## **Tips for ASES Project Leaders**

|  |
| --- |
| 1. **Hold a launch or kick-off event**
 |
| * Hold a launch or kick-off event for all staff to mark the start of your accreditation process
* Invite members of your governing body
* The CEO and Chair of your governing body should address the meeting and discuss:
* Why are we getting accredited?
* What does leadership expect the benefits to be?
* Why does it matter to us, our clients and stakeholders?
 |

|  |
| --- |
| 1. **Flag for staff what is coming**
 |
| * Provide an overview of what is going to happen over the next several months. This can be done at a staff meeting or one of the initial information or orientation sessions you hold for staff. Include:
* What is ASES and accreditation?
* A brief overview of the accreditation process
* How will staff be involved, and how will this be a team effort?
* A candid estimate of the amount of work involved.

The Implementation Resource Kit in *Module 1: Orientation* has two Introductory Webinars and PowerPoints that can assist you with presentations.  |

|  |
| --- |
| 1. **Involve as many staff as possible**
 |
| * Allocate responsibility for each as many staff members and/or teams, the governing body (it appropriate) and administrative staff.
* Ideally, each person or team will be allocated a Standard or a section of the Standards (there are 18 standards grouping that sit under the 8 standards). Their responsibility for the standard allocated to them is to
* Familiarise themselves with the relevant standards and evidence
* Undertake the initial self-assessment of practices against the standard
* Update practices and/or develop new practices, as needed
* Ensure that the standards are implemented

You can record all the work and allocations in the ASES Project Plan Template that is provided as part of Module 2: Planning ASES Implementation.  |

|  |
| --- |
| 1. **Consider committees and working groups**
 |
| * If your organisation is big enough, targeted use of committees can engage staff and external stakeholders
* It may be useful and efficient to divide staff into teams and/or to use existing organisational committees to help review standards and prepare accreditation materials.
* Examples of internal committees or working groups might include:
* Risk Management
* Human Resources
* Governance and Financial Management
* Planning and Quality Improvement (PQI)
* Client Rights (CR)/Behavior Support and Management (BSM)
* Committees addressing specific service sections or populations such as youth women, Aboriginal services, domestic violence

Committees can also undertake some of the work mentioned in the previous section.  |

|  |
| --- |
| 1. **Consider external reference groups**
 |
| * If your organisation is big enough, targeted use of external reference or work groups can facilitate stakeholder engagement and provide valuable feedback from clients and partner organisations.
* A reference group could include clients, organisations that are key stakeholders and organisations that you are in a Joint Working Agreement with.
* Client working groups can also be an effective way of harnessing stakeholder engagement. For example:
* An Aboriginal women’s yarning circle could design the artwork for your ASES handouts and fact sheets
* Young people at a youth refuge can direct their own quality project where what matters to them in a quality service can be integrated into the ASES Project Plan.
 |

|  |
| --- |
| 1. **Keep on track with progress**
 |
| * When you have completed your ASES Project Plan, it is important to develop a clear strategy for keeping the work moving and reaching your milestones.
* Keep an eye on lags and proactively address any barriers that may arise.
* If you find that you need more time, revise your Project Plan strategies and timeframes. For this reason, it is better to start early so that if you experience delays you can still meet the funder’s requirement to submit your certificate by the 31 March 2023.
* Find ways to keep staff motivated. Keep ASES on all meeting agendas, celebrate small successes along the way, provide lunches or morning teas for working groups and praise achievement.
* When it comes time to engage clients and invite them to the site visit to be interviewed, consider using symbolic incentives such as modest store vouchers – just take care that the incentives are not so generous that they may appear as overly inducive.
 |

|  |
| --- |
| 1. **Engage the governing body**
 |
| * The Board or Management Committee has an important role to play in ASES accreditation. As the governing body they are responsible for:
* The sound governance and financial viability of the organisations as well as other roles identified in the constitution
* Ensuring the organisation achieves accreditor in line with the funder’s time frames and requirements
* Ensuring the accreditation process is well planned, resourced and executed, and
* Overseeing that the ASES are consistently applied and adhered to over time.

The governing body, however, are also required specifically to comply with **Standard 2.1: Sound Governance** in the way that they operate as individuals and as a group. The Sound Governance Standard (pages 8-11 in the Evidence Guide) is as follows:* **Standard**: Commitments to leadership, mutual accountability, and ethical conduct are evident.
* **Outcome:** Stakeholders are confident that Governance supports long term organisational success

2.1.1 Processes for appointments to the Governing Body and senior executive positions are documented.2.1.2 The role and responsibilities of the Governing Body have been clearly defined and a policy regarding Corporate and or Clinical Governance\* is in place.2.1.3 The Governing Body should:* have the mix of skills required to fulfil its role
* demonstrate clear understanding and commitment to the organisation’s vision, values and strategic directions
* understand and comply with relevant statutory obligations
* recognise when you need to seek external advice
* undertake induction for Board members.

The governing body and the CEO/Service Manager needs to ensure that all of these requirements are fully met. \*If your service does not provide ‘clinical work’ this requirement still applies – it means that there is a clear definition between the governing role of the Board/Committee and the operational role of the CEO and staff. |