

Service provider qualities are the individual features of a service that enable delivery of wellness and reablement approaches. There are seven categories:

- **client outcomes** - supporting clients to live independently, improve quality of life and achieve their hopes and aspirations.
- **client engagement** - client involvement in decision-making and actively designing the supports they receive .
- **service delivery** - the organisation's service philosophy, service design and delivery approaches.
- **community connections** - partnerships between the provider and other services in the community to support client referrals, client advocacy, and support clients with special needs.
- **leadership and culture** - the organisation's leadership and staff behaviours, norms and ways of working.
- **people and systems** - the organisation's recruitment practices; learning and development practices; systems, policies, procedures.
- **measurement and reporting** - the quantitative and qualitative data that is measured, collected and reported.

	Starting Point	Developing	Compliant	Proactive	Generative
	"We want to be able to do this well and are ready to change our approaches"	"We deliver services to meet clients needs and are introducing systems to support wellness and reablement"	"We consistently deliver to meet clients' needs and aspirations in a systematised way"	"We consistently deliver to meet clients' needs and are looking to improve and address the barriers"	"We co-design our services with our clients and they are empowered to achieve their aspirations. We share our experiences and knowledge with others in the sector"
Client outcomes	<p>Wellness and reablement outcomes: We deliver services to meet our clients' care needs, we do for them what they are unable to do at present, and help them continue to live at home.</p> <p>Supporting reform: We work to be responsive to changes and reform within the home care sector.</p>	<p>Wellness and reablement outcomes: We deliver services that meet our clients' care needs and seek to achieve their goals for independence, improved quality of life and maintaining social connections.</p> <p>Supporting reform: We recognise the importance of the reform context in which we communicate our service offerings.</p>	<p>Wellness and reablement outcomes: We consistently deliver services to meet our clients' care needs and achieve their goals in a systematised way.</p> <p>Supporting reform: We understand the challenge of changing our structures and services without changes in the supporting system - we work with others to advocate for the necessary reform.</p>	<p>Wellness and reablement outcomes: We consistently support our clients to meet their care needs and achieve their hopes and aspirations. We are actively seeking to address any barriers that inhibit our client's independence, quality of life and social connections.</p> <p>Supporting reform: When we design and deliver our services, we do not do so in isolation, we build crosssector coalitions that are politically savvy about what it takes to change the sector and sustain change</p>	<p>Wellness and reablement outcomes: We support our clients to achieve their hopes and aspirations, re-gain independence, improve their quality of life, and maintain connections in the community, with their family, friends and informal carers</p> <p>Supporting reform: Everything that we do is an opportunity for change, we work in partnership to develop evidence - based best practice in processes and effective changes to structures, while working strategically with sector leaders to ensure the sector reforms embed wellness and enablement</p>
Client engagement	<p>Engagement: The client receives allocated and agreed services.</p> <p>Listening: Services listen to client needs but this is not systematic or directly informs future care.</p> <p>Orientation: Realises that client life experiences can produce barriers to engaging with services.</p> <p>Insight: Services observe clients in their home contexts and report back on factors that could complicate delivery.</p>	<p>Engagement: The client is given opportunity to provide feedback on the quality of services that they receive.</p> <p>Listening: Services make time to collect client perspectives and identify their changing needs.</p> <p>Orientation: Observes that clients have a life history and that understanding this can help enhance the provision of quality care.</p> <p>Insight: Services observe clients and broader contexts and look for potential barriers to effective care</p>	<p>Engagement: The client is active in regular feedback on their services and this informs future service delivery decisions.</p> <p>Listening: Services make time to listen to clients and respond to their changing needs.</p> <p>Orientation: Recognises that clients have a life history and that this can be referenced to assist in reinforcing a sense of competency.</p> <p>Insight: Conversations with clients go beyond the immediate situation and seek to address things that may support or obstruct effective support.</p>	<p>Engagement: The client is an active participant in the ongoing design of the care and support they receive, while service activity expands information to inform decision-making.</p> <p>Listening: Client and service staff are engaged in regular conversations to identify and harness the intrinsic motivation of clients to achieve their individual needs, goals and aspirations.</p> <p>Orientation: Understands the clients' life story and uses it to identify previous competencies to support new competency .</p> <p>Insight: Considerations with clients explore contextual factors and how they present enablers and barriers to effective support.</p>	<p>Engagement: The client is an active participant in codesigning and directing all aspects of care and support , while service activity builds confidence in decision-making.</p> <p>Listening: Client, informal carers (where relevant) and service staff are engaged in regular conversations to identify and harness the intrinsic motivation of clients to achieve their individual needs, goals and aspirations, obtain feedback on supports and assess the impact of services.</p> <p>Orientation: Values the clients' life story and experiences, and effectively builds on previous competencies to support new competency, capability and confidence.</p> <p>Insight: Interaction with clients captures the whole context including the identification of enablers and potential barriers that might otherwise present barriers or undermine positive outcomes.</p>
Service delivery	<p>Nature of support: Services aim to substitute for loss of function and assume ongoing service reliance.</p> <p>Orientation: Services focus on what is currently available.</p> <p>Approach: Understands what's happening now for clients and reacts to health and wellbeing needs.</p> <p>Holism: Services are provided according to the gaps in need identified through assessment.</p> <p>Inclusivity: Services have pre-defined boundaries of what is reasonable and whom services can be delivered to. Our services have limited community partnerships and connections for clients with particular needs.</p> <p>Assessment: Our services assume that past assessment is an accurate indication of client need</p> <p>Resilience: Services have been designed to support prevention of similar need in the future.</p>	<p>Nature of support: Services aim to support for loss of function and presume ongoing service reliance, but look for opportunities to reduce reliance.</p> <p>Orientation: Services are aware of developments in reablement and wellness and are exploring ways to include them in practice.</p> <p>Approach: Understandings that client's needs are both immediate and emerging and plans for both.</p> <p>Holism: Services focus on the needs identified with care packages, but when new needs emerge, further support options are explored.</p> <p>Inclusivity: Services have pre-defined parameters but are delivered in such a way as they are sensitive to the needs of socio-culturally diverse, special needs and 'hard to reach' groups.</p> <p>Assessment: Our services ask if past assessments are appropriate for client needs and we respond to any issues that emerge.</p> <p>Resilience: Services encourage preventative measures for the future by observing clients and monitoring progress.</p>	<p>Nature of support: Services deliver what is reasonable and appropriate to help clients bounce back, while looking for opportunities for episodic care to remove reliance.</p> <p>Orientation: Services are informed by developments to further support reablement, and wellness and are working toward practices to enact them.</p> <p>Approach: Understands client's wellbeing is both what's happening now and future client aspirations and is working toward practical responses to both.</p> <p>Holism: Services focus on identified needs and recognise their inter - relationship with the physical, mental, emotional, social and cultural needs of a client, as well as the available support to meet changing needs.</p> <p>Inclusivity: The provision of care is open-minded about what is possible and experiments with challenging the 'norm' for socio-culturally diverse, special needs and 'hard to reach' groups.</p> <p>Assessment: Our services look to complement assessments with our service level assessments of client needs and we look for ways to enhance client wellness.</p> <p>Resilience: Services support reablement and implements preventative measures by regularly consulting with client and monitoring progress.</p>	<p>Nature of support: Services are designed to support recovery and build resilience (with tailored episodic support available as required to support this aim).</p> <p>Orientation: Services are responsive to developments that support reablement and wellness and have in place approaches to enact them.</p> <p>Approach: Takes a life-course view of health needs and aspirations and engages in an ongoing conversation with client to put in place strategies to provide support.</p> <p>Holism: Care involves regular communication with the client to focus on the whole person and adapt their delivery according to the physical, mental, emotional, social and cultural needs of the individual client in their social environment.</p> <p>Inclusivity: Services are informed by principles of inclusion that have been developed in collaboration with social networks and community partnerships that meet specific special needs for socio-culturally diverse, special needs and 'hard to reach' groups.</p> <p>Assessment: Our services regularly ask if reassessment is required to effectively respond to client needs and to achieve and measure outcomes to support wellness in better ways.</p> <p>Resilience: Services assist reablement and foster prevention by regularly engaging with the client to discuss progress in building or rebuilding personal capacity to meet needs and achieve goals and aspirations.</p>	<p>Nature of support: Services build capacity and capability, reduce reliance through a staged 'path to resilience' approach (underpinned by tailored episodic support as required).</p> <p>Orientation: Services look beyond what is currently provided and have in place innovative and practical reablement and wellness.</p> <p>Approach: Takes a life-course view to understand health possibilities and adopts a learning approach with client to put in place supports that maximises long-term wellbeing.</p> <p>Holism: All care adopts a holistic approach to collaborate with the client in integrating all the physical, mental, emotional, social and cultural needs of each client in their community, including understanding complex interactions such as clusters of needs providing barriers to otherwise successful interventions.</p> <p>Inclusivity: Our services are embedded in communities, social networks and have strong community partnerships. Our teams not only recognise the socio-cultural diversity and special needs of citizens, they know who's who and through relationships of trust achieve inclusive outcomes.</p> <p>Assessment: Our services always re-assess and measure outcomes to inform best practice to support wellness.</p> <p>Resilience: Services partner with and empower clients and informal carers to support and recognise their growing capacity to meet their needs, and achieve their goals and aspirations.</p>
Community connections	<p>Referrals: Our services use standard referral processes.</p> <p>External networks: Our service delivery remains focused within our organisation and we tend to work within separate services and programs.</p> <p>Advocacy: Our services provide limited advocacy for client outcomes.</p>	<p>Referrals: Our services use internal processes that have been developed to improve referral.</p> <p>External networks: Our service delivery is improving, we are looking beyond our organisation and specific service type to find ways to improve the quality of care for our clients.</p> <p>Advocacy: Our services feedback information and insights to support advocacy for client outcomes.</p>	<p>Referrals: Our services use relationships with sector partners to enable expedited referrals or assessments in exceptional circumstances.</p> <p>External networks: Our services have existing working relationships with selected service delivery partners that deliver more integrated offerings in wellness.</p> <p>Advocacy: We have good relationships with consumer advocate groups and contribute to advocacy for client needs and outcomes.</p>	<p>Referrals: Our services regularly utilise recognised connections with other professionals to pathways to enable expedited referrals or assessments in most circumstances.</p> <p>External networks: We work across organisations and professional disciplines to produce a community of care that supports better client health and wellbeing outcomes.</p> <p>Advocacy: Working with advocates, we are providing advocacy and building toward a community of care.</p>	<p>Referrals: Our services utilise well-established pathways to enable expedited referrals or assessments and vital information sharing amongst all relevant professionals and services.</p> <p>External networks: Our services operate consistently across organisations, sectors and professional disciplines to produce a community of care that is improving every client's health and wellbeing.</p> <p>Advocacy: Working with advocates, we pursue sophisticated and effective advocacy for achieving client outcomes as part of a community of care.</p>
Leadership and culture	<p>Vision/ purpose: Leaders are committed to achieving the best for their clients, but staff are not necessarily engaged.</p> <p>Strategic focus: Our organisation is committed to improving strategies that enact our responsibilities to clients.</p> <p>Action-orientation: We are focussed on delivering our responsibilities as best we can, there is little time for reflection.</p> <p>Culture: Our staff and leaders deliver what is responsible and required for compliance.</p> <p>Empowerment: Staff perform their roles diligently-authority comes from the position in the organisation.</p> <p>Language: Services use 'deficit' language/tone that can be interpreted as exclusive or emphasising dependency.</p>	<p>Vision/ purpose: Staff and leaders are committed to achieving the best for their clients, but not necessarily engaged in leadership outside their responsibilities.</p> <p>Strategic focus: We are raising awareness of the need to put client needs and goals at the centre of our work and have begun identifying examples of the difference that this makes.</p> <p>Action-orientation: Reflection on the client's perspective and experience is a growing part of how we plan our service delivery.</p> <p>Culture: Staff and leaders are committed to delivering on client satisfaction and work together to try and make this possible.</p> <p>Empowerment: Staff are learning that they can speak up for client needs and they will be listened to.</p> <p>Language: Services use supportive language/tone that seeks to help clients become less dependent and more able.</p>	<p>Vision/ purpose: Staff and leaders are committed to achieving the best for their clients, but not necessarily engaged in leadership outside our organisation.</p> <p>Strategic focus: We are using data on the results of wellness and reablement approaches and building up examples of our successes with wellness and reablement and have begun sharing them with those inside and outside our organisation.</p> <p>Action-orientation: Reflection on the client's perspective and experience is part of what we do, we don't always translate this to intervention.</p> <p>Culture: Staff and leaders are committed to delivering on client wellness and take pride in their collective capacity to do so.</p> <p>Empowerment: Staff take a broad understanding of their role - people are encouraged to speak up in service of the needs of the client.</p> <p>Language: Services use positive language/tone to encourage a wellness attitude amongst clients.</p>	<p>Vision/ purpose: All our organisation is involved in working with clients for the best wellness and reablement outcomes and we are beginning to take up opportunities for sector leadership.</p> <p>Strategic focus: We use our service offerings, our ongoing learning and evidence to advocate for wider sector adoption of wellness approaches.</p> <p>Action-orientation: Reflection on client perspective and experience forms the basis of our plans for intervention but we struggle to consistently translate this into concrete action.</p> <p>Culture: Staff and leaders are committed to delivering on client needs/goals and work together to make this a feature of our approach. New service approaches are actively encouraged, shared and recognised across the organisation.</p> <p>Empowerment: All staff members are encouraged to show leadership by recognising that understanding client needs is the basis for authority.</p> <p>Language: Services use affirmative language/tone that opens up possibilities for greater client wellness.</p>	<p>Vision/ purpose: All our organisation is involved in working with clients for the best wellness and reablement outcomes and with the sector to expand these approaches.</p> <p>Strategic focus: We use data on outcomes from our ongoing learning in best practice to demonstrate the importance and persuade others to value wellness approaches.</p> <p>Action-orientation: Reflection on client perspective and experience is translated into both principles for intervention, concrete steps for action and informs ongoing review.</p> <p>Culture: Our staff and leaders share, from induction to service provision, a clear purpose to improve the lives of Older Australians and adopt a community development approach to overcoming barriers to meeting client needs and aspirations. Innovation in service delivery is fostered deliberately with active engagement and endorsement from the organisation's leaders at all levels.</p> <p>Empowerment: All staff are empowered to speak and act to support an individual client or group of clients - authority comes from the client not from position within the organisation.</p> <p>Language: Services empower, inclusive and 'can do' language/tone around wellness and reablement.</p>
People and systems	<p>Learning and development: Our staff are provided with opportunities for professional development within our organisation.</p> <p>Recruitment: Our staff are recruited according to the standards expected by our sector.</p> <p>Professional practice: Our staff are required to meet relevant education and registration requirements for compliance purposes.</p> <p>Organisation structure: Our services are provided through a 'top down' structure and existing culture is not change oriented.</p> <p>Internal networks: Our services are not generally connected to and in communication with others services and programs in our organisation.</p> <p>Systems, policies and processes: We have legacy systems, policies and processes that are a barrier to delivery of wellness and reablement approaches.</p>	<p>Learning and development: Our staff are provided with opportunities for professional development, including our approach to assessment and service provision with a specific focus on wellness and reablement, within our organisation and supported to undergo additional training when feasible.</p> <p>Recruitment: We recruit staff that not only meet sector standards but also have a clear personal commitment to caring for older Australians.</p> <p>Professional practice: Our staff meet relevant education and registration requirements and are encouraged to further their own professional practice.</p> <p>Organisation structure: Our services are provided through changing structures that encourage more client-centred approaches in our organisation.</p> <p>Internal networks: Our services are better connected to and in communication with others services in our organisation than they have been.</p> <p>Systems, policies and processes: We are starting to adjust our systems, policies, and processes to better enable us to deliver wellness and reablement approaches (e.g. finance, clinical governance).</p>	<p>Learning and development: Our services seek to embrace wellness and reablement approaches. The approaches we use include evidence based improvement, continuous learning through formal training, on-the-job experiences and mentoring.</p> <p>Recruitment: We recruit staff that care about individual needs and holistic approaches to care.</p> <p>Professional practice: Our staff are committed to active listening and learning from clients as a way to improve their professional practice. We are building a community of practice through the sharing of stories, experiences, new approaches and challenges across accessible information networks in our organisation.</p> <p>Organisation structure: Our services provide scope for leaderships at every level - we are increasingly influencing others to consider wellness and reablement approaches.</p> <p>Internal networks: Our services are constantly connected to and in communication with others services in our organisation - we are growing an integrated community around wellness.</p> <p>Systems, policies and processes: All of our systems, policies, and processes enable us to deliver wellness and reablement approaches (e.g. finance, clinical governance). We seek to continuously improve and adapt in response to new barriers identified for our clients.</p>	<p>Learning and development: Our services seek to embody best practice in wellness and reablement. The approaches we use include evidence based improvement, continuous learning through formal training, on-the-job experiences and mentoring.</p> <p>Recruitment: We recruit people who excel in wellness approaches and offer leadership to their peers.</p> <p>Professional practice: Our staff are committed to active listening and learning from clients as a way to improve their professional practice. We are building a community of practice through the sharing of stories, experiences, new approaches and challenges across accessible information networks in our organisation.</p> <p>Organisation structure: Our services provide scope for leaderships at every level - we are increasingly influencing others to consider wellness and reablement approaches.</p> <p>Internal networks: Our services are constantly connected to and in communication with others services in our organisation - we are growing an integrated community around wellness.</p> <p>Systems, policies and processes: All of our systems, policies, and processes enable us to deliver wellness and reablement approaches (e.g. finance, clinical governance). We seek to continuously improve and adapt in response to new barriers identified for our clients.</p>	<p>Learning and development: We consistently apply reflective practice in service delivery and implement our learnings. The approaches we use include peer support, coaching and mentoring, learning from clients, and continuous professional development.</p> <p>Recruitment: We actively seek staff that embody and build the wellness and reablement culture of our organisation and offer leadership to the sector.</p> <p>Professional practice: Our staff adopt an appreciative inquiry approach that focuses on active listening, recognising ability and valuing success, while we keep an open mind to learn through an iterative approach. There is widespread use of internal and external communities of practice to share experiences, new service ideas and experiments, and assistance, as well as requests for data.</p> <p>Organisation structure: Our services provide and share insight at every point of contact and we identify expertise at every level- we are producing advocates for change in wellness and reablement.</p> <p>Internal networks: Our services are constantly connected to and in communication with others services-in our organisation - we prioritise, foster and connect within an integrated community around wellness.</p> <p>Systems, policies and processes: All of our systems, policies, and processes are flexible and can be adapted to enable us to deliver wellness and reablement approaches tailored for individual client needs (e.g. finance, clinical governance).</p>
Measurement and reporting	<p>Outputs vs. outcomes: Services are orientated around outputs - such as responsible delivery of required hours of services according to identified client need.</p> <p>Evidence-based: Services do not collect information on their improvement in wellness and reablement.</p> <p>Reporting and communicating: Services report on observations, facts and achievements in relation to key outputs.</p>	<p>Outputs vs. outcomes: Services combine outcomes and outputs - such as efficient delivery of high quality services within current output limitations.</p> <p>Evidence-based: Services anecdotally collect information on their improvement in wellness and reablement.</p> <p>Reporting and communicating: Services report on observations, facts and achievements in relation to key outputs and outcomes.</p>	<p>Outputs vs. outcomes: Services combine outcomes and outputs - such as effective delivery of best possible services within current output limitations.</p> <p>Evidence-based: Services collect and analyse data on some areas to demonstrate improvements in client wellness and reablement. This data is the basis for service development.</p> <p>Reporting and communicating: Services share data, analysis and observations, about client activities in relation to achievements in wellness outcomes for clients.</p>	<p>Outputs vs. outcomes: Services combine outcomes and outputs - such as involving clients in proactive design of services and considering a range of strategies.</p> <p>Evidence-based: Services identify and collect targeted data to measure client achievements in wellness and reablement.</p> <p>Reporting and communicating: Services collect qualitative data and stories to illustrate achievements in wellness and reablement approaches, and support these with key data and related observations. .</p>	<p>Outputs vs. outcomes: Services are orientated around outcomes - such as participation with clients in active decision making to maximise and sustain independence and quality of life.</p> <p>Evidence-based: Services include a systematic approach to measurement and collecting data , while committed to hypothesis checking, validation of evidence and testing use of expertise to get the best outcome for each client and groups of clients.</p> <p>Reporting and communicating: Services collect qualitative data, and stories using a narrative approach to share persuasive examples of improved client experiences, and integrate this with internal and external data, to share evidence and best practice on wellness and reablement outcomes for clients.</p>