



## CAB & Auditor Newsletter

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The Australian Community Industry Alliance (ACIA) is pleased to share our ongoing quarterly update for Certified Auditing Bodies and Auditors.

As a key partner in upholding quality and safety across community care services, your role is essential to the integrity and impact of the ACIS certification system. Through this newsletter, we aim to keep you informed of important updates, policy changes, best practice insights, and shared learnings that support consistent, high-quality auditing across the sector.

Together, we ensure that providers continue to meet the rigorous standards expected under ACIS, delivering trusted care to individuals supported by personal injury schemes and beyond. We appreciate your ongoing collaboration and commitment to excellence.

### Strengthening Risk Oversight: New ACIA Policies on Adverse Events and Information Sharing

ACIA has recently released two new policies to support stronger, more consistent risk identification and escalation across the ACIS certification scheme:

- *ACIA External 046 – Prevention and Management of Adverse Events in Community Care*
- *ACIA External 047 – Information Sharing Guidelines*

Together, these frameworks provide clear expectations and practical guidance for CABs and auditors in identifying, assessing, and escalating risks to participant safety and service quality.

#### What this means for CABs and auditors:

- **Clear escalation requirements**  
CABs are now required to escalate:
  - Serious or imminent risks within 24–48 hours
  - Systemic or emerging risks within defined timeframes  
This supports timely intervention and consistent scheme-wide responses
- **Stronger risk-based auditing approach**  
Auditors play a critical role in identifying:
  - major nonconformities with potential for harm
  - patterns of poor practice
  - deterioration in provider capability or governance  
These insights are central to early risk detection under the ACIS scheme.
- **Improved information flow to support audit planning**  
ACIA will provide CABs with:
  - relevant intelligence from scheme funders
  - emerging sector risk trends
  - guidance to inform audit scope, focus, and timing
- **Consistency in managing serious risks and adverse events**  
The adverse events policy outlines coordinated processes between ACIA, CABs, and scheme funders, including:
  - early surveillance or spot audits
  - certification conditions, suspension, or revocation where required
  - structured follow-up and monitoring
- **Clarity on information quality and expectations**  
Information provided by CABs must be:
  - evidence-based and objective
  - clearly distinguish findings from allegations
  - proportionate to the level of risk
  - aligned with procedural fairness and privacy requirements

#### ACIA approach

These policies reinforce the role of CABs and auditors as critical partners in safeguarding participant outcomes, shifting the focus from compliance alone to:

- proactive identification of risk
- timely and transparent escalation
- consistent, evidence-informed decision-making

By strengthening how risks are identified and communicated, ACIA aims to support more effective audits, clearer expectations, and greater confidence in certification outcomes across the scheme.

[ACIA External 046 - Prevention and Management of Adverse Events in Community Care](#)

[ACIA External 047 – Information Sharing Guidelines](#)

### ACIS Self-Assessment Forms Amended

ACIA has made a minor update to the ACIS self-assessment forms in response to feedback from CABs.

Feedback indicated that providers were often only selecting services they are currently delivering, rather than outlining their full intended scope of certification, which created challenges for audit planning and scope determination.

#### To address this, the forms have been updated to clarify that providers should include:

- services they currently provide, and/or
- services they intend to provide under ACIS certification

This change is designed to support more accurate scoping, improved audit planning, and a smoother certification process.

ACIA appreciates the practical feedback provided by CABs and will continue to refine tools to support consistency and clarity across the scheme.

### New ACIA Practice Guidelines Released

ACIA has released a new suite of Practice Guidelines to support safe, consistent, and high-quality community care delivery, aligned with ACIS 5.0.

#### New Practice Guidelines include:

- *ACIA 048 – Trauma Informed Care and Support*
- *ACIA 050 – Assistive Technology*
- *ACIA 051 – Advanced Airway and Suctioning Management in the Community*
- *ACIA 056 – Mental Health Support*
- *ACIA 057 – Spinal Cord Injury Management*

#### Upcoming Practice Guidelines include:

- *ACIA 049 Oncology Management in the Community*
- *ACIA 052 Ventilator Care and Management*
- *ACIA 053 Traumatic Brain Injury*
- *ACIA 054 Epilepsy in the Community*
- *ACIA 055 Complex Cognitive Impairment Support*
- *ACIA 058 Ethical Use of Artificial Intelligence in Community Support*

These guidelines focus on complex and high-risk areas of care, providing practical guidance to strengthen clinical governance, workforce capability, and person-centred practice.

Available free to CABs and auditors, these guidelines are a valuable resource to support:

- Understanding of best practice expectations under ACIS 5.0
- Identification of appropriate evidence during audits
- Consistent interpretation of what best practice looks like in service delivery

ACIA encourages CABs and auditors to actively utilise these guidelines to support robust, consistent, and evidence-informed audit outcomes across the scheme.

[Access Practice Guidelines](#)

### ACIS Review Cycle Commencing: Feedback and EOI Now Open

ACIA is commencing the review cycle for the next iteration of the Australian Community Industry Standard (ACIS).

As key partners in the certification scheme, CABs and auditors play a critical role in ensuring ACIS remains practical, robust, and reflective of real-world service delivery.

**We are inviting:**

- Feedback on ACIS 5.0, including areas for improvement, clarification, or emerging risks
- Expressions of Interest (EOI) to participate in the ACIS Stakeholder Reference Group

The Reference Group will support the review process by providing expert insight, audit experience, and sector perspectives to inform future updates to the Standard.

This is an opportunity to contribute to the ongoing development of ACIS and help ensure it continues to support high-quality, consistent, and evidence-informed certification outcomes. For feedback or to submit an EOI, please contact [contact@acia.net.au](mailto:contact@acia.net.au)

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## Policy Insight: Supported Decision-Making Reform in NSW

ACIA has recently provided a submission to the NSW Parliamentary Inquiry into supported decision-making for adults with disability and older people, highlighting key challenges and opportunities across community care systems. The submission reinforces that for individuals with acquired disability, decision-making is not a one-off event but an ongoing, dynamic process, influenced by recovery, cognitive changes, and the involvement of multiple service systems.

For CABs and auditors, supported decision-making is a critical area of assessment under ACIS 5.0, particularly in relation to Standard 1.2. Auditors play an important role in identifying where providers may be defaulting to substitute decision-making, failing to recognise fluctuating capacity, or not adequately supporting a participant's will and preferences. This includes assessing evidence of how providers enable choice, involve clients in decisions, and embed supported decision-making into everyday practice.

**Key risks and insights for CABs and auditors include:**

- **Fragmentation across systems**  
Individuals often navigate health, disability, compensation, and social support systems with inconsistent definitions of capacity and decision-making rights, leading to confusion and reduced autonomy.
- **Default to substitute decision-making**  
Time pressures, risk management practices, and scheme requirements may unintentionally drive substituted decision-making over supported approaches, particularly in complex cases.
- **Carer burden and system navigation challenges**  
Families, often new to disability, are frequently required to act as decision-makers without adequate guidance, increasing the risk of unintentional override of the person's will and preferences.
- **Impact on engagement and outcomes**  
Where decision-making is not effectively supported, individuals may experience reduced confidence, disengagement from services, and poorer long-term outcomes.

**Implications for audit practice:**

The findings highlight the importance of embedding consistent, cross-system approaches to supported decision-making, particularly in personal injury contexts where participants interact with multiple funding and service environments.

**Auditors should consider:**

- Whether supported decision-making is actively demonstrated in practice, not just documented
- How providers assess and respond to decision-specific and fluctuating capacity
- The extent to which client voice, preferences, and participation are evidenced in care planning and service delivery
- Whether carers are appropriately supported without overriding the participant's autonomy

**ACIA perspective**

ACIA advocates for a system where supported decision-making is consistently applied, well-understood, and actively enabled, rather than overridden by risk-averse or fragmented processes.

Strengthening these frameworks will support:

- Improved participant autonomy and dignity
- Better engagement with services
- More sustainable, person-centred care outcomes

[NSW Parliamentary Inquiry - Supported Decision Making](#)

