

**LIFE  
WITHOUT  
BARRIERS**

# Practice Governance Framework

Partner with people to change lives for the better



[lwb.org.au](http://lwb.org.au)



# Acknowledgement of Country

Life Without Barriers acknowledges Aboriginal and Torres Strait Islander peoples as the Traditional Owners and Custodians of this country and their connection to land, water and community.

We pay our respect to them, their cultures and customs and to their Elders past, present and emerging. We believe that reconciliation must live in the hearts and minds of all Australians.

We are committed to an ongoing journey towards truth telling and reconciliation. We recognise and value the contribution of Aboriginal and Torres Strait Islander employees, carers, people we support, peak bodies, organisations, their leaders, and communities across Australia as we continue our reconciliation journey together.

*'Empowered Voices' artwork created by  
Keisha Leon, Lisa Sorbie Martin and Gilimbaa.*

## Message from Board Chair, Chief Executive and Practice Governance Committee Chair

**Life Without Barriers is trusted to deliver a full range of community and wellbeing services, partnering with people across Australia, to change lives for the better.**

We are passionate about the quality of our practice and a culture of continuous and ongoing improvement in every part of our organisation. In 2018 we implemented our first Practice Governance Framework (PGF), and we are now taking this work to the next level, involving deeper cross-organisational and client involvement along with a rigorous approach to implementation.

We envisage a PGF where together, we are working on practice improvement, in a system that involves people we support giving feedback and insights into what we can do better. Our purpose is to support continuous learning and development and therefore driving better outcomes for the people we support.

The Board plays a central role in the stewardship of practice governance and giving our practice approach due attention through a strong governance system, one which puts practice improvement at the heart of our decision making. While our leaders have a key role in implementing the PGF, every person in our organisation plays a critical part in improving practice quality.



**Claire Robbs**  
Chief Executive



**Greg Ridder**  
Board Chair



**Cathy Taylor**  
Non-Executive Director

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## Our Purpose

Our founding purpose is to partner with people to change lives for the better.

## Our Values

Life Without Barriers is a values driven organisation. Our values guide our decisions and help determine actions at all levels of the organisation. The values represent the critical elements that have been demonstrated to underpin effective practice. They are essential to practice within our organisation and provide the overarching guidance that enables staff to partner with people, develop trusted relationships and help people achieve their goals rather than just provide prescriptive care.

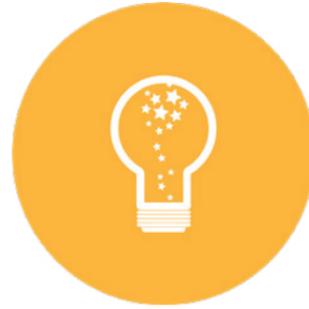
**We build relationships**



### Relationships

Relationships are everything. They are how we connect, form trust and understand what people expect and are seeking from us. Relationships are what we bring to every intention, every action and every partnership.

**We are imaginative**



### Imagination

Imagination gives us eternal optimism and creativity to be unrestrained in how we seek to partner and solve problems.

**We are respectful**



### Respectful

We value every person we partner with and honour one-to-one connections. Respect is our human currency, it means we behave authentically and with integrity.

**We are responsive**



### Responsive

We are thoughtful and responsive because we believe we can be considered in our thinking while adapting at speed. We listen and respond to people's expectations and choices – getting things done swiftly and thoroughly, every time.

**We are courageous**



### Courageous

Our courage is forged through optimistic determination. It is our way of being bold and generous in all our relationships and endeavours. Courage is our excitement and our perseverance, as we steer steadfastly to our purpose.

## Purpose and focus of the Practice Governance Framework

The quality and nature of practice is a key driver of outcomes for the people requiring community-based services. Because of this, practice is not just the responsibility of individuals, it must be owned and embraced by the whole organisation.

This means that practice quality is a central Board concern and ought to be a primary lens the Board applies across its governance functions, including within strategy, finance and risk domains.

All Board-level decisions should be weighed against the potential to support effective practice or impede it. A well implemented Practice Governance Framework (PGF) is the primary tool the Board can use to make practice the central concern of the whole organisation so that all activities support excellence in client care and best possible outcomes. A PGF when operating well under the stewardship of the Board, effectively puts the people receiving services at the centre of every decision and the systems and processes in place to deliver supports.

Leadership cascading from the Board is crucial to effective practice governance because it establishes the culture, authority and resources necessary to support continuous improvement in practice. Leadership teams can then use practice governance to align practice with strategy, values and in scaling innovation. Everyone has a role to play in delivering or supporting best practice. Practice is not just

the responsibility of employees providing direct care. It requires all employees and teams to have a recognition and culture of continuous learning and what is needed for a great service experience. This is why an equally important role of the PGF is facilitating emergent change; that is, change identified, owned and enacted from the ground up. An effective practice governance system puts the tools in the hands of the people best placed to drive that continuous improvement and enables all staff to understand their role in good practice.

The essential question for a PGF is ‘Are we doing what we need to do, with enough consistency and rigour to bring about the positive changes we are guided by from the people we support and where could we improve?’ It entails embedding key quality measurement and improvement processes at the program or activity level, then to a whole of organisational view. When organisations are explicit about what they do (meaning practice) and measure results, they create a more effective and robust line of sight between practice and client outcomes.

As a diverse and dynamic national service delivery organisation, implementing a shared PGF consolidates common approaches within and across all programs and teams.

## Context of Practice Governance at Life Without Barriers

Life Without Barriers is one of Australia’s largest social purpose organisations, supporting more than 23,000 people across 400 communities, through our dedicated team of over more than 13,000 employees and carers. We provide services to children, young people and families, people with disability, people with mental health support needs, people with alcohol and drug issues, older people who wish to remain in their homes, people who are homeless and people seeking refugee and asylum seeker status in Australia.

We provide people with support and assistance as determined by them, so they can achieve their goals, maximise life opportunities and participate in their community. We have a strong legacy of commitment to human rights and providing person-centred and individualised services.

Many of the people we work with are living in locations and communities that do not have the resources they may need to thrive. Contextual factors, such as lack of affordable housing, barriers in employment, access to healthy food, and broader factors like discrimination and racism can place significant stress on the everyday lives of the people we work with. We can be a safe harbour of support to people and their communities through the quality of our practice, helping people navigate life’s storms, as well as through our broader advocacy for social and economic policy change.

Life Without Barriers is integrating the PGF into all aspects of our organisation, from direct care through to management and the Board, so improving client outcomes.

The priorities for delivering the Life Without Barriers purpose are outlined in **Strategy 2025**. Our strategy for the next five years is to maximise the impact we have by being clear and focused on our goals:

- 1. Deliver Great Services:** We commit to meeting and striving to exceed our measures for a great service experience. Through a culture of reflective practice, we continuously assess and improve our approach, systems, and processes in every service we offer. We maintain what is proving effective in services and seek to offer new services that are responsive to individual and community needs.
- 2. Influence Systemic Barriers:** Life Without Barriers will continue to establish strong relationships and purposeful partnerships to influence complex and long-standing systemic barriers faced by the people we support. We will give generously of ourselves, our resources and experience, to create lasting change.
- 3. Impact for Future generations:** The future should not be left to chance. We are hopeful about creating collaborative spaces where ideas can emerge, and that together, we can build a more inclusive, equitable, and environmentally responsible future for all.



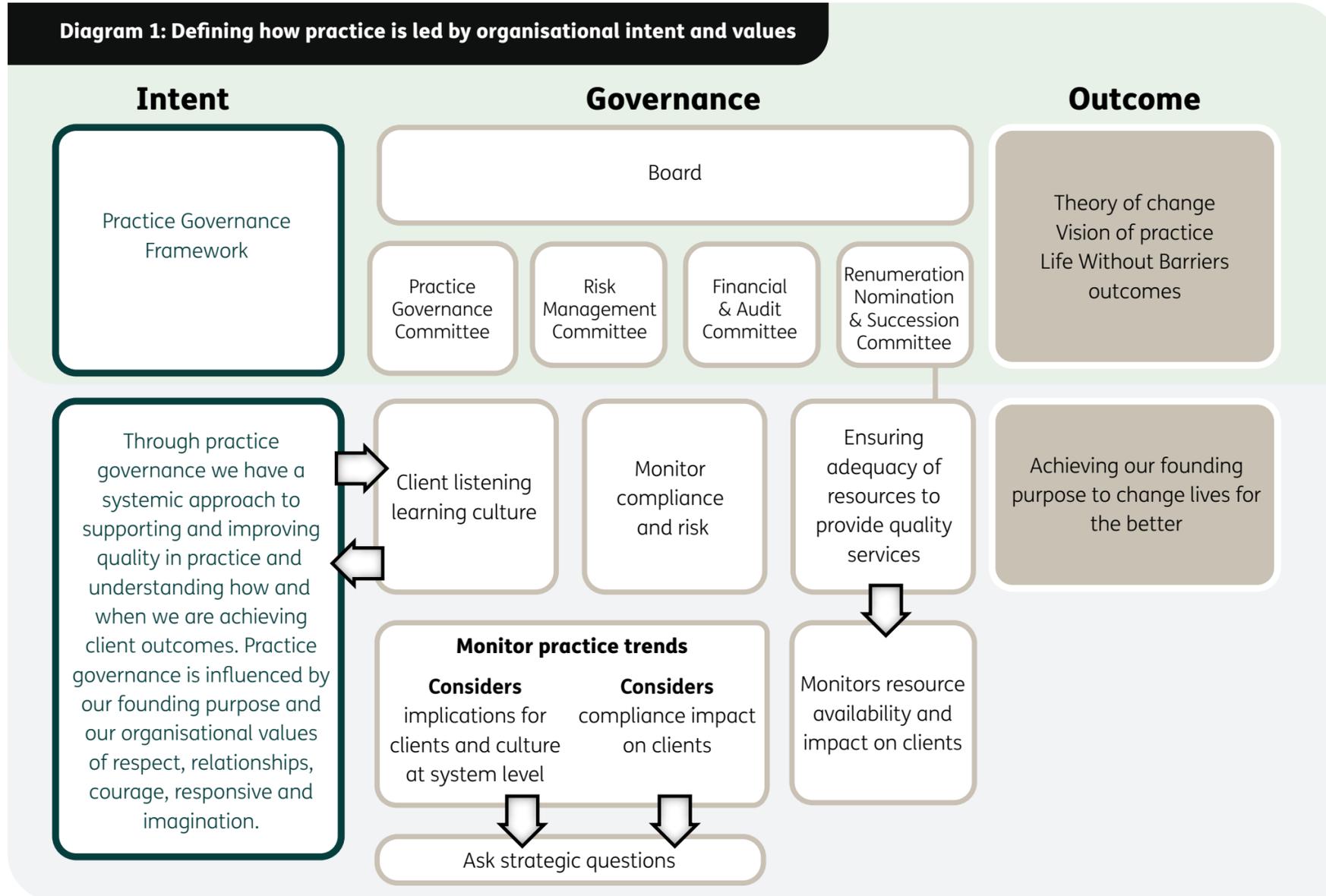
## Defining Practice Governance

**Practice** is the observable skill of a worker purposely engaging, interacting, and forming a relationship with an individual or a group of people within their world, to achieve positive outcomes.

**Practice governance** is a systematic approach to supporting and improving quality in practice and to understanding how and when we are achieving client outcomes. Practice governance, like clinical governance, is a form of quality governance that transcends quality assurance. Quality assurance is interested in compliance with an externally established standard. Whilst a comprehensive approach to practice governance may contain aspects of assurance, its primary interest is achieving excellence through continuous quality improvement. Contemporary clinical governance frameworks are aligned with this quality approach to practice governance.

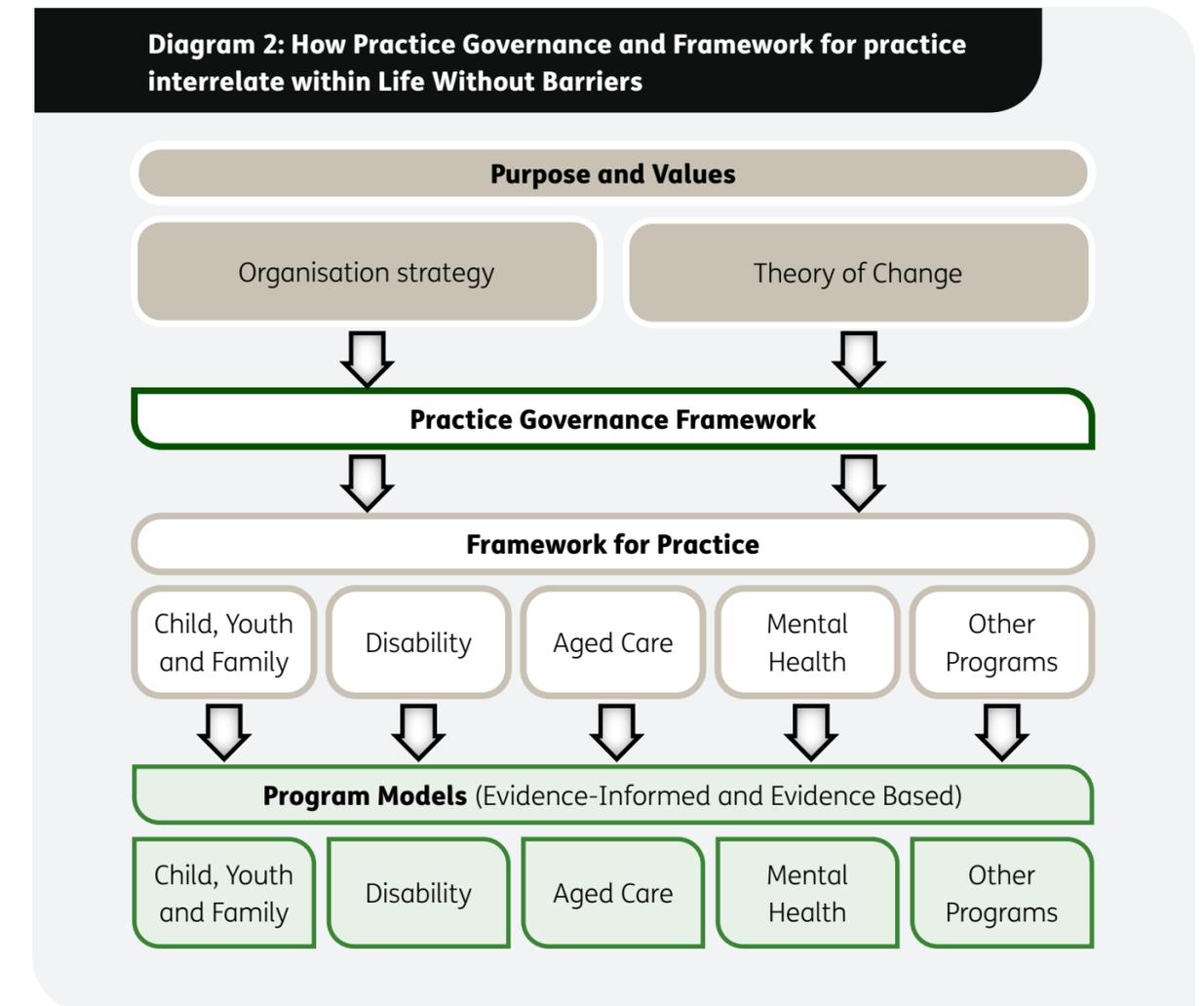
Practice governance is different from risk management. In risk management, we ask, 'What could go wrong and how do we prevent that from happening?' Effective practice governance requires a different set of disciplines focused on the question, 'How could we do things better?' Practice governance sits beside and complements risk management: it provides another lens through which to consider risk related issues and it provides a mechanism for effectively engaging all levels of the organisation in sustainable change. Diagram one, on the next page, shows the interface between our organisational intent for practice (which is articulated in the Pillars of Practice), the various governance bodies and the outcome we are working to achieve.

**Diagram 1: Defining how practice is led by organisational intent and values**



**Practice Governance Framework** makes explicit the fundamental principles, elements, processes and systems that support quality in practice across the whole organisation. It differs from Life Without Barriers Frameworks for Practice which explain consistent practices, actions and behaviours that enable effective work with clients when implemented in our various programs to achieve client outcomes (see Diagram 2 below). The Practice Governance Framework is a systematic organisational approach to supporting and improving quality in practice across Life Without Barriers, whereas a Framework for Practice outlines the actions and behaviours that achieve program-specific outcomes. This means the Practice Governance Framework must be broad and flexible enough to accommodate the range of outcomes, models of service delivery, and practices that are required to meet our clients' needs.

**Diagram 2: How Practice Governance and Framework for practice interrelate within Life Without Barriers**





## Assumptions and Principles underpinning practice governance

The principles that underpin the Practice Governance Framework establish the fundamental assumptions, beliefs, attitudes and behaviours crucial to an effective practice governance system.

Making our principles explicit to all stakeholders helps set out the kind of culture we aspire to for meaningful and genuine practice governance. For example, it is imperative that our teams feel safe and supported to report incidents, near misses, performance concerns, adverse events or areas for potential improvement. The principles align with our organisational values and our Strategy 2025.

The key principles underpinning Life Without Barriers approach to practice governance are:

- The **views and choices** of people we support are heard and included in decision making and design of services.
- **Shared accountability and commitment** to learning and improving practice – where practice is everyone’s business.
- **Transparency and openness** - reporting, reviews and decision making are underpinned by transparency and accuracy and linked to decision making and open disclosure processes.
- A **culture** that recognises mistakes do happen in the workplace and that workers are proactively encouraged to report errors so they can be rectified swiftly without the actions being targeted for blame and ensuring just treatment of people when issues have occurred.

## Elements of the Practice Governance Framework

There are five elements to the approach to practice governance at Life Without Barriers. Together these form the Practice Governance Framework.

1. Vision for practice
2. Pillars of practice
3. Levers of practice governance
4. Practice governance system
5. Roles and responsibilities

## Vision for Practice at Life Without Barriers

The primary focus of practice is the nature of the relationship and the quality of interaction between staff and the people we support. These strong, purposeful relationships help us deliver effective, high-quality services with the best possible outcomes that support choice and self-determination and help people to live life to the full.

Effective relationships are a foundational element in everything we do at Life Without Barriers. It is more than just working together; it is making lasting connections and building trust. Our relationships are strong and enduring and have the power to impact real change through knowledge of each person and the trust that formed through relationships. Central to this vision is a focus on continuously improving our practice.

## Pillars of practice

Pillars are the core features of quality practice; they are the mainstay of all good practice. We differentiate between what quality practice looks like (e.g., safe and effective) from the levers for achieving quality practice (e.g., leadership, effective supervision) (See Diagram on page 20).

Our five Pillars of Practice are:

- **Effective:** practices are adapted for context, evidence informed, evaluated for effectiveness and result in improved outcomes for the people we support
- **Safe:** practices are delivered in ways that promote safety and security for all people supported by our services, minimising risks and harm
- **Person-centred:** through listening to the voice of the client, practices are designed and delivered to reflect the preferences, need and values of the people we support
- **Inclusive:** practices are delivered in ways that give everyone the opportunity to access the support they need, in ways that pay attention to culture, identity and connection, with diversity celebrated and considered a strength.
- **Coordinated:** the people we support experience continuity as our services (internally and externally) work together to achieve individual goals, maximise integrated approaches, advocate for change and avoid waste and duplication.

## Levers of practice quality

Levers are the interdependent mechanisms Life Without Barriers has to drive continuous improvement in practice. The key levers identified for Life Without Barriers are:

- **Leadership:** our leaders are purposeful and accountable in making sure our pillars of quality in practice are delivered to clients. Our culture is shaped and enriched by our leaders.
- **Partnership:** our approach empowers participation and shared decision making in practice design and improvement, enriching our understanding of what practice quality looks like as we understand, share power and engage in the experiences of people using our services.
- **Workforce development:** we provide effective learning and supervision opportunities with a focus on development and improvement and recognise the role and accountability in practice of all employees in Life Without Barriers
- **Mental models:** we use messages and stories that help shift deeply held assumptions and ways of thinking, breaking down long held stereotypes and creating a positive change in how people think about and practice with clients.
- **Resource availability and operational environments:** we strive to be an efficient organisation and good financial stewards so as many resources as possible are directed towards the delivery of a great service experience for people.

## Practice Governance System

Our practice governance system is the engine room that enables us to understand quality in practice, how practice is improving, and the outcomes we are achieving for those we support. This system includes activities and actions that support line-of-sight to practice for the Board, management, staff and clients. The Board has stewardship of the practice governance system, ensuring stakeholders have engaged in designing the PGF, understand their role within it and that the system is effectively driving the focus on practice quality and improvement.

An effective system puts the following in place in each key program or activity:

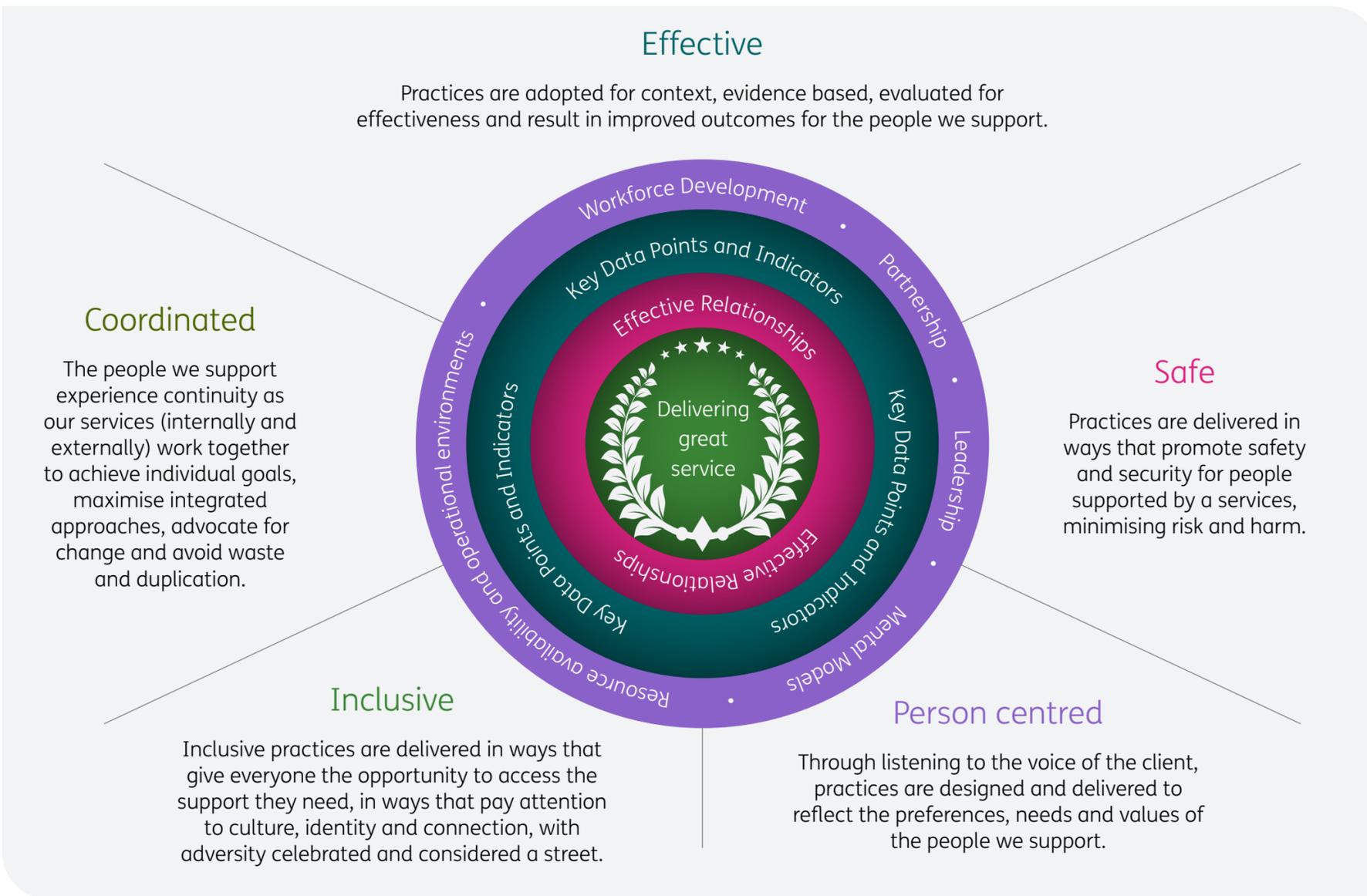
- Clarity in intended outcomes for clients that is informed by them
- A theory of change (program logic) that:
  - Makes the mechanisms of change explicit (or how the program works)
  - Aligns with core organisational purpose, principles, values, and pillars of practice; and
  - Is consistent with best available evidence.
- Specification of key practices/activities required to bring the theory of change to life
- Resourcing including allocation decisions (money, people, knowledge, information and other assets) are used to facilitate developing and maintaining quality in practice
- Policies that support key practices and listen and respond to client voice

- Systematic collection of quantitative and qualitative indicators of outcome and fidelity of practice
- Team-based continuous improvement processes that use the data to:
  - a. Monitor and drive improvement initiatives using Plan-Study-Do Action cycles; and
  - b. Support the testing and ongoing development of the program's Theory of Change.
- Reporting mechanisms that inform the whole organisation on what is being learned, where improvement efforts are being focused, and the results of those improvement efforts.

## Key data points and indicators

Collecting meaningful and relevant information over time enables the benefit of learning from trends in data and reporting for the direct purpose of informing and improving our practice; importantly it also helps us keep each other accountable. Reporting must have a clear purpose and be linked to the pillars and levers of practice quality. It must also consider the most efficient means of data collection and complement other data requirements.

**Diagram 3: Pillars of Practice, Levers and Data Points**



## Roles and responsibilities in practice governance clients and families

The Board, its committees and all levels of our workforce provide opportunities, systems and processes for clients and family members, and their advocates to contribute to practice quality.

Here we are talking about including lived experience in practice governance and improving services rather than our client's central role in a person-centred approach to decision making, planning and their care.

In addition to providing feedback in surveys and reporting concerns, client involvement may be by:

- Participating in service planning, development and delivery
- Participating in policy development
- Participating in strategy and governance processes
- Communicating about opportunities for improvement and innovation in the organisation
- Communicating with the organisation about safety and quality issues
- Being involved in quality improvement projects
- Advocating for or representing other clients in groups or meetings regarding practice
- Reviewing and commenting on safety and practice quality reports
- Participating in reviews of incidents and adverse events
- Co-designing monitoring, measurement and evaluation systems

- Participating and presenting at conferences with staff to showcase learning from practice outcomes
- Participating in consumer reference groups.

## Life Without Barriers Board

The Board is responsible for making practice quality and governance a central organisational concern. It is a key consideration in all Board decision making, focusing at a high level on the practice quality implications of corporate, financial, risk and other decisions. For example, in the area of strategy a strategic opportunity and challenge is to effectively support evidence driven innovation. Similarly, financial decisions should be partly shaped by the imperative to provide sufficient resources to ensure sustainability and direct resources towards continuous practice improvement. Not only should risks to effective practice be articulated and mitigated, proposed risk mitigation strategies should be evaluated against their potential to facilitate or impede quality practice.

Another key aspect of the Board's role relates to its leadership. Genuine practice improvement depends heavily on an open culture that recognises mistakes can happen. The Board sets the tone and establishes key cultural norms in the way it interfaces with staff and clients in driving a focus on practice quality. It can do this by modelling an openness to mistakes as a function of learning and innovation, space for non-judgmental review in the pursuit of innovation, and an intense interest in opportunities for continuous improvement.

As the ultimate owner and steward of the practice governance system, the key overarching Board-level question is, 'do we

have the cultural and system requirements to drive continuous improvement; are we seeing improvement efforts, and are the results of improvement initiatives evident in the outcomes we are getting for our clients?' Stewardship of the system also means constantly exploring questions such as:

- What has worked well and how do we know this demonstrates practice excellence?
- Where is there opportunity for improvement?
- How will we know if there is improvement?
- What is being done to drive improvement?
- What has been learned from the improvement efforts so far?

## Life Without Barriers Practice Governance Committee

The Practice Governance Committee's role is to actively and visibly engage on quality in practice with the organisation and ensure input and involvement of people with lived experience, including the people we currently support. This overarching, strategic-level engagement in practice quality governance differs from management responsibility for implementing systems that support the PGF and identifying, conceiving, and completing improvement cycles.

### Engaging with management and staff

This involves:

- Building a culture of joint organisational ownership of quality in practice
- Scheduling practice quality and safety presentations by staff/management to Board/PGC
- Presentations from staff/management showcasing practice achievements

- Soliciting staff views on effectiveness of practice quality information and data
- Seeking staff feedback
- Engaging with staff about creating and developing practice indicators
- Designing and reviewing practice governance structures collaboratively with staff.

### Regularly receiving, analysing and taking action on information on practice and client outcomes

The PGC needs regular access to the most relevant information on quality of practice, client outcomes and client issues to accurately and critically scrutinise that information. .

### Engaging with clients and their families

This involves strengthening and building:

- Opportunities for involving clients in practice governance
- Systems supporting clients engaging in decision making
- Processes for involving people with lived experience in governance design
- Staff engaging clients in creating, developing, monitoring and improving practice quality, and governance goals and plans
- Real experiences of people with lived experience – positive and negative being used – to focus quality in practice and show specific actions and impact.

### Information and learning is shared and acted upon

The PGC enables open sharing and information exchange to support quality in practice within the organisation.



## Management and Leadership

Our CEO, Executive and Senior Managers play a critical role in practice governance as it is through their leadership and actions that a culture of openness, learning, innovation and practice improvement is communicated, operationalised, supported and implemented. This accountability exists across all leaders, from corporate and administration services through to operational leadership. Leaders contextualise their contribution to practice, recognise how their teams interact and sequence activity towards continuous learning that benefits the client experience. As leaders they engage everyone in the task of driving quality improvement, creating the norms, tools and processes that guide quality improvement at the service and program level.

### Active engagement on quality practice

This involves:

- Installing and implementing the practice system across the organisation in all directorates
- Developing and reviewing organisational and administrative policies that support effective practice
- Promoting a culture of shared learning through for example, showcasing positive examples and innovations, and highlighting practice success across the organisation
- Effectively engaging across corporate and operational teams so the whole of organisation commitment to practice is evidence in plans and activity.
- Implementing opportunities for the involvement of lived experience in practice governance

- Building systems that support client engagement in decision making
- Overseeing processes for involving clients in governance design
- Engaging the people we support in the creation, development, monitoring and improvement of practice quality and governance goals and plan
- Use of lived experience stories – positive and negative – to focus on practice quality and show specific actions and impact.

### Engaging with employees at all levels of responsibility

This involves:

- Operationalising a culture of joint organisational ownership of quality in practice
- Undertaking regular site/office visits (physical or virtual)
- Soliciting staff views on effectiveness of practice quality information and data
- Seeking staff feedback
- Engaging with staff about creating, developing and communicating indicators, goals and plans.

### Regularly receiving, analysing and taking action on information on practice and outcomes

This involves:

- Providing key data to PGC through data dashboards, presenting summaries of the most important metrics (converting data into intelligence for analysis)
- Providing and regularly reviewing data including with practice leaders, that gives information on dimensions of quality

- Focusing on trends over time rather than single reporting period results
- Providing key metrics that reflect:
- Indices of data rigour and validity (e.g., % staff completing staff feedback)
- Quality indicators and outcomes (e.g., complaints, incidents, near misses etc)
- Quality system performance (e.g., induction training effectiveness, progress against engagement with staff, clients, partners; staff awareness of performance information)
- Quality system impact (i.e., impact of design improvements)
- Include qualitative and descriptive data (e.g., real client stories – both positive and negative; practice innovations) to avoid the risk of measuring quantitative data in isolation.

### **Information and learning is shared and acted upon**

This involves:

- Supporting continuous practice improvement by ensuring an organisation-wide agenda and system for practice improvement is implemented and evaluated
- Supporting the organisation to remain focused on continuous practice improvement
- Proactively seeking qualitative and quantitative information including from clients and staff about practice quality
- Communicating the whistle-blower/ reporting process to staff.

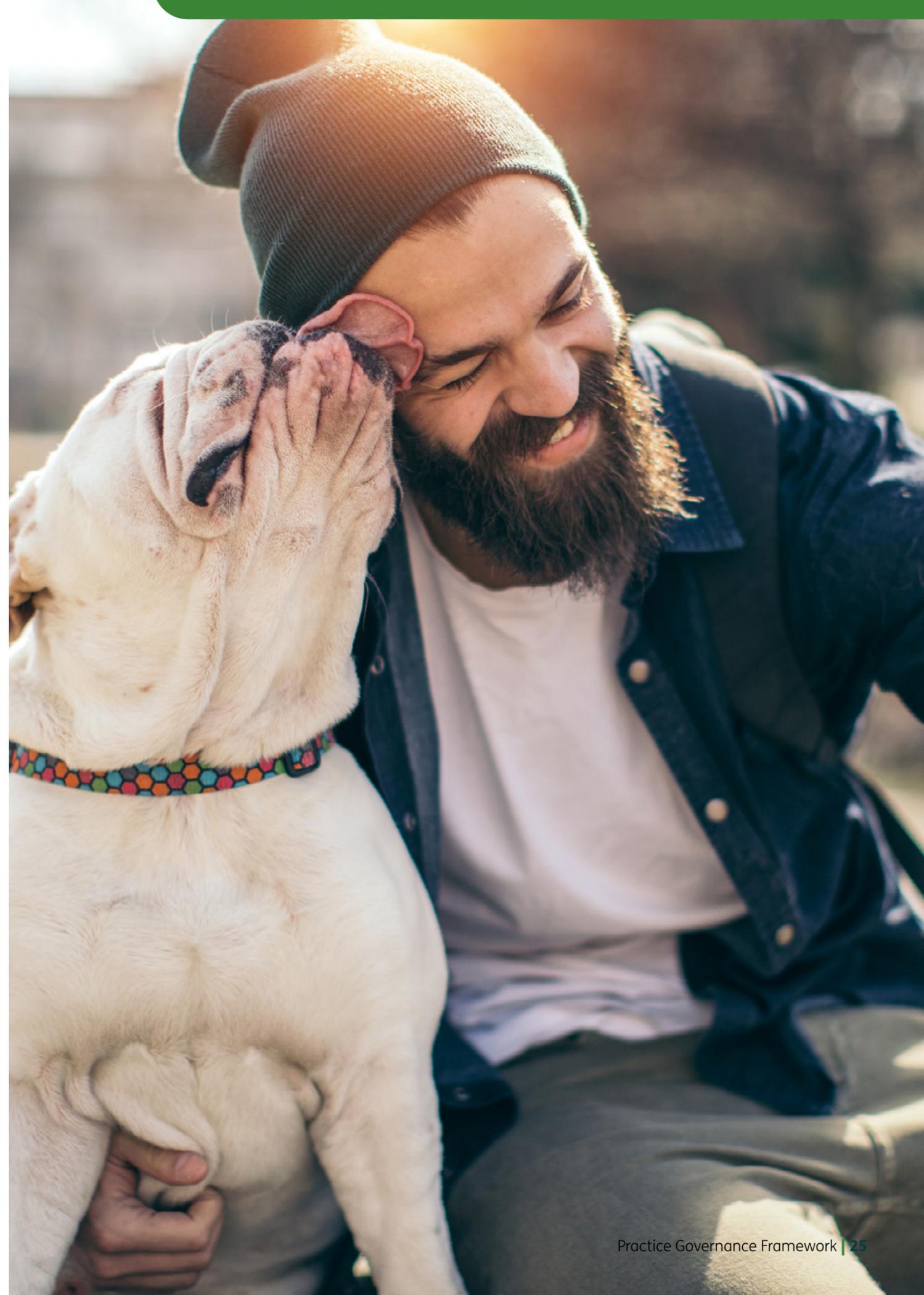
## **Direct Care Employees**

Practice leaders, middle managers and front-line staff play a critical role in practice governance as they have direct interactions with the people we support, and the quality of these interactions in achieving outcomes are at the core of continuous practice improvement.

### **Engagement and involvement on quality in practice**

As direct care operational staff have the most contact with clients and families, several critical on-the-ground responsibilities exist for engaging and involving at this level:

- Supporting the people we work with to share their experiences of practice and services
- Engaging in opportunities for involvement in the practice governance framework, vision and values for practice
- Actively engage in and support the work of Practice Improvement Teams running continuous Plan- Do-Study-Act cycles
- Presenting to the Executive on practice quality and safety
- Participating in designing and implementing the system for practice improvement and measurement, risk and incident management, open disclosure, feedback and complaints
- Participating in reviews of safety and quality in practice.



## Supporting development of and reporting on practice quality

Systems need to be in place to support staff, via the Executive, to report up to Management and the PGC on practice, innovations, improvements and outcomes, and any arising issues. Responsibilities for reporting on practice quality include the following:

- Regularly reviewing data that gives information on dimensions of quality
- Working with policies and procedures that support quality practice
- Highlighting successes and innovations in practice
- Reporting to management on practice quality concerns, improvements and innovations
- Using mechanisms designed to capture staff concerns, e.g. a widely promoted whistle-blower policy
- Being prepared to blow the whistle if necessary
- Analysing and challenging practice quality information for reporting to committees
- Providing feedback by participating in staff surveys on practice
- Regularly updating skills and practice knowledge to provide the best possible services
- Monitoring and reviewing practices and focus on continuous practice improvement.

## Resources

- Theory of Change
- LWB Values
- LWB Culture Statement
- Strategy 2025
- PGC Terms of Reference and Charter
- Parenting Research Centre - Evidence Review of Practice Governance Frameworks
- Definition of terms

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## Our Partners



The Life Without Barriers Practice Governance Framework was developed in partnership with the Parenting Research Centre. Thank you to the Parenting Research Centre for your ongoing partnership and guidance.

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