About
Tania Gomez

Tania Gomez is a leading NDIS consultant, auditor, and founder of Tania Gomez Consulting, with over 19 years of experience in the disability sector. She has helped more than 7,000 NDIS providers build compliant, impactful, and profitable businesses through education, strategic support, and community-building initiatives. As a four-time founder, podcast host, and keynote speaker, Tania is passionate about inspiring NDIS leaders to drive real change. Her work blends deep regulatory expertise with a heartfelt commitment to quality and innovation in disability services.

Compliance Cadence Calendar Template

Purpose:

This template helps NDIS providers build a rhythm into their compliance operations, shifting from audit panic to embedded quality assurance. It supports leadership and team accountability across weekly, monthly, quarterly, biannual, and annual cycles.

Instructions:

Use the tables below to schedule your regular compliance activities. Fill in dates, responsible roles, and notes for each item to build your organisation's unique cadence.

Weekly Cadence Activities

Activity	Assigned To	Scheduled Day	Notes
Team meeting: Compliance check-in (e.g. changes, staff issues)			
Document update reminders (e.g. procedure tweaks, staffing)			
Incident follow-up and resolution status check			
New staff induction or compliance onboarding (as needed)			

Monthly Cadence Activities

Activity	Assigned To	Scheduled Day	Notes
Review of new incidents, complaints, and feedback trends			
Review and update CRM records or key document locations			
Update staff on any changes to compliance rules or processes			
Conduct reflective team discussion on quality and risk themes			

Compliance Cadence Calendar Template

Quarterly Cadence Activities

Activity	Assigned To	Scheduled Day	Notes
Sample audit of participant and staff files (10% random sample)			
Emergency and disaster plan review and testing			
Trends analysis: Identify patterns across incidents and complaints			
Policy/procedure consultation with participants and staff			
System review: Data accuracy, storage, access, backups			

Biannual Cadence Activities

Activity	Assigned To	Scheduled Day	Notes
Business continuity plan and risk review			
Strategic governance review with directors or advisory board			
Deep dive into operational data and metrics for improvement planning			

Compliance Cadence Calendar Template

Annual Cadence Activities

Activity	Assigned To	Scheduled Day	Notes
Full policy and procedure review			
Annual team training on NDIS Practice Standards			
Staff and participant satisfaction surveys			
Review of participant lifecycle and staff lifecycle systems			
Celebrate and communicate compliance achievements			

ⓥ Tip

Use this calendar as a living document. Assign ownership, track completion, and hold regular team reflections to refine your cadence. The goal is to create stability and predictability so quality and compliance become part of everyday business—not something you "prepare" for.

Compliance Systems Audit Checklist

Purpose:

This checklist helps NDIS providers assess their compliance infrastructure across documentation, audit processes, monitoring, and organisational culture. Designed for medium-sized providers, it supports proactive, participant-focused quality management.

Instructions:

For each item, mark your status:

Yes - Fully implemented

Partially - In place but needs improvement

No - Not yet implemented

Section 1: Document Control, Storage & Risk Planning

Area	Criteria	Yes	Partially	No
Version Control	Are all core policies and procedures version-controlled?	☐	☐	☐
Secure Storage	Are documents stored in a secure, centralised digital system?	☐	☐	☐
Access Permissions	Is document access restricted based on staff roles and responsibilities?	☐	☐	☐
Backups & Continuity	Are regular automated backups conducted and tested?	☐	☐	☐
Data Sovereignty	Is all digital data stored within Australia, in accordance with privacy laws?	☐	☐	☐
Data Breach Response	Do you have a documented data breach policy and response procedure?	☐	☐	☐
Emergency Access	Are printed or offline emergency contact numbers and key details available in the event of system or power failure?	☐	☐	☐

Compliance Systems Audit Checklist

Section 2: Internal Audit & Participant-Centred Review Schedule

Area	Criteria	Yes	Partially	No
Weekly Tasks	Do you conduct quick compliance check-ins (e.g., documentation updates, staff handovers)?	☐	☐	☐
Monthly Reviews	Do you review incidents, complaints, participant/staff feedback, and procedural updates monthly?	☐	☐	☐
Quarterly Audits	Are quarterly spot checks or file reviews built into your schedule (e.g., 10% sample)?	☐	☐	☐
Emergency Plan Testing	Are emergency and disaster plans tested and reviewed at least annually?	☐	☐	☐
Inclusive Consultation	Are people with disability consulted on key procedures and changes affecting them?	☐	☐	☐
Feedback Integration	Is participant and staff input used to improve or redesign systems?	☐	☐	☐

Section 3: Compliance Monitoring & Trend Analysis

Area	Criteria	Yes	Partially	No
Incident Reporting	Are all incidents recorded using a consistent and structured process?	☐	☐	☐
Complaints Management	Do you track and resolve complaints with clear follow-up procedures?	☐	☐	☐
Trend Analysis	Are quarterly reviews of incidents and complaints conducted to identify trends and root causes?	☐	☐	☐
Risk Register	Is a compliance risk register actively updated and monitored?	☐	☐	☐
Quality Improvements	Are insights from audits, complaints, and incidents used to drive system changes?	☐	☐	☐

Compliance Systems Audit Checklist

Section 4: Compliance Culture & Training

Area	Criteria	Yes	Partially	No
Scheduled Training	Are compliance topics built into weekly, monthly, or quarterly staff training?	☐	☐	☐
Staff Engagement	Is compliance made relevant and practical during team meetings or supervision?	☐	☐	☐
Recognition	Do you have formal or informal ways to recognise staff who model compliance and quality practices?	☐	☐	☐
Leadership Focus	Do leaders role model compliance behaviours and reinforce its importance regularly?	☐	☐	☐
Whole-Team Ownership	Is compliance embedded across all roles—not held by one individual?	☐	☐	☐

Policy Update Implementation Planner

Purpose:

When NDIS Practice Standards change or internal policies are updated, it's critical to act quickly but not reactively. This planner helps NDIS providers implement policy changes in a structured, low-disruption way that supports clarity and accountability

Instructions:

Use this template each time a policy or compliance update occurs. Identify the impact, map the response, assign responsibilities, and track progress.

Step 1: Identify the Change

Question	Notes
What has changed? (Summarise the regulation, standard, or internal update)	
What date is this change effective from?	
What is the source of the change? (NDIS Commission, internal audit, sector guidance)	

Step 2: Assess the Impact

Area Affected	Description of Impact	Requires Update? (Y/N)
Policies or Procedures	e.g. Incident management policy	
Staff Training or Induction	e.g. New reporting protocols	
CRM/Systems/Workflows	e.g. Add new incident type in CRM	
Documentation Templates	e.g. Update participant risk plan form	
External Communication Other	e.g. Inform support coordinators or participants	

Policy Update Implementation Planner

Step 3: Plan the Implementation

Task	Responsible Person	Deadline	Notes
Draft updated content			
Review with leadership or governance team			
Communicate change to all staff			
Update training materials or run refresher			
Test and document new system or form			
Update training materials or run refresher			

Step 4: Track and Close

Activity	Completed? (Y/N)	Comments
All systems updated		
All staff trained		
Feedback or questions resolved		
Change documented in continuous improvement log		
Audit trail or file note created		

Tip

You don't need to overhaul your entire system for every policy change. This tool helps you zero in on the parts that need attention this will save time, money, and unnecessary stress.