

Provider Legal Name:
NorthAble Matapuna Hauora

Site Visit: 15 July 2021

Completed Date: 29 July 2021

NZBN Number:
9429042695738

RDA Number:
1010

Assessment Number:
111305

EXECUTIVE SUMMARY

NorthAble Matapuna Hauora, has been assessed as partially meeting the standards for accreditation. Of the nine Level 3 standards assessed, five were fully met and four were partially met.

SSAS Standards	Outcome	SSAS Standards	Outcome
Client-centred services (L3)	Standard met	Financial management and systems (L3)	Standard met
Community wellbeing (L3)	Standard partially met	Resolution of complaints related to service provision (L3)	Standard met
Staffing (L3)	Standard partially met	Quality improvement (L3)	Standard met
Health and safety (L3)	Standard partially met	Client services and programmes (L3)	Standard met
Governance and management structure and systems (L3)	Standard partially met		

Corrective action plan

Critical actions

No critical actions have been identified during the assessment.

Required actions

Standard	Criteria	Action	Due by
Community wellbeing (L3)	1	The Child Protection Policy should be updated to refer to the current Children's Act 2014 Legislation. Contractors should sign to state that have read and understood the child protection policy, located in the contractor's handbook.	next review
Staffing (L3)	8	Contractors induction records should be signed	next review

		and retained on file.	
Health and safety (L3)	2	The hazard register should be updated to state when the hazard was last assessed and when the hazard will next be assessed.	next review
Governance and management structure and systems (L3)	2	The Privacy Statement and Policy should be updated to include the process the organisations Privacy Officer will follow in the event of a privacy breach.	next review
Client services and programmes (L3)	2	Clients rights form needs to be signed by either the client or their whanau on behalf of the client to demonstrate the client has been explained their rights.	next review

Strengths identified at review

Client-centred Services Criteria 1:

1. NorthAble provides a warm and inviting environment for the clients and whanau. Clients' needs are considered and supported within each aspect of the service from highly comprehensive health and safety protocols to the process of matching clients to the right support people.

Recommendations

Client services and programmes (2):

It is recommended that the CCS Service implement practices to assess and record client risk.

Accreditation status

Confirmation of Accreditation at Level 3 with required actions

The conditions of accreditation

NorthAble Matapuna Hauora has been accredited by Social Services Accreditation to deliver the following services:

- Family well-being services (Level 3)
- Employment and training services approval (Level 4)
- Miscellaneous sector support and development (Level 4)

Action plan

Five actions were identified at this assessment, these actions should be completed as soon as possible and are due by the next assessment in 24 months.

OVERVIEW

This is a review assessment of NorthAble Matapuna Hauora's accreditation status by Social Services Accreditation.

NorthAble applied for Level 3 accreditation in February 2021 after contracting with the Ministry of Social Development to provide Level 3 Community Connection Services (CCS). Prior to this application NorthAble were accredited at Level 4.

The CCS service is delivered by Navigators, who work with individuals and whanau on a short-term basis. Navigators are contracted by NorthAble and report to the NASC (Needs Assessment and Service Coordination) Manager.

In NorthAble's own words "*Navigation is a unique, short-term, outcomes focused service provision model aiming at enabling individuals and whanau to create a positive future for themselves. It facilitates intervention and support around opportunities for self-determination for families to maintain resilience and remain in their local communities.*"

NorthAble provided a comprehensive range of evidence prior to the site assessment which resulted in a smooth and efficient site assessment. The site assessment consisted of:

- Review of staff files
- Review of client files
- Health and safety assessment
- Interview with the CEO and NASC Manager

The site assessment identified five required action and one recommended action. These actions are mostly administrative and will further improve the quality of service.

The site assessment also demonstrated that NorthAble strives to operate within the realms of best practice, which is demonstrated in the quality of their service and the business mentoring they conduct with other agencies.

This is an Inter-Agency assessment.

KEY FINDINGS

SSAS Standard: Client-centred services (L3)

The organisation treats people with respect and delivers services in a manner that has regard for their dignity, privacy and independence.

1. The organisation promotes client-centred practice as central to its service development and delivery.

Evidence

- Needs assessment with consent form
- NorthAble Navigation referral form
- Interview with the CEO and NASC Manager
- Maori Liaison Induction Checklist
- Review of organisations website

Exceptions

Criteria	Findings	Type of finding
1	NorthAble provides a warm and inviting environment for the clients and whanau. Clients' needs are considered and supported within each aspect of the service from highly comprehensive health and safety protocols to the process of matching clients to the right support people.	Strength

Outcome

Standard met

SSAS Standard: Community wellbeing (L3)

The organisation provides services which reflect the principle that the welfare and interests of the child or young person are first and paramount and where the wellbeing of all is upheld.

1. The organisation provides services in a manner consistent with section 6 of the Oranga Tamariki Act 1989, where services reflect the principle that the welfare and interests of the child or young person are the first and paramount consideration.
2. The organisation has a process for dealing with allegations of abuse and situations that raise concerns about the safety of a client or associated community member.

Evidence

- Child protection policy (2020): Recruitment And Employment Of Workers; Identifying Child Abuse And Neglect; Signs Of Possible Abuse; Signs Of Possible Neglect; Adults Working With Children Will; Inappropriate Practice For Adults Working With Children Includes; Responding To And Reporting Suspected Abuse Or Neglect
- Interview with the CEO and NASC Manager
- Employee Handbook: Child Protection
- Volunteer Handbook: Child protection

Exceptions

Criteria	Findings	Type of finding
1	The Child Protection Policies refer to the Vulnerable Children Act 2014, which is the previous name used to refer to the now titled Children's Act 2014. Contractors are supplied the 'contractor handbook' but there is no signed acknowledgement to demonstrate that the handbook has been read and understood.	Required Action

Outcome

Standard partially met

SSAS Standard: Staffing (L3)

The organisation has the staffing capability and capacity to deliver services safely.

1. The organisation's staffing and staff relations policy and procedures comply with the relevant legislation.
2. The organisation includes in its definition of staff anyone the organisation relies on to deliver its services. This includes caregivers, volunteers and contractors, as well as paid staff members.
3. All staff have a written agreement of service.
4. The organisation uses a clear, transparent and open process for recruiting and vetting suitable staff including members of the organisation's governance body. Vetting of staff is to include, but is not limited to, a New Zealand police vet.
5. The organisation will follow a robust decision making process in responding to the results of vetting, including safety checking.
 - 5.1 The organisation effectively manages any staff with a conviction, including members of governance.
 - 5.2 Unless a core worker exemption is held, an organisation does not employ any core children's worker who has a conviction for a specified offence under schedule two of the Children's Act 2014.
6. The organisation will complete police checks, and any other relevant vetting for all

staff at least every three years.

7. The organisation has sufficient, qualified and competent staff to deliver its services.
8. The organisation provides adequate induction, training, professional development and support for all staff.

Evidence

- Job Description Executive Assistant to CEO
- Due diligence in NorthAble Handbook
- Pre-contracting tool includes candidate's response to: Culturally safe practice; qualifications; Working with people with disabilities; Working with disadvantaged population; Case experience; Personal attributes
- Permanent staff employment agreement (template)
- Volunteer staff employment agreement (template)
- Employee handbook: Code of Conduct
- Volunteer handbook
- Approved agency agreement Police vetting
- Criminal records check for staff policy
- Criminal records check for staff policy
- Criminal history records check process (2019)
- Interview Questions for Whangarei LYNKZ Programme Facilitator
- Staff records training database includes the following training completed by staff in 2020: MAPA; Certificate of Participation NZSL Level 1; Best Practice in the Helping Professions Workshop; FOCUS Planning - A graphic Facilitation Tool for Planning; First Aid Training; Self Defence Workshop; Mental Health First Aid; Professional Wellness Workshop; Managing Workplace Behaviour Workshop
- Employee training policy (2020)
- Induction policy (2020)
- 2x Child Matters training certificates 2020
- Induction process policy (2019)
- Health and Safety Induction document
- Staffing induction schedule
- Employee assistance programme policy (2020)
- Induction checklists: LYNKZ; Information Technology; Health and Safety; Front Office; Disability Information Advisory Service (DIAS); Quality; Maori Liaison; Human Resources
- Interview with the CEO and NASC Manager
- Sample of five staff files for a facilitator, manager and three contractors

Exceptions

Criteria	Findings	Type of finding
8	Manager stated that contractors have completed induction, but records have not been maintained on file.	Required Action

Outcome

Standard partially met

SSAS Standard: Health and safety (L3)

The organisation ensures clients, staff and visitors are protected from risk.

1. The organisation ensures its place of work, and any place of work it uses or relies on for service delivery, comply with all legal and regulatory requirements.
2. The organisation will, as reasonably practicable, provide and maintain a working environment for its workers and members of the public that is safe and without risk to health.
3. The organisation has safety and emergency plans for the evacuation of its place of work and any other place of work it uses for service delivery.
4. The organisation responds effectively to adverse events in the place of work.

Evidence

- Building Warrant of Fitness (Expired 1 July 2021)
- First-aid kit and contents audit checklist
- Defibrillator
- Exit signage
- Disabled ramp access
- Evacuation plans are displayed
- Fire extinguishers (last inspected April 2021)
- First aid kit and register
- Health and safety and event register
- Accident report records
- Event report records
- Incident investigation report records
- Incident, accident, and event register
- Reporting of incidents, injuries, and events policy (2020)
- Hazard register for 40-42 John Street, Whangarei
- Hazard register for 73 John Street6 Whangarei
- External contractor health and safety agreement (2020)
- Hazard report records
- Hazard and risk management procedure (2020)
- Safety action plan – Analysis of potential hazards and mitigation
- Health and Safety Induction document
- COVID H&S Policies? **Is this the name of the document?**
- Health Safety Committee (HSC) team meeting agenda and minutes (14/2/21)
- Activity proposal, approval, and intentions client activity safety action plan
- Health and Safety Obligations policy include
- Staff Health & Safety Handbook
- Health and safety policy statement from the CEO (November 2019)
- Health and Safety induction checklist
- Business continuity and disaster recovery plan (2019)
- Crisis management plan – Crisis response manual
- Fire & Emergency trial evacuation reports: 4/6/2020; 19/11/2020
- Emergency procedures policy (2020)
- Emergency evacuation procedure 40 John Street (does not include an evacuation map)
- Interview with the CEO and NASC Manager
- 40 John Street Office Site Map
- Health and Safety signage register - All sites

Exceptions

<i>Criteria</i>	<i>Findings</i>	<i>Type of finding</i>
2	The hazard register currently states the time-period for review but does not state when the hazard was last reviewed.	Required Action

Outcome

Standard partially met

SSAS Standard: Governance and management structure and systems (L3)

The organisation has a clearly defined and effective governance and management structure and system.

1. The organisation has clearly defined and effective governance and management structure and systems.
2. The organisation collects, records, stores and uses information in keeping with the relevant legislation.

Evidence

- Trust policies and Procedures (not-dated)
- Certificate of Registration Charities Commission (CC25041)
- Trust Deed (2009)
- Staff privacy induction (Template)
- Privacy Statement (2020)
- Privacy Policy (not-dated)
- Safeguards Policy (not-dated)
- Interview with the CEO and NASC Manager
- Child Protection Policy (2020): Recording And Sharing Of Information

Exceptions

<i>Criteria</i>	<i>Findings</i>	<i>Type of finding</i>
2	The hazard register currently states the time-period for review but does not state when the hazard was last reviewed.	Required Action

Outcome

Standard partially met

SSAS Standard: Financial management and systems (L3)

The organisation is financially viable and manages its finances competently.

1. The organisation is financially viable.
2. The organisation has financial management systems appropriate to the size and complexity of the organisation.
3. The organisation has adequate insurance cover for the size and complexity of the organisation.
4. The organisation has arrangements for the regular independent audit, or in some cases review, of financial accounts.

Evidence

- Trust cash reserves and investment policy (2020)
- Finance policy (2020)
- ANDO Insurance Group Certificate of commercial building insurance (expires 1 July 2021)
- Interview with the CEO and NASC Manager
- Steadfast Client Insurance Portfolio (expires 1 July 2021): Material Damage; Fidelity; Association Combined Liability; Commercial Motor Vehicle; Loss of Profits
- NorthAble financial statements for the year ended 30 June 2020

Exceptions

Based on the evidence provided for this review, no exceptions were identified.

Outcome

Standard met

SSAS Standard: Resolution of complaints related to service provision (L3)

The organisation uses an effective process to resolve complaints about service provision.

1. The organisation has a formal process for receiving, considering and resolving complaints that is soundly based in law and is consistent with the principles of natural justice, and ensures the support and safety of the complainant throughout the process.

Evidence

- Complaints policy and procedure service user (2019)
- Feedback register (up to 30/6/21)
- Interview with the CEO and NASC Manager

Exceptions

Based on the evidence provided for this review, no exceptions were identified.

Outcome

Standard met

SSAS Standard: Quality improvement (L3)

The organisation aims for excellence and manages the quality and risk of services.

1. The organisation regularly monitors and makes improvements to its services.

Evidence

- Quality Assurance Programme – 360 Degrees (2019)
- Service User Feedback Procedure (2019)
- Navigation Consumer Feedback Questionnaire (Template)
- Feedback register (up to 30/6/21)
- Interview with the CEO and NASC Manager
- "Where am I at?" Questionnaire (completed at the beginning and end of a service)

Exceptions

Based on the evidence provided for this review, no exceptions were identified.

Outcome

Standard met

SSAS Standard: Client services and programmes (L3)

The organisation provides client services and/or programmes that meet clients' needs, reflect desired outcomes and goals, and are planned, co-ordinated and reviewed.

1. The organisation collects appropriate information and ensures the needs of the client match the criteria for service.
 - 1.1 The organisation ensures it has necessary consents.
2. The organisation develops timely, effective plans for all client services and programmes.

Evidence

- Needs assessment form template
- Navigator Pre-Contracting Tool

- NorthAble Navigation referral form
- NorthAble Navigation plan (Template)
- Needs assessment with consent form (Template)
- Activity proposal, approval, and intentions client activity safety action plan
- Viewed one completed "Where am I at?" Questionnaire (implemented from 1 July 2021)
- Interview with the CEO and NASC Manager
- Service Request to Navigators
- Sample of four CCS client files

Exceptions

<i>Criteria</i>	<i>Findings</i>	<i>Type of finding</i>
2	The Health and Disability Commissions client rights form is used to explain to a client their rights. The form does not have a place for either the client or a parent or guardian to sign the form in acknowledgement that the client understands their rights.	Required Action
2	NorthAble has practices in place to assess client risk but this is not being conducted in the CCS Service.	Recommendation

Outcome

Standard met