Continuous improvement

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Introduction

Continuous improvement helps to ensure supports and services we provide achieve the most optimal outcomes for our participants.

This policy outlines the key methods we use to drive continuous improvement within our organisation.

Continuous improvement is an ongoing process that we will implement on a consistent basis in order to maintain a continuous improvement culture within our organisation.

Applicability

When
• applies to all areas of the service at all times.

Who
• applies to all representatives including key management personnel, directors, full time workers, part time workers, casual workers, contractors and volunteers.

Documents relevant to this policy

📊 Continuous improvement register

Regulations relevant to this policy

📘 NDIS (Quality Indicators) Guidelines 2018 (Cth)

Processes relevant to this policy

👁 Internal audit
🔍 Manage quality improvement

Continuous improvement

Continuous improvement involves:
- regularly collecting information, including learnings from:
  - things that are working well

- things that are not working well
- things that have gone wrong
- risk management activities
- any changes in requirements
- any external knowledge or advice
- recording issues and ideas in a continuous improvement plan and register
- deciding if an issue presents a risk—if it is, recording in the risk management plan, and working with those affected to address any ideas for change
- implementing changes as agreed and documented
- advising all relevant stakeholders of any changes made
- undertaking performance management to drive continuous improvement.

Review of practices

Reviewing various service practices enables us to understand participants' experiences with specific aspects of our service. Practice reviews are a reflective process that enables us to learn from and improve existing services.

Reviews will focus on a participant or a specific group of participants and may cover participants' experiences within a practice area, with a particular group of support workers and/or with a cluster of services.

External audits

We will undertake all required external audits, including NDIS audits. External audits are a regulatory requirement and we will meet all of our legal and legislative obligations in relation to this.

Internal audits and policy reviews

We will maintain a system of internal audits to ensure we:

- stay aware of legislative, regulatory and compliance changes
- keep record of documentation review cycles
- review documentation more often where required, in response to any internal and external changes
- maintain compliance with existing legislative and regulatory requirements
- identify opportunities for improvement within different areas of compliance
- keep evidence of actions taken in relation to maintaining compliance
- assign compliance improvement activities to correct people and departments
- identify potential high-risk areas within our organisation.

Clinical and case reviews

Clinical and case reviews are usually focused on a specific participant and are initiated in response to specific health or behavioural situations that result in a negative outcome.

The aim is to prevent the situation in question and improve participant outcomes.

Collecting feedback

We will have robust feedback collection mechanisms in place to consistently collect, collate and evaluate feedback from:

- participants
- participant support networks (e.g. family)
- workers
- external stakeholders.

When managing feedback, we will:

- give relevant parties information about how they can give us feedback
- ensure we streamline the feedback process to make the experience of providing feedback as straightforward as possible
- respond to all feedback in a timely manner
- use feedback to drive continuous improvement
- escalate feedback where required to key management personnel (e.g. when the feedback relates to an incident or complaint).

Governance review

We will undertake high-level periodic reviews of our governance practices. This involves:

- monitoring and appraising the performance of management (including responses to individual issues)
- revision of business plans, strategic plans and other relevant governance documentation
- assessment of existing leadership and authority structures
- responding to feedback intended for our management personnel.

Incident reviews and investigations

We will review and investigate all incidents, complaints and grievances. This is a regulatory requirement and we will comply with this requirement at all times. When investigating and reviewing incidents, complaints and grievances our organisation will consider:

- existing policies and processes that are in place
- the causes of the incident/complaint/grievance
- the most appropriate investigation methods and timeframes
- the way in which incident/complaint/grievance has been handled
- the outcomes of the incident/complaint/grievance (including feedback from relevant participants, workers and other people involved)
- actions we can take to ensure the incident/complaint/grievance does not occur again.

Continuous improvement plan and register

Our organisation will have a continuous improvement register and plan in place. Our register will cover:

- suggested improvements and continuous improvement opportunities
- name of person that added the suggestion
- date added to the register.

Our plan will include:

- continuous improvement action plans
- information about people responsible for executing each part of the plan
- notes and learnings from any continuous improvement meetings

- checklist of any regular continuous improvement activities.

We will review and update our continuous improvement plan and register regularly.

Continuous improvement responsibilities of key management personnel

Key management personnel must:

- drive quality improvement, and encourage and provide opportunities for worker involvement
- ensure services are well planned, effective in meeting needs and provided at the best possible level of quality by:
  - ensuring a quality management system is used and that internal controls are in place to comply with relevant standards
  - monitoring the results of quality reviews and making changes as needed
  - ensuring compliance with reporting requirements
  - implementing risk management strategies
  - pursuing organisational goals of service excellence

- drive review of internal practices
- organise and participate in external audits as required
- ensure feedback is collected effectively
- ensure all governance documentation and structures are relevant and up-to-date
- where required, manage the investigation of incidents, complaints and grievances
- delegate continuous improvement responsibilities.
- foster a positive attitude to quality improvement among workers
- implement policies and procedures for quality management to guide workers
- establish documentation and reporting processes to enable the ongoing tracking of quality improvement.

Continuous improvement responsibilities of workers

Continuous improvement responsibilities of workers must:

- consistently monitor for continuous improvement opportunities
- discuss any identified areas for improvement with relevant managers
- facilitate the collection of feedback
- provide feedback to key management personnel
- participate in investigations of incidents, complaints and grievances
- participate in internal and external audits
- undertake clinical and case reviews as required
- participate in team meetings.