Standards Comparison Tool

The ACQS and NDIS Practice Standards Comparison Tool (refer Table 1) identifies how the Aged Care Quality Standards link to the NDIS Practice Standards (and each Quality Indicator). Note that all relevant Quality Indicators for an NDIS Practice Standard are considered during an NDIS audit, so it is important to look at these individually.

We recommend you refer to the *Evidence Guide* (Part I) for suggested ways to demonstrate these requirements.

This Standards Comparison Tool will enable RAC providers to identify where further evidence may be required to gain assurance they are meeting the NDIS Practice Standards.

The following ratings (and colour coding) have been used in the Standards Comparison Tool:

| | Same – Aged Care requirements are the same as those for NDIS Practice Standards |
|----------|---|
| | Some similarities – Aged Care requirements have some similarities to NDIS Practice Standards, and additional evidence would be required to demonstrate all requirements fully |
| ! | Differences – Aged Care requirements are different to NDIS Practice Standards, and additional evidence would be required to demonstrate all requirements |

Table 1: NDIS Practice Standards to Aged Care Quality Standards Comparison Tool

Note: the numbering of the Standards links to the numbering within the NDIS (Quality Indicators for NDIS Practice Standards) Guidelines 2018.

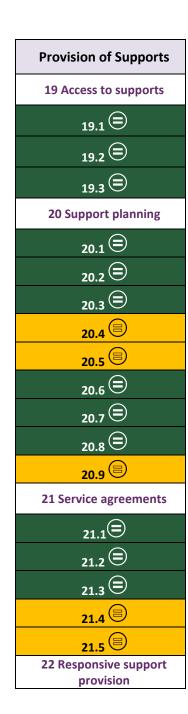
| Rights and Responsibilities |
|------------------------------------|
| 6 Person-centred supports |
| 6.1 |
| 6.2 |
| 6.3 |
| 7 Individual values and beliefs |
| 7.1 |
| 7.2 🗐 |
| 8 Privacy and dignity |
| 8.1 |
| 8.2 😑 |
| 8.3 |
| 9 Independence and informed choice |
| 9.1 |
| 9.1 (=) 9.2 (=) 9.3 (=) |
| 0.2(=) |
| 9.3 |
| 9.4 9.5 |

| 10 Violence, abuse, neglect, |
|---|
| exploitation and discrimination |
| 10.1 |
| 10.2 |
| 10.3 |
| |
| Provider Governance and Operational Management |
| 11 Governance and Operational Management |
| 11.1 |
| 11.2 |
| 11.3 |
| 11.4 |
| 11.5 |
| 11.6 |
| 11.7 |
| 11.8 |
| 12 Risk management |
| 12.1 |

| 12.2 |
|---------------------------|
| 12.3 |
| 12.4 |
| 12.5 😑 |
| 12.6 |
| 13 Quality management |
| 13.1 |
| 13.2 |
| 13.3 |
| 14 Information management |
| 14.1 |
| 14.2 |
| 14.3 |
| 14.4 😑 |
| 15 Complaints management |
| 15.1 |
| 15.2 |
| 15.3 |

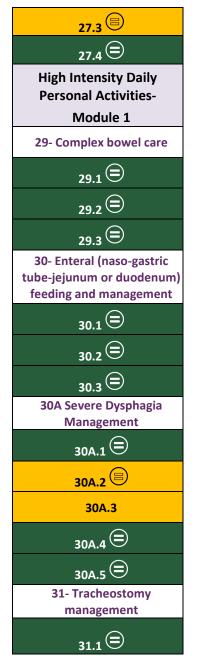
| 15.4 |
|------------------------------|
| 16 Incident management |
| 16.1 |
| 16.2 |
| 16.3 |
| 16.4 |
| 17 Human resource management |
| 17.1 |
| 17.2 |
| 17.3 |
| 17.4 |
| 17.5 |
| 17.6 |
| 17.7 |
| 17.8 |
| 17.9 |
| 17.10 |

| 18 Continuity of support |
|---------------------------------------|
| 18.1 |
| 18.2 |
| 18.3 |
| 18.4 |
| 18.5 |
| 18A Emergency and disaster management |
| 18A.1 (三) |
| 18A.2 |
| 18A.3 ① |
| 18A.4 |
| 18A.5 |
| 18A.6 |
| 18A.7 🗐 |
| 18A.8 🗐 |
| 18A.9 🗐 |



| 22.1 |
|--|
| 22.2 |
| 22.3 |
| 22.4 |
| 23 Transition to or from provider |
| 23.1 |
| 23.2 |
| 23.3 |
| Support Provision |
| Environment |
| 24 Safe environment |
| 24.1 |
| 24.2 |
| 24.3 |
| 24.3 🐸 |
| |
| 24.4 🗐 |
| _{24.4} (=) _{24.5} (=) |
| 24.4 (=) 24.5 (=) 24.6 (=) |
| 24.4 (=) 24.5 (=) 24.6 (=) 24.7 (=) |
| 24.4 (=) 24.5 (=) 24.6 (=) 24.7 (=) 24.8 (=) |
| 24.4 (=) 24.5 (=) 24.6 (=) 24.7 (=) |

| 24.11 |
|-----------------------------------|
| 25 Participant money and property |
| 25.1 |
| 25.2 |
| 25.3 NA |
| 26 Medication management |
| 26.1 |
| 26.2 |
| 26.3 😑 |
| 26A Mealtime Management |
| 26A.1 (三 |
| 26A.2 |
| 26A.3 (=) |
| _{26A.4} (=) |
| 26A.5 (E) |
| _{26A.6} (=) |
| 26A.7 (三) |
| 26A.8 ⊜ |
| 26A.9 (E) |
| 27 Waste management |
| 27.1 |
| 27.2 |



| 31.2 😑 |
|--|
| 31.3 |
| 32- Urinary catheter |
| management (in-dwelling |
| urinary catheter, in-out |
| catheter and suprapubic |
| catheter) |
| 32.1 |
| 32.2 = 32.3 = |
| 32.3 |
| 33- Ventilator management |
| 33.1 |
| 33.2 |
| 33.3 |
| 34- Subcutaneous Injections |
| 34.1 |
| 34.2 |
| 34.3 |
| 34.4 |
| 35- Complex wound |
| management |
| 35.1 |
| 35.1 (a) 35.2 (a) |
| 35.3 |
| |

| Implementing behaviour support plans – Module 2A |
|--|
| 47- Behaviour Support in the NDIS |
| 47.1 |
| 47.2 |
| 47.3 |
| 48- Regulated restrictive practices |
| 48.1 |
| 48.2 |
| 48.3 ① |
| 48.4 |
| 48.5 |
| 49- Supporting the assessment and development of behaviour support plans |
| 49.1 |
| 49.2 |
| 49.3 |
| 49.4 |

| 50- Behaviour support implementation |
|---|
| 50.1 |
| 50.2 |
| 50.3 ① |
| 50.4 |
| 50.5 |
| 50.6 |
| 50.7 |
| 51- Monitoring and reporting the use of regulated restrictive practices |
| 51.1 ① |
| 51.2 |
| 51.3 |
| 52- Behaviour support plan review |
| 52.1 |
| 52.2 |
| 52.3 |
| 52.4 |

| 53- Reportable incidents involving the use of a restrictive practice |
|--|
| 53.1 |
| 53.2 |
| 53.3 ① |
| 53.4 |
| 53.5 ① |
| 53.6 |
| 53.7 |
| 54- Interim behaviour support plans |
| 54.1 |
| 54.2 |
| 54.3 |
| - |