organisation is unable to provide services to a person due to ineligibility or lack of capacity, there are processes in place to refer the person to an appropriate alternative service. |
| 3 | **Responding to Individual Need**  The assessed needs of the individual are being appropriately addressed and responded to within resource capacity | 3.1 | The organisation uses flexible and inclusive methods to identify the individual strengths, goals and aspirations of people using services. |
| 3.2 | The organisation formulates service delivery that respects and values the individual (e.g. identity, gender, sexuality, culture, age and religious beliefs). |
| 3.3 | The organisation ensures that services to the individual/s are delivered, monitored, reviewed and reassessed in a timely manner. |
| 3.4 | The organisation has partnerships and collaborates to enable it to effectively work with community support networks, other organisations and government agencies as relevant and appropriate. |
| 3.5 | The organisation has a range of strategies to ensure communication and decision-making by the individual is respected and reflected in goals set by the person using services and in plans to achieve service delivery outcomes. |
| 4 | **Safety, Wellbeing and Rights**  The safety, wellbeing and human and legal rights of people using services are protected and promoted | 4.1 | The organisation provides services in a manner that upholds people’s human and legal rights. |
| 4.2 | The organisation proactively prevents, identifies and responds to risks to the safety and wellbeing of people using services. |
| 4.3 | The organisation has processes for reporting and responding to potential or actual harm, abuse and/or neglect that may occur for people using services. |
| 4.4 | People using services are enabled to access appropriate supports and advocacy. |
| 4.5 | The organisation has processes that demonstrate the right of the individual to participate and make choices about the services received. |
| 5 | **Feedback, Complaints and Appeals**  Effective feedback, complaints and appeals processes that lead to improvements in service delivery | 5.1 | The organisation has fair, accessible and accountable feedback, complaints and appeals processes. |
| 5.2 | The organisation effectively communicates feedback, complaints and appeals processes to people using services and other relevant stakeholders. |
| 5.3 | People using services and other relevant stakeholders are informed of and enabled to access any external avenues or appropriate supports for feedback, complaints or appeals and assisted to understand how they access them. |
| 5.4 | The organisation demonstrates that feedback, complaints and appeals processes lead to improvements within the service and that outcomes are communicated to relevant stakeholders. |
| 6 | **Human Resources**  Effective human resource management systems, including recruitment, induction and supervisory processes, result in quality service provision. | 6.1 | The organisation has human resource management systems that are consistent with regulatory requirements, industrial relations legislation, work health and safety legislation and relevant agreements or awards. |
| 6.2 | The organisation has transparent and accountable recruitment and selection processes that ensure people working in the organisation possess the knowledge, skills and experience required to fulfil their roles. |
| 6.3 | The organisation provides people working in the organisation with induction, training and development opportunities relevant to their roles. |
| 6.4 | The organisation provides ongoing support, supervision, feedback and fair disciplinary processes for people working in the organisation. |
| 6.5 | The organisation ensures that people working in the organisation have access to fair and effective systems for dealing with grievances and disputes. |

# Part 3 – Quality pathways for in-scope services

The tables in Part 3 show the HSQF quality pathways or ‘demonstration methods’ for all services   
in-scope of HSQF, categorised by service streams. Quality pathways are shown as one of the following:

* certification
* self-assessment, or
* evidence of accreditation under another approved quality system.

All other services outside of those listed below are not required to demonstrate unless advised on a case-by-case basis.

Notes and exceptions related to each service stream are listed below each table.

| **Service stream** | **How services are categorised** | **Includes** |
| --- | --- | --- |
| **Department of Child Safety, Seniors and Disability Services (DCSSDS)** | | |
| **Child and Family Services** | Funding Area/  Investment Specification  Service Type | Services funded through a service agreement with DCSSDS under the Child Protection Placement Services, Child Protection Support Services, Families, Individuals, Young People and Service System Support and Development Investment Specifications.  Child protection placement services in-scope of licensing funded to provide Individualised Placement and Support (IPS) packages. |
| **Disability Services** | Output Category  Output Code/  Investment Specification  Service Type | Services funded through a service agreement with DCSSDS to deliver Disability Services under output codes*,* the Service System Support and Development Investment Specification and Disability Services delivered directly by DCSSDS through Accommodation Support and Respite Services. |
| **Seniors Services** | Funding Area/  Investment Specification  Service Type | Services funded through a service agreement with DCSSDS under the Older People Investment Specification. |
| **Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities and the Arts (DTATSIPCA)** | | |
| **Community Services** | Funding Area/  Investment Specification  Service Type | Services funded through a service agreement with DTATSIPCA under the Community, Individuals and Service System Support and Development Investment Specifications as well as the new Community Services Investment Specification.  Queensland Community Support Scheme (QCSS) and Community Transport services funded through a service agreement with the DTATSIPCA. |
| **Department of Justice and Attorney-General (DJAG)** | | |
| **Women’s Safety and Violence Prevention Services** | Funding Area/  Investment Specification  Service Type | Services funded through a service agreement with DJAG under the Domestic and Family Violence Support Services, Sexual Violence and Women’s Support Services and Individuals Investment Specifications. |
| **Queensland Health[[4]](#footnote-4)** | | |
| **Health Services** | Program Area  Service Type | Services funded through a service agreement with Queensland Health specifying HSQF as an option to meet Queensland Health quality requirements. |

The service types referenced in the tables in Part 3 for organisations funded by participating Queensland Government departments are included in the following investment specification versions:

**DCSSDS**

* Child Protection (Support Services) – Version 3.6. effective July 2023
* Child Protection (Placement Services) – Version 2.3, effective August 2021
* Families – Version 8.2, effective July 2022
* Individuals – Version 4.5, effective 15 December 2020
* Young People – Version 5.0, effective December 2022
* Older People – Version 5.2, effective 15 December 2020
* Service System Support and Development – Version 3.2, effective 15 December 2020

**DTATSIPCA**

* Community – Version 3.2, effective 15 December 2020
* Individuals – Version 4.5, effective 15 December 2020
* Service System Support and Development – Version 3.2, effective 15 December 2020
* Community Services – Version 1.0, effective July 2023

**DJAG**

* Domestic and Family Violence Support Services – Version 4.0, effective 1July 2021
* Sexual Violence and Women's Support Services – Version 2.0, effective 1 July 2021
* Individuals – Version 4.5, effective 15 December 2020

Note that investment specifications are subject to change - additions or changes to service types and requirements may occur from time to time. Please refer to the relevant department website for current versions of investment specifications.

Investment Specifications are not used for some Disability Services or Queensland Health services.

## Department of Child Safety, Seniors and Disability Services (DCSSDS)

| Child and Family Services | | |
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| **Funding Area** | **Service Types** | **HSQF Quality PathwayA,B,C,D** |
| **Child Protection (Placement Services) Investment Specification** | **Family Based Care** | |
| Placement Services - Foster and Kinship Care (T204) without Direct Care1 | Certification1 |
| Placement Services – Foster and Kinship Care (T204) with Direct Care1 | Certification1 |
| Placement Services - Intensive Foster Care (T205) without Direct Care2 | Certification2 |
| Placement Services – Intensive Foster Care (T205) with Direct Care2 | Certification2 |
| **Non Family-Based Care** | |
| Placement Services - Residential Care (T206) | Certification |
| Placement Services - Safe Houses (T207) | Certification |
| Placement Services - Supported Independent Living (T208) | Certification |
| Placement Services - Therapeutic Residential Care (T209) | Certification |
| **Child Protection (Support Services) Investment Specification** | Support - Assertive Outreach (T316) | Certification |
| Support - Counselling and Intervention (T319) | Certification |
| Support – Transition to Adulthood (T329) | Certification |
| Support - Educational Support (T330) | Self-assessment |
| Support - Sexual Abuse Counselling (T335) | Certification |
| **Families Investment Specification** | Support – Aboriginal and Torres Strait Islander Services (T310) | Certification |
| Support – Aboriginal and Torres Strait Islander Family Wellbeing Services (T313) | Certification |
| Support – Case Management (T314) | Certification |
| Support – Community Support (T317) | Certification |
| Support – Intensive Family Support (T327) | Certification |
| Support – Safe Haven (T331) | Certification |
| Support – Secondary Family Support (T334) | Certification |
| Support – Targeted Family Support (T336) | Certification |
| Support – Tertiary Family Support (T339) | Certification |
| Support – Family and Child Connect (T347) | Certification |
| Support – Assessment and Service Connect (T448) | Certification |
| Support – Family Participation Program (T601) | Certification |
| **Individuals Investment Specification** | Access – Community Support (T101) | Certification |
| Access - Information, Advice and Referral (T103) | Certification |
| Support - Case Management (T314) | Certification |
| Support – Counselling (T318) | Certification |
| **Service System Support and Development Investment Specification** | System Support – Capability Building (T440) | Evidence of accreditation under ISO 90013 |
| System Support – Dissemination of Information (T441) | Evidence of accreditation under ISO 90013 |
| System Support – Research and Advice (T443) | Evidence of accreditation under ISO 90013 |
| System Support - Systemic and Group Advocacy and Representation to Government and Other Decision Makers (T446) | Evidence of accreditation under ISO 90013 |
| **Young People Investment Specification** | Access – Information, Advice and Referral (T103) | Certification |
| Support – Support and Case Management (T314) | Certification |
| Support – Community Support (T317) | Certification |

| **Notes and Exceptions – Child and Family Services** |
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| 1. This indicates the HSQF Quality Pathway, subject to the funding thresholds outlined in Part 4 and/or other applicable exceptions detailed below. Where certification is indicated but an organisation’s funding only meets the threshold for self-assessment, performance will be demonstrated through a self-assessment only – except for Child Protection Placement Services that are in-scope of Child Safety Licensing, which are required to achieve certification regardless of funding levels. 2. **Multi-service providers**: Where organisations deliver multiple in-scope services listed in Part 3:  * Certification takes precedence, so if one or more services delivered requires certification, this is the method that must be used by the organisation. * As organisations generally only demonstrate compliance using one pathway, those delivering services that are required to be certified do not need to complete a separate self-assessment for services listed as self-assessable in Part 3, and self-assessable services do not need to be included in third-party audits. * Organisations that deliver more than one self-assessable service, only need to complete a combined self-assessment that includes all of their self-assessable services.  1. **Queensland Government agencies**: As a general rule, Queensland Government agencies delivering human services funded by participating Queensland Government departments through service agreements are not required to demonstrate compliance with the HSQF. These providers will remain subject to regulation by their own specific sets of quality standards and safeguards. 2. Where **Other (Toth)** services are funded under the same service outlet number as another service that demonstrates compliance with HSQF (through either certification, self-assessment or other accreditation), the HSQF quality pathway will also apply to the Toth service. Otherwise, Toth funded services will only need to demonstrate compliance with HSQF when advised, on a case-by-case basis. 3. T204 with Direct Care and T204 without Direct Care are not separated in the Child Protection (Placement Services) Investment Specification, however must be separately addressed in audits. 4. T205 with Direct Care and T205 without Direct Care are not separated in the Child Protection (Placement Services) Investment Specification, however must be separately addressed in audits. 5. ISO 9001 accreditation applies, or where agreed accreditation under another quality system, except for certain representative networks where notified by the department, which are required to achieve certification. |

| Seniors Services | | |
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| **Funding Area** | **Service Types** | **HSQF Quality PathwayA,B,C,D** |
| **Older People Investment Specification** | Support – Case Management (T314) | Certification1 |
| Support – Community Support (T317) | Certification1 |
| Support– Information, Advice and Referral (T325) | Certification1 |
| System Support – Capability Building (T440) | Evidence of accreditation under ISO 9001 |
| System Support – Research and Advice (T443) | Evidence of accreditation under ISO 9001 |
| System Support – Dissemination of Information (T441) | Evidence of accreditation under ISO 9001 |
| System Support – System and group Advocacy (T446) | Evidence of accreditation under ISO 9001 |

| **Notes and Exceptions – Seniors Services** |
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| 1. This indicates the HSQF Quality Pathway subject to the funding thresholds outlined in Part 4 and/or other applicable exceptions detailed below. Where certification is indicated but an organisation’s funding only meets the threshold for self-assessment, performance will be demonstrated through a self-assessment only.   B. **Multi-service providers:** Where organisations deliver multiple in-scope services listed in Part 3:   * Certification takes precedence, so if one or more services delivered requires certification, this is the method that must be used by the organisation. * As organisations generally only demonstrate compliance using one pathway, those delivering services that are required to be certified do not need to complete a separate self-assessment for services listed as self-assessable Part 3 and self-assessable services do not need to be included third-party audits. * Organisations that deliver more than one self-assessable service, only need to complete a combined self-assessment that includes all of their self-assessable services.  1. **Queensland Government agencies:** As a general rule, Queensland Government agencies delivering human services funded by participating Queensland Government departments through service agreements are not required to demonstrate compliance with the HSQF. These providers will remain subject to regulation by their own specific sets of quality standards and safeguards. 2. Where **Other (Toth)** services are funded under the same service outlet number as another service that demonstrates compliance with HSQF (through either certification, self-assessment or other accreditation), the HSQF quality pathway will also apply to the Toth service. Otherwise, Toth funded services will only need to demonstrate compliance with HSQF when advised, on a case-by-case basis. 3. Certification applies except for **Seniors Legal and Support Services** that hold accreditation under the National Accreditation Scheme for Community Legal Centres, which is recognised accreditation for demonstrating compliance with HSQF. |

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| Disability Services | | |
| **Output Category or Funding Area** | **Output code (DS NMDS code) or Service Types-Investment Specification** | **HSQF Quality PathwayA,B,C,D** |
| **Accommodation Support/**  **Continuity of Support (CoS)** | All output codes from 1.01 – 1.083 inclusive | Certification1 |
| **Community Support/**  **Continuity of Support (CoS)** | All output codes from 2.01 – 2.073 inclusive | Certification1 |
| **Community Access/**  **Continuity of Support (CoS)** | All output codes from 3.01 – 3.033 inclusive | Certification1 |
| **Respite/Continuity of Support (CoS)** | All output codes from 4.01 – 4.052 inclusive | Certification1 |
| **Advocacy** | Advocacy (T324)2 | Evidence of accreditation under the National Standards for Disability Standards (NSDS) or, subject to approval, evidence of accreditation under the NDIS Practice Standards or ISO 9001. Where other accreditation not held or approved, certification applies. |
| **Peak Bodies** | System Support – Capability Building (T440)  System Support – Dissemination of Information (T441)  System Support – Research and Advice (T443)  System Support – Systemic and Group Advocacy and Representation to Government and Other Decision Makers (T446)  funded under the Service System Support and Development Investment Specification | Evidence of accreditation under  ISO 9001, or subject to approval, other relevant accreditation. |

| **Notes and Exceptions – Disability Services** |
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| 1. This indicates the HSQF Quality Pathway subject to the funding thresholds outlined in Part 4 and/or other applicable exceptions detailed below. Where certification is indicated but an organisation’s funding only meets the threshold for self-assessment, performance will be demonstrated through a self-assessment only – **except for disability services approved to use restrictive practices.**   In addition to existing quality requirements outlined above, organisations approved to use restrictive practices with Continuity of Support (CoS) service users are required, at a minimum, to complete and submit a HSQF self-assessment against HSQF quality indicators relating to restrictive practices. The self-assessment must be submitted to the departmental contract officer within three months of the restrictive practice approval. The department will assess the context and risks associated with each restrictive practice approval and may require CoS service providers to meet additional safeguarding measures to those outlined above.  B. **Multi-service providers:** Where organisations deliver multiple in-scope services listed in Part 3:   * Certification takes precedence, so if one or more services delivered requires certification, this is the method that must be used by the organisation. * As organisations generally only demonstrate compliance using one pathway, those delivering services that are required to be certified do not need to complete a separate self-assessment for services listed as self-assessable Part 3 and self-assessable services do not need to be included third-party audits. * Organisations that deliver more than one self-assessable service, only need to complete a combined self-assessment that includes all of their self-assessable services.  1. **Queensland Government agencies:** As a general rule, Queensland Government agencies delivering human services funded by participating Queensland Government departments through service agreements are not required to demonstrate compliance with the HSQF. These providers will remain subject to regulation by their own specific sets of quality standards and safeguards. However, this exception does not apply to DCSSDS’s Accommodation Support and Respite Service, which is subject to HSQF certification. 2. Where **Other (Toth)** services are funded under the same service outlet number as another service that demonstrates compliance with HSQF (through either certification, self-assessment or other accreditation), the HSQF quality pathway will also apply to the Toth service. Otherwise, Toth funded services will only need to demonstrate compliance with HSQF when advised, on a case-by-case basis. 3. For **Continuity of Support (CoS) services**, certification applies until the organisation achieves NDIS Practice Standards Certification. 4. **Advocacy (T324)** will be added to an investment specification in 2024. |

**Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities and the Arts (****DTATSIPCA)**

| Community Services | | |
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| **Funding Area** | **Service Types** | **HSQF Quality PathwayA,B,C,D,E** |
| **Individuals Investment Specification** | Access – Community Support (T101) | Certification |
| Access - Information, Advice and Referral (T103) | Certification |
| Support - Case Management (T314) | Certification |
| Support – Assertive Outreach (T316) | Certification |
| Support – Counselling (T318) | Certification |
| Support - Rest and Recovery (T322) | Certification |
| Support – Financial and material assistance (T333) | Certification, only in specified circumstances1 |
| Support – Financial Counselling and Advocacy/Financial Resilience (T447) | Certification |
| **Community Investment Specification** | Access - Community Support (T101) | Self-assessment |
| Access - Information, Advice and Referral (T103)2 | Certification |
| **Service System Support and Development Investment Specification** | System Support – Capability Building (T440) | Evidence of accreditation under ISO 90013 |
| System Support – Dissemination of Information (T441) | Evidence of accreditation under ISO 90013 |
| System Support – Research and Advice (T443) | Evidence of accreditation under ISO 90013 |
| System Support - Systemic and Group Advocacy and Representation to Government and Other Decision Makers (T446) | Evidence of accreditation under ISO 90013 |
| **Queensland Community Support Scheme (QCSS)** | Information, Assessment and Referral (T501) | Certification |
| Direct Care and Supports (T502) | Certification |
| Community Connection Supports (T503) | Certification |
| **Community Services Investment Specification**  ***(NEW FROM 2023)*** | Community support (T101) | Self-assessment |
| Information and Referral (T103) 2 | Certification |
| Community Education (T105) | Certification |
| Case Management (T314) | Certification |
| Assertive Outreach (T316) | Certification |
| Counselling (T318) | Certification |
| Rest and Recovery (T322) | Certification |
| Financial and Material Assistance (T333) | Certification, only in specified circumstances1 |
| Capability building (T440) | Evidence of accreditation under ISO 90013 |
| Dissemination of Information (T441) | Evidence of accreditation under ISO 90013 |
| Research and Advice (T443) | Evidence of accreditation under ISO 90013 |
| Systemic and group advocacy and representation to government and other decision makers (T446) | Evidence of accreditation under ISO 90013 |
| Financial Counselling and Resilience (T447) | Certification |
| Information, Assessment and Referral (T501) | Certification |
| Direct Care and Supports (T502) | Certification |
| Community Connection Supports (T503) | Certification |
| Community Transport (T520) | Certification4 |
| Community development, coordination, and support (T710) | Self-assessment |
| Maintenance and development of cultural and community links (T801) | Self-assessment |
| Social and personal development (T802) | Certification |
| Volunteer resource development and/or placement (T803) | Evidence of accreditation under ISO 90013 |
| Other (Toth) | Demonstration of HSQF compliance is outlined inE |

| **Notes and Exceptions – Community Services** |
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| 1. A new overarching single *Community Services Investment Specification V1.0* was introduced in July 2023. All currently funded services will be transitioned to this new investment specification over time as service agreements expire and new contracts are executed. The Community Services Investment Specification will replace the Individuals, Community and Service System Development and Support Investment Specifications and will also provide the framework for funding QCSS services. During the transition to the new Community Services Investment Specification, organisations’ existing service agreements will contain service types and Tcodes from the older Individuals, Community and Service System Development and Support Investment Specifications and QCSS funding arrangement. 2. This indicates the HSQF Quality Pathway, subject to the funding thresholds outlined in Part 4 and/or other applicable exceptions detailed below. Where certification is indicated but an organisation’s funding only meets the threshold for self-assessment, performance will be demonstrated through a self-assessment only. 3. **Multi-service providers:** Where organisations deliver multiple in-scope services listed in Part 3:  * Certification takes precedence, so if one or more services delivered requires certification, this is the method that must be used by the organisation. * As organisations generally only demonstrate compliance using one pathway, those delivering services that are required to be certified do not need to complete a separate self-assessment for services listed as self-assessable Part 3 and self-assessable services do not need to be included third-party audits. * Organisations that deliver more than one self-assessable service, only need to complete a combined self-assessment that includes all of their self-assessable services.  1. **Queensland Government agencies:** As a general rule, Queensland Government agencies delivering human services funded by participating Queensland Government departments through service agreements are not required to demonstrate compliance with the HSQF. These providers will remain subject to regulation by their own specific sets of quality standards and safeguards. 2. Where **Other (Toth)** services are funded under the same service outlet number as another service that demonstrates compliance with HSQF (through either certification, self-assessment or other accreditation), the HSQF quality pathway will also apply to the Toth service. Otherwise, Toth funded services will only need to demonstrate compliance with HSQF when advised, on a case-by-case basis. 3. Certification only applies to **Financial and Material Assistance (T333)** where this service is funded under the same service outlet number as Financial Counselling and Resilience (T447) or another service type that is in-scope of certification. 4. T103 occurs in both the Community Investment Specification and the new Community Services Investment Specification. They are listed under slightly different names but have the same quality pathway. 5. Accreditation under ISO 9001 applies, or where agreed accreditation under another quality system, except for **multi-tenant service centres**, which are not required to demonstrate compliance. 6. Certification will only apply to **Community Transport (T520)** upon notification by DTATSIPCA to funded organisations. |

**Department of Justice and Attorney-General (DJAG)**

| Women’s Safety and Violence Prevention Services | | |
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| **Funding Area** | **Service Types** | **HSQF Quality PathwayA,B,C,D** |
| **Domestic and Family Violence Support Services Investment Specification** | Support – Aboriginal and Torres Strait Islander Services (T310) | Certification |
| Support – Children’s Domestic Violence Counselling (T315) | Certification |
| Support – Domestic Violence Counselling (T320) | Certification |
| Support – Court Based Services (T321) | Certification |
| Support – Perpetrator Intervention Programs (T328) | Certification |
| Support – Telephone Services (T338) | Certification |
| System Support – Local Domestic and Family Violence Service Systems (T437) | Certification1 |
| Support – Women’s Shelter - Temporary Supported Accommodation - Immediate (ST6) | Certification |
| Support - Mobile Support (ST5) | Certification |
| Support - Centre Based Support (ST4) | Certification |
| **Sexual Violence and Women’s Support Services Investment Specification** | Support – Sexual Violence Counselling (T701) | Certification |
| Support – Women’s Health and Wellbeing Counselling (T702) | Certification |
| System Support – Prevention, Capacity Building and Awareness Raising (T703) | Certification |
| **Individuals Investment Specification** | Access – Community Support (T101) | Certification |
| Access - Information, Advice and Referral (T103) | Certification |
| Support - Case Management (T314) | Certification |
| Support – Counselling (T318) | Certification |

| **Notes and Exceptions – Women’s Safety and Violence Prevention Services** |
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| 1. This indicates the HSQF Quality Pathway, subject to the funding thresholds outlined in Part 4 and/or other applicable exceptions detailed below. Where certification is indicated but an organisation’s funding only meets the threshold for self-assessment, performance will be demonstrated through a self-assessment only – **except for Women’s shelters (Temporary Supported Accommodation – Immediate (ST6)) and Domestic and Family Violence Men’s Perpetrator Invention Programs (T328), which are required to achieve certification regardless of funding levels.** 2. **Multi-service providers:** Where organisations deliver multiple in-scope services listed in Part 3:  * Certification takes precedence, so if one or more services delivered requires certification, this is the method that must be used by the organisation. * As organisations generally only demonstrate compliance using one pathway, those delivering services that are required to be certified do not need to complete a separate self-assessment for services listed as self-assessable Part 3 and self-assessable services do not need to be included third-party audits. * Organisations that deliver more than one self-assessable service, only need to complete a combined self-assessment that includes all of their self-assessable services.  1. **Queensland Government agencies:** As a general rule, Queensland Government agencies delivering human services funded by participating Queensland Government departments through service agreements are not required to demonstrate compliance with the HSQF. These providers will remain subject to regulation by their own specific sets of quality standards and safeguards. 2. Where **Other (Toth)** services are funded under the same service outlet number as another service that demonstrates compliance with HSQF (through either certification, self-assessment or other accreditation), the HSQF quality pathway will also apply to the Toth service. Otherwise, Toth funded services will only need to demonstrate compliance with HSQF when advised, on a case-by-case basis. 3. Certification applies to **System Support – Local Domestic and Family Violence Service Systems (T437)** however where **High Risk Teams (HRTs)** and **First Nations Cultural Advisors** are funded under T437, client files (e.g. case notes) are not to be reviewed by auditors. HRT meeting records (e.g. agendas, minutes, HRT core members and managers meeting records) and Service Systems Activity Registers can be viewed by auditors as evidence to demonstrate alignment with standards. |

## Queensland Health

| Health Services | | | |
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| **Program Area** | **Service Types** | **Description** | **HSQF Quality Pathway** |
| **Mental Health** | Mental Health – Individual Support and Rehabilitation | Non-clinical psychosocial wraparound support services tailored to the individual in their focus of care and intensity of support. They include a range of one-on-one activities provided by appropriately qualified workers directly to the individual in their homes or local community setting. Activities may include improving daily living skills, relapse prevention, social inclusion, build capacity for self-advocacy, stress management, skill development etc. | Certification |
| Mental Health – Group Support and Rehabilitation | Non-clinical psychosocial support services tailored to provide the individual with activities aimed to improve their quality of life and psychosocial functioning, through the provision of group-based social, recreational or prevocational activities. The services can be hosted in many community settings and would generally be of short duration (e.g. group program of two (2) hours). The activities delivered may or may not be structured (e.g. two-hour session for six (6) weeks) and might be time-limited or ongoing depending on the identified recovery needs of the individual | Certification |
| Mental Health – Individual Peer Work | Non-clinical psychosocial support services that are led and self-managed by peer workers that aim to empower and support the individual by sharing life experiences with people who have similar experiences and help to develop support networks for crisis situations. Includes individual self-help activities and can be face to face, telephone based, in-home and involve structured activities tailored to individual needs. | Certification |
| Mental Health – Group Based Peer Work | Non-clinical psychosocial support services that are led and self-managed by peer workers which aim to empower and support the individual, by working through group processes and sharing life experiences with people who have similar experiences, and to help develop support networks for crisis situations. The services can be hosted in many community settings and would generally be of short duration (e.g. group program of two (2) hours). The activities delivered may or may not be structured (e.g. two-hour session for six (6) weeks) and might be time-limited or ongoing depending on the identified recovery needs of the individual. | Certification |
| Mental Health – Individual Carer Support | Support services provided to a family/friend/support person or carer (in contrast to personalised support for the person experiencing a mental illness). Activities are designed to support the individual to fulfil their caring role, while maintaining their own health and wellbeing. Activities may include improving individual’s mental health literacy to facilitate detection, early intervention and support, crisis management, enhancing relationships etc. The support services may or may not be provided by a peer worker. | Certification |
| Mental Health – Group Carer Support | Support services provided to a family/friend/support person or carer (in contrast to personalised support for the person experiencing a mental illness) in a group basis. Activities may include practical skills for maintaining home and living well, enhancing relationships and social participation, health management and supporting access to education and employment opportunities. The support services may or may not be provided by a peer worker. | Certification |
| Mental Health – Other Residential Services | Services established in community settings in a domestic style environment that provide non- clinical psychosocial support to the individual residing on an overnight basis. Staff are on-site for a minimum of 6 hours a day and at least 50 hours per week. Accommodation may be provided on a short, medium or long-term basis. | Certification |
| Mental Health – Individual Advocacy | Services that represent the rights and interests of people with mental illness, on a one-to-one basis by addressing issues of discrimination, abuse and neglect. | Not required to demonstrate |
| Suicide Prevention – Crisis Support Spaces | Lived experience peer support services that enhance therapeutic care options for people following their presentation to Queensland Health emergency departments and acute settings with a suicidal crisis.  Services are provided as part of an integrated model where care and support are delivered by a combination of non-clinical peer support workers and Queensland Health mental health clinicians. Non-clinical peer supports provide for discussion of shared experiences, coping strategies and to provide information and referrals. | Certification |
| **Alcohol and Other Drugs** | AOD - Residential Rehabilitation (Individuals) | Provides medium-to-longer-term structured and intensive treatment that integrates a range of therapeutic elements (such as individual and group counselling, living skills and relapse prevention) and supports to assist clients to address their substance dependence and attain their recovery goals. Services are provided by suitably qualified staff in a residential setting with program duration usually between 28 days to six months or more (depending on clinical, cultural and client needs). Residential rehabilitation programs also include pre-treatment and post treatment support for clients.  The main aims of residential rehabilitation are to engage clients in intensive treatment following withdrawal from a substance; and provide access to a range of clinical, cultural, social and functional program elements and supports for clients to develop skills to reduce the level of AOD use, reduce AOD related harms and to improve their health and wellbeing. | Certification |
| AOD - Residential Rehabilitation (Parents with children) | Provides access to residential rehabilitation for parents/adult guardians/primary caregivers with young children in their care. It is a type of residential rehabilitation tailored specifically for this cohort of people seeking treatment.  Safe and appropriate accommodation is provided within specific infrastructure, for singles or couples seeking treatment for their own substance use to support participation in a residential rehabilitation program, while their children (up to 10 years of age) reside with them and receive care and support. Parents will maintain primary care responsibilities for accompanying children and services will provide access to appropriate childcare and other appropriate supports while parents participate in treatment. |  |
| AOD - Residential Withdrawal Management and Care | Provides community-based residential withdrawal for people experiencing moderate to severe dependence but without medical complications (where a hospital-based withdrawal would be clinically indicated).  Withdrawal management and care is a short-term intervention providing for a safe reduction or discontinued use of substances of dependence, managing withdrawal symptoms through medication, psychosocial and/or other therapeutic supports to alleviate distress and prevent severe withdrawal complications. | Certification |
| AOD - Psychosocial Interventions | Psychosocial interventions primarily refer to evidence-based counselling for clients experiencing moderate to severe problematic AOD substance use. Services can include harm reduction, care management and coordination and wrap around social supports, including contributing to social and emotional wellbeing and the social and cultural determinants of health. Psychosocial interventions aim to develop psychological and/or practical skills to reduce problematic AOD use and/or harms and improve health and wellbeing in line with the person’s goals and treatment plan. They can be delivered individually or in groups and are delivered face-to-face (with telephone and virtual options used as an adjunct). | Certification |
| AOD – Non-Residential Rehabilitation | Non-Residential Rehabilitation services provide day-based, structured and intensive AOD treatment that is delivered in a community setting without a residential (i.e. accommodation) component for clients experiencing moderate to severe problematic alcohol or other drug use. Clients may attend daily over a set number of weeks according to program structure and requirements. Non-Residential Rehabilitation typically includes individual and group counselling that addresses the factors that maintain substance use and helps develop coping skills relapse prevention, living skills (e.g. health and nutrition, financial management, interpersonal relationship skills etc.), self-help and peer support, and recreational activities. | Certification |
| AOD - Police/Court Diversion Services | A brief Intervention delivered to people found in possession of substances and diverted through the Police Diversion Program or illicit Drugs Court Diversion Program. The Brief Intervention may include assessment, education and information, motivational interview, relapse prevention and referral. | Certification |
| AOD - Family Support Services | Brief support provided to families and individuals affected by methamphetamine and other drug use in their family and the community. Support includes information, awareness and education delivered through individual support and group sessions hosted in many community settings including outreach services to allow individuals, family and community members to attend and develop strategies to keep themselves and their families safe. | Certification |
| AOD - Drug and Alcohol Assessment and Referral (DAAR) | Establishing a service that coordinates the diversion of eligible people to attend Drug and Alcohol Assessment Referral (DAAR) courses by the court system to a network of authorised assessment and education providers. This service can be delivered by telephone referral or online technology system.  A brief intervention delivered to adults, referred by a magistrate’s court, who identify alcohol and other drug use as a contributing factor to their offending. The Brief Intervention may include assessment, education and information, motivational interview, relapse prevention and referral. | Certification |
| AOD - Diversion Coordination Service | A service that coordinates the health response delivered to people diverted by the Police Drug Diversion, Illicit Drugs Court Diversion or the Drug and Alcohol Assessment Referral programs appointment scheduling and reporting, to a network of authorised assessment and education providers. This service can be delivered by telephone referral or online technology system. | Certification |
| **Child and Family** | Therapy Services – Individual | Services that provide clinical intervention, prevention and health promotion services and support to guide and assist individuals, who suffer, or are at risk of suffering, emotional, social, behavioural or developmental difficulties, to address a range of psycho-social, health and personal issues relevant to their needs. Services may include identification of personal goals, strategies and skills to enhance consumer’s health, wellbeing, personal capacity, independent functioning within the community and counselling services. | Certification |
| Therapy Services - Group | Services that provide group-based clinical intervention, prevention and health promotion services and support where consumers, who suffer, or are at risk of suffering, emotional, social, behavioural or developmental difficulties, can meet in a safe, supportive environment to address a range of identified social, health and other personal issues relevant to their needs. Services may include a range of planned social, educative and/or interactive activities that support consumers to increase their resilience and develop skills and strategies that improve their personal capacity to manage life events and support children’s development. | Certification |
| **General** | Individual and Group Support | Services that support individuals and carers to navigate care and treatment services and to  self-managed by peer workers with similar experience develop and maintain and improve personal skills and support networks. These services can include individual and group activities and can be face to face, telephone based, in-home and/or in community settings. Activities may or may not be structured and might be time-limited or ongoing depending on the identified needs of the individual.  Includes services led and, that aim to empower and support the individual by sharing life experiences. | Certification |
| Information, Awareness and Education | Activities aimed at promoting health and well-being and preventive behaviours, health literacy, stigma reduction and increased awareness of and improved access to prevention, testing and treatment and management services. These activities may include preparation, delivery and distribution of face to face, written, electronic and social media communications and materials including peer education, community and professional sector training, website development and maintenance, development and delivery of multi-media modules, information and referral services and advocacy services. | Certification |

# Part 4 – Funding Thresholds

Part 4 outlines how the type and/or duration of funding and funding levels impact on quality pathways for service delivery funded by the following three participating Queensland Government departments:

* Department of Child Safety, Seniors and Disability Services (DCSSDS)
* Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities and the Arts (DTATSIPCA)
* Department of Justice and Attorney-General (DJAG)

Part 4 does not apply to Queensland Health services and Queensland Health funding is not included in the calculation of funding thresholds outlined below.

### Funding duration/type

Organisations are required to demonstrate performance against the standards for in-scope services that are funded for a period of 18 months or more. Where organisations that are already under HSQF receive other funding for in-scope service types that is less than 18 months in duration, these other services are required to be included in HSQF assessment processes, unless advised otherwise. This does not apply where the service is a pilot or trial and will be evaluated in another way.

Organisations that only receive one-off or short-term funding are not required to demonstrate compliance with the HSQF, although the funded services must still be delivered in accordance with the Human Services Quality Standards. For HSQF purposes, short-term funding is defined as service delivery funded for a period of less than 18 months.

Services funded as pilot programs or trials are not required to demonstrate compliance with HSQF as they are being evaluated in another way. The pilot or trial period may exceed 18 months.

### Funding thresholds

Funding thresholds operate as follows:

* For organisations delivering services with a quality pathway of certification specified in Part 3, the combined total annual defined term/ongoing funding for those services across the three Queensland Government departments listed above, determines the final quality pathway for the services.
* The funding thresholds for 2023-24 are outlined below.

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| **Total combined funding** | **Applicable quality pathway** |
| More than $295,000 per annum | Certification |
| $112,000 up to $295,000 per annum | Self-assessment |
| Less than $112,000 per annum | Not required to demonstrate compliance |

* The thresholds apply to funding for services that would normally be in-scope for certification. Organisations with funding that meets the threshold for self-assessment, that receive additional funding for service types that are specified in Part 3 as self-assessable, will only be required to undertake self-assessment.

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| ***Example:*** An organisation that receives funding of $200,000 for Targeted Family Support Services (in-scope for certification but meets funding threshold for self-assessment) as well as funding of $220,000 for neighbourhood centre services (self-assessable), will only be required to undertake a self-assessment. |

* The funding thresholds above also apply to organisations demonstrating compliance with HSQF through their accreditation under another set of quality standards (with or without a gap   
  self-assessment) as follows:
* Organisations that receive more than $295,000 per annum in funding for service types for which other accreditation is accepted, are required to provide and keep evidence of their other accreditation (report and certificate) current with their funding department/s.
* Organisations that receive $112,000 up to $295,000 per annum in funding for service types for which other accreditation is accepted, may only be required to complete a HSQF   
  self-assessment where they do not already hold the other accreditation.
* Organisations that receive less than $112,000 per annum in funding for service types for which other accreditation is accepted, are not required to evidence their other accreditation to their funding department/s.
* Funding thresholds are reviewed annually considering factors such as indexation and are published on the HSQF website. The 2023-24 funding thresholds are based on state indexation effective at 1 July 2023.
* Changes in the funding levels or the types of services funded may change an organisation’s quality pathway. When changes occur, organisations should discuss HSQF implications with their contract officer.

### Funding threshold exceptions

1. Services that are required to be certified regardless of funding level and the funding thresholds outlined above include:

* Child protection placement services in-scope of licensing
* Disability services using restrictive practices as relevant[[5]](#footnote-5)
* Domestic and family violence perpetrator intervention programs, and
* Women’s shelters (Temporary Supported Accommodation – Immediate).

1. The funding thresholds may not apply when the services are assessed as higher or lower risk or are subject to specific regulatory requirements. This will be assessed on a case-by-case basis by the HSQF Operations team in consultation with an organisation’s funding department.
2. When an organisation’s Queensland Health funded services are required to achieve HSQF certification, the organisation may be required to include its services funded by the other participating Queensland Government department/s into its HSQF certification, regardless of the funding level.

1. “Other specified arrangements” may include contracts where the organisation has been notified of the need to implement and demonstrate compliance with HSQF. There are a small number of service agreements where the HSQF does not apply e.g. for products or assets. [↑](#footnote-ref-1)
2. Further information is available in the resource “In-Scope of Licensing Process for IPS Suppliers”, available on the [Child Safety Licensing Resources page](https://www.dcssds.qld.gov.au/about-us/our-department/partners/child-family/child-safety-licensing/licensing-resources) [↑](#footnote-ref-2)
3. In a small number of cases, organisations using accreditation under another approved quality system that only partially meets HSQF requirements may be required to complete an additional ‘gap’ self-assessment against the HSQF. [↑](#footnote-ref-3)
4. Queensland Health may, over time, determine that other service streams or service types will be in-scope of the HSQF. If additional services are added, Queensland Health will advise relevant organisations. [↑](#footnote-ref-4)
5. In line with Part 3 – Notes and Exceptions – Disability Services: A. [↑](#footnote-ref-5)