Quality Management and Continuous Quality Improvement

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## Quality Management and Continuous Quality ImprovementNational Disability Services Logo

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## Introducing Quality Management

* What is meant by ‘quality management’ and ‘continuous quality improvement’
* Look at implementing a quality management system
* Indicators of a quality service

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## Quality Management

The action a provider takes to make sure that it always provides the best possible service for the people it supports by:

* understanding what it is doing well
* identifying where improvements are needed
* taking action to best meet the needs of participants

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## Quality Management is

* fundamental to a person-centred approach to service provision
* an essential part of improving outcomes for participants
* a requirement for service providers under the NDIS Practice Standards

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## NDIS Commission’s focus on Quality

* Quality management is incorporated into the NDIS Practice Standards
* The aim of the Commission’s requirements is to create a nationally consistent approach to improving the quality of disability supports
* Requirements are proportionate to the size and scale of the provider
* Rules that drive performance around quality related functions

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## Quality Management System

* Coordinated approach to managing and monitoring quality
* essential processes to manage, monitor and review the quality of service, for example:
  + compliance with Practice Standards: good practice
  + core organisational policies and procedures to guide good practice
  + monitoring compliance progress and outcomes
  + documentation and reporting

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## Indicators of a quality service

* Meets NDIS Practice Standards
* Receives positive feedback from the people it supports
* Improves outcomes for individuals

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## Monitoring Quality

Examples of indicators:

* numbers of participants successfully achieved outcomes
* levels of satisfaction with service received
* staff morale
* positive profile amongst stakeholders

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## Quality Management policy and procedures

* Principles that apply to quality management
* Processes and activities that will be used to track, report review and make improvements
* Responsibilities
* Internal reporting on quality improvement

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## Quality Management policy and procedures

Related areas of policy and procedures

* Risk management and compliance monitoring
* Complaints management
* Incident reporting
* Service delivery
* Organisational performance evaluation and reporting

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## Participant Feedback

Feedback from participants is the most important indicator of quality

* includes complaints, compliments, comments and information gathered through specific feedback collection
* tells you about satisfaction and the extent to which you have met their needs
* tells you about how your service is seen by participants

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## Participant Feedback

Participant feedback should be a two way process.

People providing feedback need to:

* know what will happen with the information provided
* feel safe providing negative feedback
* feel valued by seeing the impact of suggestions they have made or hearing about changes that have been made in response to their input

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## Continuous Improvement

Using the following information to ensure ongoing improvement to your practices and outcomes:

* Internal audits
* Complaints and feedback
* Incidents
* Staff suggestions

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## Documentation and reporting

Keeping written records is a critical part of quality management

Documentation provides:

* Guidance to staff and corporate governance body
* Tools for managing compliance and risk
* Information for tracking performance/improvement
* Process to monitor issues arising and ensure action is taken to make improvements
* Evidence for external auditors

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## Key Documentation

* Policies, procedures and other documents that guide how work is done
* Participant records that keep track of their plans and outcomes
* Records of service user feedback
* Records of the handling of any complaints, incidents, risk and investigations

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## Key quality monitoring and reporting documents

Compliance

* Compliance register
* Document control register

Monitoring and responding

* Incident and Complaints register
* CQI register

Track Quality Improvement

* Quality monitoring schedule (Internal audits)
* Performance reporting template

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## Compliance Register:

Identifies key legal, contractual or reporting requirements of the provider and documents when these have been checked and attended to.

| **Item** | **Key Requirements** | **Responsibility** | **Last Check** | **Action required** | **Completed** |
| --- | --- | --- | --- | --- | --- |
| Example: Worker screening check | All staff have a current worker check | HR Manager | N/A | Establish process for current and future staff to demonstrate they meet the required check | July 2020 |

Others listed under the column headed ‘Item’ are:

* Incorporation
* Lease agreement
* Workplace Health and Safety
* Insurance cover
* Taxation
* Superannuation
* Financial audit
* Information security
* Legislation
* Other

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## Continuous quality improvement register:

Summarises improvement activity within the provider, keeping track of the issue, improvements to be made and responsibility for implementing action.

| **CQI ID** | **Date** | **Source** | **Issue** | **Action** | **Time Frame** | **Responsibility** | **Update or Closure** | **Any staff training required** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Example:  CQI: 5/2019 | May 2019 | Complaints register | Participant details disclosed | Improve security on participant records | End May 2019 | Service Manager | 27 May 2019 | Blank |

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## Performance reporting template:

The template example shows three separate tables. The first has these column headers: Date; For period; Report to; Report prepared by.
The second table has the following column headers, with examples in brackets (brackets mine): 
Services and activities (Example: Participant assessment and review)
Target/performance indicator (All plans reviewed 3 monthly)
Report on results (80% reviewed within three months
Change since previous report (Increase from 72%)
Comment (no example given).
The third table has the following headings, with examples in brackets (brackets mine): 
Organisational operation (Example: staff morale)
Target/performance indicator (All staff at 100% satisfaction
Report on result (68% of staff at 100% satisfaction)
Changes since previous report (Decrease from 79%)
Comment (Recent dispute over wage grading has impacted badly)


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| **Quality Improvement** | **Target/performance indicator** | **Report on results** | **Change since previous report** | **Comment** |
| --- | --- | --- | --- | --- |
| Example: Compliance with NDIS Practice Standards | * All minimum standards met * External review completed | Self-review against standards in Division 1 and 2 of CORE completed | Division 3 and 4 of CORE completed | Blank |

## Compliance report

* Item:
  + Risk management plan
  + Insurances
  + Workplace Health and Safety
  + Other legal requirements
  + Contracts
  + Service Agreements
  + Reporting
  + Standards
  + Incorporation
  + Other
* Compliance requirement
* due date
* date completed
* comment

## Incident Report

* Date of Incident
* Description of incident
* Authority notified
* Insurer notified
* Other action taken
* Comment

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## Self-assessment tools

[Quality Management Guide](\\\\NDS-ADF03\\ConvAndCollabPrj\\2019-2020 Support for NDIS Providers Grant\\Administration\\accessible docs - Jenny\\Quality Management National Disability Services accessible.FINALdocx.docx)

[NDS NDIS Practice Standards (CORE) Interpretive Guide](file:///U:\2019-2020%20Support%20for%20NDIS%20Providers%20Grant\Administration\accessible%20docs%20-%20Jenny\NDIS-Practice-Standards-Interpretive-Guide.Accessible-versiondocx.docx)

For web based quality management tools to assist service providers meet the NDIS Practice Standards: [NDS Quality Management Portal](https://www.nds.org.au/resources/nds-quality-portal)

End of document.