

Quality Assurance Policy

CPSN is committed to quality management and to building and maintaining a culture of continuous quality improvement. This document guides the development, implementation, and delivery of services and ensures CPSN maintains high standards, continuously improves systems and processes, and adapts to changing needs in its provision of rights-based, person-centred, high-quality, effective, and safe services and supports.

Record of policy development

| Version | Date approved | Date for review |
|-----------|---------------|-----------------|
| Version 3 | March 2026 | February 2028 |

Responsibilities and delegations

| | |
|------------------------------------|--|
| This policy applies to: | Clients (and where appropriate, their decision makers), members, employees, volunteers, contractors, researchers and Board |
| Policy approval: | Board |
| Review of Policy Compliance | CEO |
| Specific responsibilities: | Board CEO General Manager Service Delivery Human Resources Manager Leadership Team All CPSN employees Clients (and where appropriate, their decision makers) |

| Policy context | |
|--------------------------------|--|
| Service Standards | <p>NDIS Practice Standards and Quality Indicators, November 2021 Version 4.</p> <p>ACNC Governance Standards, 2013</p> <p>National Principles for Child Safe Organisations, 2018</p> <p>Victorian Child Safe Standards, 2015 and 2021 (in force from 1 July 2022)</p> |
| Legislation | <p>Charter of Human Rights and Responsibilities Act 2006, Victoria</p> <p>National Disability Insurance Scheme Act 2013 (Cth)</p> <p>National Disability Insurance Scheme (Quality and Safeguards Commission and Other Measures) Act 2017)</p> <p>National Disability Insurance Scheme (Code of Conduct) Rules 2018</p> <p>National Disability Insurance Scheme (Incident Management and Reportable Incidents) Rules 2018</p> <p>National Disability Insurance Scheme (Complaints Management and Resolution) Rules 2018</p> <p>National Disability Insurance Scheme (Practice Standards – Worker Screening) Rules 2018</p> <p>Disability Act 2006 (Vic)</p> <p>Children Youth and Families Act 2005 (Vic)</p> <p>Child Wellbeing and Safety Act 2005 (Vic)</p> <p>Australian Charities and Not-for-profits Commission Act 2012 (Cth)</p> |
| Contractual obligations | NDIS Practice Standards |
| Organisation policies | <p>Human Rights Policy and Framework</p> <p>Practice and Governance Policy and Framework</p> <p>Risk Management Policy and Framework</p> <p>Effective Workforce Policy</p> <p>Safeguarding Vulnerable Persons Policy</p> <p>Child Safe Policy</p> <p>Privacy and Confidentiality Policy</p> <p>Complaints Management Policy</p> <p>NDIS Code of Conduct</p> <p>Incident Management Reporting Policy</p> <p>Incident Management Reporting Policy</p> <p>Training and Professional Development Policy</p> <p>Worker Screening Policy</p> |
| Other Conventions | United Nations Convention on the Rights of People with Disabilities (CRPD), 2006 |

Definitions

Employee means a person who is employed by CPSN with wages or salary.

Staff means all the people employed by CPSN or within a specific work area.

Worker means any person engaged by CPSN to perform a service, paid or unpaid, and may include but is not limited to employees, consultants, contractors, employees of a labour hire company, apprentices, trainees, students or volunteers.

Quality management - is an organisation's processes for maintaining and improving the level of quality services the organisation delivers to clients.

Core principles of quality management include:

- **Client focus:** The primary focus of quality management is to meet client requirements and to strive to exceed client expectations.
- **Engagement of people:** Competent, empowered and engaged people at all levels throughout the organisation are essential to enhance its capability to create and deliver value.
- **Evidence-based decision making:** Decisions based on the analysis and evaluation of data and information are more likely to produce desired results.
- **Improvement:** Successful organisations have an ongoing focus on improvement.
- **Leadership:** Leaders at all levels establish unity of purpose and direction and create conditions in which people are engaged in achieving the organisation's quality objectives.
- **Process approach:** Consistent and predictable results are achieved more effectively and efficiently when activities are understood and managed as interrelated processes that function as a coherent system.
- **Relationship management:** For sustained success, an organisation manages its relationships with interested parties, such as suppliers.

Continuous improvement - is the ongoing effort of an organisation to improve its services, systems, processes, or products to achieve the best possible outcomes for clients. Continuous improvement systems help the organisation to identify where quality and safety are at risk and helps an organisation to respond promptly and appropriately.

Continuous improvement relies on evidence-based information and learning to support the organisation in achieving its goals and outcomes. This includes adapting to the changing needs of the community of people using services. It takes into account the needs and feedback of clients and may involve them in improvement activities.

Continuous improvement is part of an overall quality system that assesses the standards of care and service achieved.

The core elements of continuous improvement are:

- client focus
- innovation
- achievement of improvement through planned steps
- driven by involvement and accountability of key stakeholders:
 - clients, and where appropriate, their decision makers
 - employees and volunteers
 - contractors and researchers
 - Board members
 - advocates

- involves regular monitoring and evaluation of progress

CPSN's continuous improvement system reflects a 'plan, do, check, act' model.

Practice review – is a reflective process that examines the experience of an individual or group of individuals of a CPSN service or group of services or group of workers with a view to learning and improving practice.

Policy statement

Policy Statement

CPSN is committed to quality management and to building and maintaining a culture of continuous quality improvement. This document guides the development, implementation, and delivery of services and ensures CPSN maintains high standards, continuously improves systems and processes, and adapts to changing needs in its provision of rights-based, person-centred, high-quality, effective, and safe services and supports.

CPSN will:

- where appropriate, involve members, clients, employees, the Board, and other stakeholders in the service review processes, organisation's policies and procedures relevant to the service provision and protection of client rights.
- encourage feedback from clients (and where appropriate, their decision makers), and other stakeholders; this feedback will be used to inform continuous improvements for individual clients and the broader organisation.
- provide the necessary documents, systems, processes and support for clients and staff that they require for them to be able to fulfil their obligations as outlined in this document.
- monitor organisational performance against quality measures and report internally on progress.
- gather information on performance by tracking feedback, complaints, incidents, and practice reviews and use this information to inform continuous improvement.
- identify improvement and action and learning opportunities, in a timely way from internal and external audit activities.
- maintain a Continuous Improvement Register to document identified improvement activities, accountabilities, and outcomes from identified quality improvement actions, complaints, feedback, client, and employee incident reports (including near misses), and internal and external audits.
- develop a culture and practice of continuous improvement in CPSN by implementing and reviewing the activities above.

Principles

CPSN has adopted the following principles which are founded in human rights and guide its practice and governance:

- rights based and person-centred
- self-determination, citizenship, and participation
- collaboration, networks, and partnerships.

Specifically, in relation to its quality management system, CPSN is committed to the following principles:

- we place inclusion and self-determination at the forefront of whatever we do
- we build capacity in ourselves and others
- we are bold and curious
- we navigate challenges and discover solutions that achieve change
- we operate with integrity and safety, always.

CPSN's Quality Management System also reflects ISO 9000 and 9001 Quality management principles:

Principle 1: Customer focus: The primary focus of quality management is to meet customer requirements and to strive to exceed customer expectations.

Principle 2: Leadership: Leaders at all levels establish unity of purpose and direction and create conditions in which people are engaged in achieving the organisation's quality objectives.

Principle 3: Engagement of people: Competent, empowered and engaged people at all levels throughout the organisation are essential to enhance its capability to create and deliver value.

Principle 4: Process approach: Consistent and predictable results are achieved more effectively and efficiently when activities are understood and managed as interrelated processes that function as a coherent system.

Principle 5: Improvement: Successful organisations have an ongoing focus on improvement.

Principle 6: Evidence-based decision making: Decisions based on the analysis and evaluation of data and information are more likely to produce desired results.

Principle 7: Relationship management: For sustained success, an organisation manages its relationships with interested parties, such as suppliers.¹

Implementing this policy

Within CPSN the following roles communicate and operationalise this policy:

Roles and Responsibilities

The Board

CPSN's Board is responsible for:

- approving amendments and changes to this policy and ensuring it aligns with the strategic direction of the organisation.
- monitoring compliance to legislation and contractual obligations and individual outcomes.
- appointing a Chief Executive Officer (CEO) with relevant skills and experience to lead and manage CPSN to achieve its purpose.
- fostering a positive attitude to quality improvement and a culture and practice of continuous improvement across the organisation.
- approving the governance of establishing documentation, monitoring, and reporting processes that will enable the ongoing tracking of quality improvement.
- oversight and governance of key indicators/metrics for quality for the organisation.
- oversight and governance of monitoring implementation and progress through discussion of quarterly reports, internal and external audits and any formal or informal engagement activities.
- oversight and governance monitoring the performance of management to drive continuous improvement in management practices.

The CEO

The CEO is responsible for:

- delegating responsibility for financial, people and culture, operations, record keeping, policy development and

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accountability to the CPSN Leadership Team.

- ensuring a positive attitude to quality improvement and a culture and practice of continuous improvement across the staff team.
- developing organisational policies, procedures, training, support, and supervision to ensure staff are aware of their responsibilities and accountabilities to share in the commitment to, and delivery of, high-quality, effective, and safe services and supports.
- regularly seeking client, staff, and stakeholder feedback to inform continuous improvement opportunities.
- establishing documentation, monitoring, and reporting processes that will enable the ongoing tracking of quality improvement, including policy and procedure reviews and consultation.
- implementing, monitoring, and reporting on all policies and procedures that relate to quality operational management in line with NDIS Quality and Safeguards and Practice Standards.
- ensuring and reporting on compliance with quality expectations of NDIS, and other legislative requirements. This includes ensuring operational systems for gathering data, regular quality internal and external auditing, monitoring, and reporting and responding to feedback, complaints, audit findings and review findings.

The CEO will:

- maintain a register of legislation, regulatory and other legal and contractual requirements that CPSN is subject to.
- ensure organisational policies are regularly reviewed and represent contemporary best practice in achieving CPSNs strategic directions. Policies will be reviewed generally every two years (one year for new policies) or when updates are required as a result of changes in accepted practice standards, changes in external requirements such as legislation, regulations or standards, staff identifying gaps or problems in implementing policies or procedures, and/or client feedback.
- foster a positive attitude to quality improvement and a culture and practice of continuous improvement across the staff team.
- monitor organisational performance against quality measures and report internally on progress including monthly and quarterly reports to the Leadership Team, Human Rights Committee (the Quality and Practice Report), Finance and Audit Committee (the Quality and Risk Report), and an annual report on quality assurance policy and activities.
- identify improvement opportunities from internal and external audit activities.
- maintain a Quality Improvement Register to document identified improvement activities, accountabilities, and outcomes from identified quality improvement actions, complaints, feedback, client, and employee incident reports (including near misses), internal and external audits and report internally on progress including monthly reports to the Leadership Team, Human Rights, and Finance and Audit Committees on the Quality Improvement Register actions and outcomes.
- maintain and update CPSN's Emergency Management Plan, which outlines CPSN's response to a crisis to minimise risks to clients, employees and property, to protect the reputation of the organisation and to implement emergency management procedures where required.
- maintain appropriate insurances to protect CPSN's delivery of its purpose.
- quarterly review of incident management policy and procedure, and investigation outcomes, to ensure continuous improvement of incident management. This includes documenting and reviewing the causes, management, and outcomes of incidents (including 'near misses'), seeking clients' and workers' views, and using their feedback to implement changes to the system.
- conduct internal audits to ensure that the organisation's policies and procedures are being implemented effectively, review risk management, and identify areas for process improvement.
- seek feedback from clients (and where appropriate, their decision makers), employees and others. This feedback will be used to inform continuous improvements for individual clients and the broader organisation.
- monitor organisational performance against agreed metrics and report internally on progress including monthly reports to the Leadership Team.
- coordinate communication to CPSN clients, members and the public.

- ensure all relevant policies, procedures, forms and associated documents are accessible and available to clients, staff and other stakeholders.
- ensure that as part of the process of completing person centred service agreements with each client that they are made aware of opportunities to provide feedback and contribute to continuous improvement of CPSN services.
- monitor and report service quality and client satisfaction, monitor organisational performance against agreed metrics and report internally on progress, including monthly reports to the Board.
- conduct practice reviews to understand factors contributing to people's experience of a service, with a view to learning and improving practice.

Human Resources Manager

The Human Resources Manager will:

- ensure a positive attitude to quality improvement and a culture and practice of continuous improvement across the staff team.
- ensure systems to recruit appropriately qualified and skilled staff and provide training to address identified needs. Monitor organisational performance against agreed metrics and report internally on progress including monthly reports to the CEO.
- monitor CPSN's supervision model that embeds reflective practice in relation to practice effectiveness in all services.
- quarterly review of incident management policy and procedure, and investigation outcomes, to ensure continuous improvement of incident management. This includes documenting and reviewing the causes, management, and outcomes of incidents (including 'near misses'), seeking clients' and workers' views, and using their feedback to implement changes to the system.

CPSN General Manager Service Delivery has specific responsibilities under this policy and is responsible for:

- conducting practice reviews to understand factors contributing to people's experience of a service, with a view to learning and improving practice.
- leading and demonstrating respect and understanding of the Principles and five domains of the Practice and Governance Framework
- maintaining respectful service delivery and working environments that promote, and value rights based and inclusive practices
- monitoring services to ensure appropriate and inclusive standards of practice
- responding to and reporting any breaches of this policy as soon as practicable
- promoting flexible environments for all persons and ensuring that flexible and equitable practices are in place.
- create a methodology for recording client goal achievement in Salesforce, which can then generate service and organisational level client goal attainment performance measures to review effectiveness.
- lead service development and review processes, involving members, clients, employees, the Board, and other stakeholders where relevant.

CPSN Employees with supervisory responsibilities

Supervising employees are responsible for the following:

- communicating and supporting staff in understanding their responsibilities under this policy
- ensuring procedures and work instructions are clear to staff
- monitoring implementation and contributing to review of policy.

CPSN Workers

CPSN Workers are responsible for:

- understanding this policy
- upholding their employee obligations
- maintaining appropriate skills, qualifications and screenings/checks as required by their role, CPSN and/or applicable legislation
- participating in CPSN directed training, development or supervision programs
- upholding client safeguarding practices
- upholding work health and safety practices
- adhering to this policy and striving to provide the best quality service to each client and provide feedback that supports CPSN to continuously improve systems and processes and adapt to changing needs in its provision of rights-based, person-centred, high-quality, effective, and safe services and supports.
- engaging in pro-active continuous improvement processes
- reporting to their manager where they are unable to meet their obligations
- at all times acting in accordance with the NDIS Code of Conduct.

Maintaining appropriate records

Records will be kept for seven years.

CPSN records are maintained using cloud-based technology systems, covering HRIS, CRM and Operational documentation.

Forms that apply to this policy

- Salesforce records
- Continuous Improvement Register
- Reports to Leadership Team and/or Boards and Committees
- Quality and Practice Report to Human Rights Committee
- Quality and Risk Report to Finance and Audit Committee
- Client Service Agreement
- Risk Register
- Feedback Register
- Client surveys
- Employee surveys
- Incident Reports
- Audit Reports (internal and external)

Procedures that apply to this Policy

- Complaints Management Procedure
- Incident Reporting Procedure
- Hazards/Incident Reporting Procedure

Document Revision History

This document is only valid on the day it was printed.

| Who | Version | Date | Description of review |
|-----|---------|---------------|---|
| CEO | V1 | Unknown | |
| CEO | V2 | April 2024 | Scheduled Review |
| CEO | V3 | February 2026 | Scheduled Review, and realignment of roles following organisational restructure |