

LifeTec-P-G-007 CONTINUOUS QUALITY IMPROVEMENT

Area:	Governance
Distribution / Scope:	Board, Employees, Volunteers, Consumers
Date Ratified:	November 2019
Date Effective:	November 2019
Review Due:	November 2022

1.0 PURPOSE

To document LifeTec’s commitment to Continuous Quality Improvement.

To ensure LifeTec provides high quality services through efficient and accountable management practices.

2.0 POLICY STATEMENT

LifeTec is committed to the utilisation of **ISO 9001:2015** and continuously improving all aspects of its operations, in order to

- Realise goals and strategic outcomes;
- Be inclusive and responsive to Consumers, staff, volunteers, stakeholders and the wider community;
- Deliver high quality services; and
- Meet best practice standards.

Monitoring and reporting on how services have performed provides LifeTec with the information necessary for identifying changes and planning improvements and in monitoring the way resources are utilised.

This policy is to be read in conjunction with the following:

- Regulatory Compliance Policy (LifeTec -P-G-008)
- Risk Management Policy LifeTec-P-G-009)
- Incident Management Policy (LifeTec-P-G-010)
- Financial Management Policy (LifeTec -P-G-011)
- Complaints and Compliments Policy (LifeTec-P-G-015)

3.0 DEFINITIONS

Accreditation – an assessment by an external body or agency to determine the level of compliance with agreed standards.

Best Practice – commercial or professional procedures that are accepted or prescribed as being correct or most effective.

Improving Performance – continuous study and adaptation of processes in order to achieve desired outcomes and meet the needs and expectations of members, Consumers, and stakeholders.

Quality Cycle – the planned examination of organisational activities, policies, procedures and performance to identify best practices and target areas in need of improvement. Goals and outcomes as outlined in the Strategic Plan should be considered in all stages of the quality cycle.

Quality Improvement – the process of continual review of the organisation, its structures and functions of governance, management, engagement with Consumers and other stakeholders, and its service delivery.

Quality Improvement Plan – a detailed work plan outlining the specific tasks to be undertaken by employees during a quality cycle, including implementation of corrective actions or policy changes where needed.

4.0 QUALITY IMPROVEMENT FRAMEWORK

4.1 Continuous Quality Improvement Cycle –

4.1.1 LifeTec uses a systems approach to improving quality and performance via a cyclical model, including the following elements: plan, do, check and act.

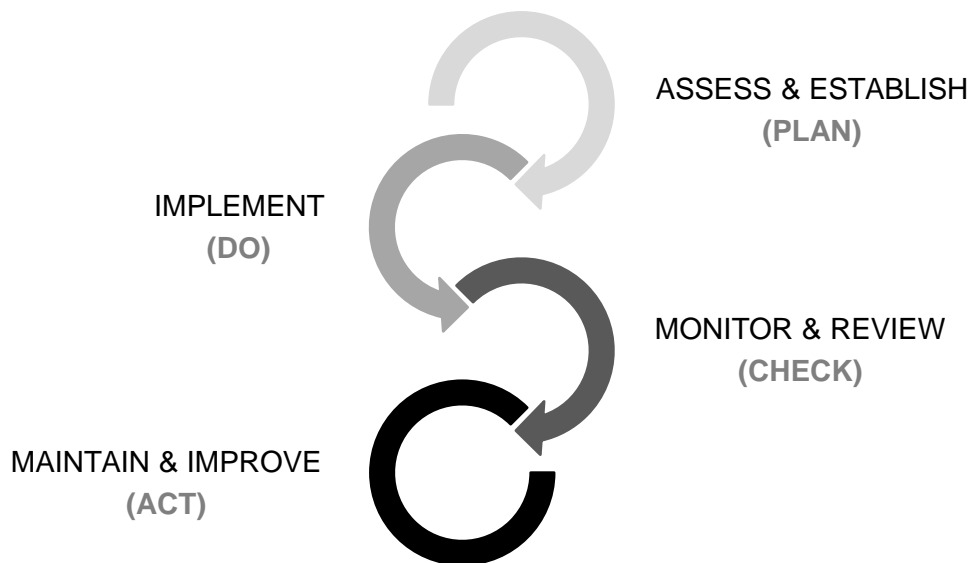
4.1.1.1 **Plan** – Obtain information, conduct an assessment of the current situation, and identify the best approach to take for improvement.

4.1.1.2 **Do** – Decide upon and/or prioritise quality improvement actions.

- If the activity requires financial resources, an adequate budget will be identified before the activity commences.
- Suitable and practical solutions should take into account the needs of the organisation, staff, Consumers and any stakeholders that might be impacted.
- Actions may range from procedure documentation or policy development to system redesign or creation (e.g. electronic filing, human resources system).

4.1.1.3 **Check** – Routinely collect information to identify and monitor progress, achievements and areas of improvement.

4.1.1.4 **Act** – Once the action has been taken, individuals involved should evaluate the key results of that action to ensure the required result was achieved. If the action was unsuccessful, begin the improvement cycle again.



5.0 PRINCIPLES

- 5.1 LifeTec's commitment to quality improvement is prevalent in all areas of its business, with all staff seeking ways to improve the quality of their own activities and areas of responsibility as well as the quality of the organisation as a whole.
- 5.2 The quality improvement process and system is co-ordinated by the Executive Management Team, although all Board members and LifeTec employees are expected to participate in quality improvement practice.
- 5.3 All individuals involved in, or affected by, quality improvement actions/activities should be aware of changes made to the organisation and the results of these activities (both internal and external stakeholders). Communication and feedback at all stages is critical to achieving sustainable results and facilitating organisational change.
- 5.4 Adequate resources, tools and support are provided to LifeTec staff, Board members and key stakeholders to fully engage in the quality improvement system and processes.
- 5.5 LifeTec encourages evidence-based work practices, recognising staff for best practice and innovative ideas.

6.0 PROCEDURES

6.1 Quality Improvement Plan & Register –

6.1.1 The Executive Management Team is responsible for creating, implementing, maintaining, and updating the LifeTec Quality Improvement Plan.

6.1.2 The Quality Improvement Plan will include:

- A Schedule;
- Any issues or improvements identified via regulatory requirements, audits (internal and external), Quality Improvement Notices (QIN), and compliance processes;
- The outcome or goal sought from the improvement;
- Actions to be implemented and by whom;
- Success measures; and
- The priority rating (low, medium, or high) and any applicable timeframes.

6.1.3 Urgent or key improvement issues will be reported to the Board for actions and approvals as required.

6.1.4 The Executive Management Team is responsible for maintaining the Quality Improvement Register.

6.1.4.1 The register will record all activities and efforts made to implement the Quality Improvement Plan and any other required quality improvement initiatives.

6.2 Identifying Improvements –

6.2.1 The need for improvements in procedures, systems, or service delivery can be identified by any Board member, member, employee, consumer or stakeholder at any time.

6.2.2 Improvements may be identified or monitored through any of the following systems, including but not limited to:

- Quality Improvement Notices (QIN)
- Direct feedback (formal and informal) or complaints from employees, volunteers, consumers, stakeholders, and members of the public;
- Annual satisfaction surveys;
- Regulatory/accreditation requirements, external audits and compliance processes;
- Incident reports;
- Workplace Health and Safety (WHS) audits and observations;
- Hazard Identification Forms (HIFs)
- Policy, records, and system reviews;
- Consumer, program and activity reviews;

- Management reports; and/or
- Performance management reviews.

6.3 Implementing Improvements –

6.3.1 Some complaints and feedback instances may require an immediate response. See Complaints and Compliments Policy for these processes.

6.3.2 Improvements may be actioned or implemented in the form of:

- Staff training;
- Provision of information;
- Changes in procedures or practices;
- Further consultation or formation of a working group to explore issues and possible responses;
- Seeking external services or advice; and/or
- Acquiring or replacing resources.

6.4 Reporting on Improvements –

6.4.1 The Chief Executive Officer is to provide regular updates to the Board on quality improvement actions via the CEO's Report.

6.4.2 The General Manager is to inform staff and Consumers of any quality improvement actions as necessary.

6.5 Monitoring Improvements –

6.5.1 Each improvement action will have a designated timeframe and priority rating noted in the Quality Improvement Plan.

6.5.2 Once implemented, information will be gathered to evaluate the effectiveness of the chosen improvement action/s.

6.5.3 See 6.2.2 for quality monitoring systems.

7.0 STANDARDS AND LEGISLATION

Australian Standards ISO 9001:2015

NDIS Quality and Safeguards Commission Practice Standards –

- Governance and Operational Management
- Complaints Management

Aged Care Quality and Safety Commission –

- Organisational Governance
- Feedback and Complaints

CONTINUOUS QUALITY IMPROVEMENT

8.0 SUPPORTING DOCUMENTATION

Supporting forms: Quality Improvement Notice
Hazard Identification Form
Complaint/Compliments Form

Supporting documents: LifeTec's Strategic Plan
CEO's Report

Supporting policies and procedures: Regulatory Compliance Policy (LifeTec -P-G-008)
Risk Management Policy (LifeTec-P-G-009)
Incident Management Policy (LifeTec-P-G-010)
Financial Management Policy (LifeTec -P-G-011)
Complaints and Compliments Policy (LifeTec-P-G-015)

Supporting registers: Complaints and Compliments Register
Conflict of Interest Register
Incident Register
Quality Improvement Register
WHS & Risk Management Register

9.0 APPROVALS

Executive Manager Name: Karin Schuhmann

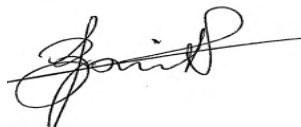
Executive Manager Signature:



Date: 26/11/2019

Chief Executive Officer Name: James Barrientos

Chief Executive Officer Signature:



Date: 26/11/2019

10.0 VERSION CONTROL

VERSION	DESCRIPTION OF CHANGES	DATE
1	First finalised version of the new Continuous Quality Improvement Policy (LifeTec-P-G-007).	Nov 2019
2	Update Policy with Standards Australia ISO 9001:2015 and document references	Nov 2019