

Fact sheet

Practice reviews:

Who should lead a practice review?

About this fact sheet

This fact sheet provides guidance on who should lead a practice review.

It has been developed to help providers decide how to structure a practice review. It is not prescriptive but suggested as a starting point that providers can change or adapt.

This fact sheet is one in a series of resources about practice reviews, and should be read in conjunction with other NDIS Commission fact sheets and publications about practice reviews. As a minimum, it is suggested that you also read the *Practice Review Framework for NDIS Providers*, and the *What is a Practice Review* fact sheet.

Key messages

A practice review is a reflective process that examines a provider’s engagement with a group of participants, and improvements that can be made to their experience of service. It often focuses on a particular practice area, cluster of services, and/or particular team of support workers.

A panel approach may provide opportunity to include participants and workers to provide objective opinions and expertise.

An external, independent reviewer can provide greater transparency and rigour to a practice review.

Subject matter experts can provide insight into best practice and assist with organisational and/or industry benchmarking.

The role of a reviewer

A practice review is usually led by a designated reviewer. The role of the reviewer is to:

* undertake practice research
* undertake industry and/or organisation benchmarking
* conduct desktop audits
* manage the communication and interaction between all the different parties involved
* facilitate reflective practice (at individual, group/team and management levels).

Simple or complex?

A practice review can be simple or complex (Source: Meltzer, A., Conway, P., Dowse, L., Dew, A. and Cooney, E. (2018) Doing an effective case review with a person with disability: A person-centred approach. UNSW Sydney.)

There are varying factors that help determine this. Identifying these will help you decide how the practice review should be structured, and who should lead it.

The process of conducting a practice review remains similar, whether it is simple or complex but may change the degree of coordination and oversight it requires.

Table 1 provides a guide to help you decide if your practice review is simple or complex.

Table 1: Simple or complex practice review

| Simple practice review | Complex practice review |
| --- | --- |
| One or several clearly interconnected issues/focus to address | Multiple issues/focuses to address |
| One service outlet/site or one team involved | Multiple service outlets/sites or cross- organisation teams involved |
| A small number of people who already know each other will be involved | Multiple people from across an organisation, who may have different priorities and focuses, need to be involved |
| Highly regulated or high risk areas are not in scope | Looking at issues that area highly regulated and/or are high risk areas (e.g. high intensity activities, specialised behaviour support, implementing regulated restrictive practices) |
| Does not require a person present with a high level of delegated authority to allocate resources or authorise actions | Requires a person who can make decisions to allocate resources or authorise actions |

A sole reviewer or a panel of reviewers

You are most likely to use a sole reviewer for a simple practice review. This may be where the practice review is part of a regular cycle, embedded in the organisation’s continuous improvement activities (e.g. an annual schedule of practice reviews), or where technical aspects of the review have already been investigated (e.g. a practice review arising from an audit of behaviour support plans). For a simple practice review you are most likely to use an internal reviewer; an **operational manager** or someone from your organisation’s **team that manages quality and safeguarding**.

You are more likely to use a **panel approach** to a practice review when it is complex. The benefit of a panel approach is that it brings multiple perspectives, attitudes, and expertise to examine the issues/situation. It could also provide opportunity to **include people with disability and/or frontline staff** to provide objective opinions and expertise of the lived experience of disability or the practice of disability support work, respectively.

It is also possible your structure will sit somewhere between these two options. A sole person may be responsible for conducting the practice review up to the point of drafting recommendations, and reporting to an **existing committee or practice panel** which has responsibility to reflect on the practice review from a system-wide perspective, and endorse recommendations.

However you decide to structure your practice review, you should ensure the lead person understands its purpose, and the difference to other processes such as investigations or case reviews. The lead person should be someone who is approachable and independent (i.e. not the direct manager or senior manager of the service outlet/site or teams of people involved in the review). Regardless of how your practice review is structured you should always seek the views of participants (i.e. people with disability).

Subject matter experts

You may need to consider using a subject matter expert in both simple and complex practice reviews, depending on the nature of the issue you are addressing.

The role of a subject matter expert is to:

* provide an **independent view** about how well people are providing support in relation to the area of expertise, and
* provide **best practice advice** on their area of expertise.

A subject matter expert may sometimes be the most appropriate person to lead the practice review or to do it as a sole reviewer.

Example of when you might consider using a subject matter expert

If the practice review is looking at a group of people who have respiratory support needs and the quality of the care they are receiving, you would most likely include a suitable, qualified clinician to be involved in the practice review. They might review people’s support plans to provide a view about how well they are meeting organisational and industry standards (e.g. the organisation’s policy and procedure, and any relevant external standards such as clinical practices underpinned by health-related standards and non-clinical NDIS Practice Standards).

External reviewers

External reviewers are used when **objectivity** of the practice review process is particularly important or when **critical judgement and expertise** is necessary.

An external reviewer could be someone from your organisation’s team that manages quality and safeguarding or someone from another organisation providing services similar to yours, or someone else external to your organisation.

An external reviewer may also be a subject matter expert with expertise specific to a particular practice area that informs the review.

When considering whether to use an external reviewer in a practice review, reflect on the following:

* Does the review require multiple layers of the organisation to be consulted, for example, frontline manager, middle/senior managers?
* Do the internal reviewers have any relationship (staff or participants) that could serve as an impediment to rendering an impartial, objective professional judgment regarding the practice review?
* Is there a possibility the participants will hesitate to provide ‘frank and fearless’ responses to the internal reviewers available, based on existing relationships or dynamics?

If you answered yes to one or more of these questions, you may want to use an external reviewer.

Examples of when you might consider using an external reviewer:

* When a subject matter expert is desirable - e.g. when a complex mental health or behaviour issue is being reviewed, a specialised psychologist may be considered.
* When an independent perspective is desirable when other reviewer options (e.g. managers) are too close to the practice/issues in question - e.g. when one of the indicators for the practice review is a number of grievances received from workers about a particular manager, an external consultant may be considered, or a senior manager from another organisation.

Table 2: Summary of practice review lead options

| Type of reviewer | Simple practice review | Complex practice review |
| --- | --- | --- |
| **Sole reviewer** | LIKELY | UNLIKELY |
| **Panel of reviewers** | UNLIKELY | LIKELY |
| **Subject matter expert** | POSSIBLE | POSSIBLE |
| **External reviewer** | UNLIKELY | POSSIBLE |

Related resources

Refer to the Practice Review Framework for NDIS Providers for a complete list of documents related to this series.

| Icon for related resourcesPractice Review Framework for NDIS Providers | Icon for related resourcesSelecting people to participate in a practice review | Icon for related resourcesInformation for family,carers, and other participant supporters |
| --- | --- | --- |

Contact Us

**Call: 1800 035 544** (free call from landlines).

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