

# OM4

# Continuous Improvement

Thrive Care Group Subsidiaries



This policy is part of Thrive Care Group's (Thrive) comprehensive policy suite, designed to guide and govern operations across all subsidiaries. It establishes a unified framework that ensures consistent standards, accountability, and alignment with Thrive core values and strategic objectives. The policy applies to all employees, contractors, and stakeholders within Thrive and its subsidiaries, supporting seamless governance and compliance throughout the organisation.

# OM4 Continuous Improvement

## Policy Statement

1. Thrive is committed to embedding Continuous Quality Improvement (CQI) across all aspects of governance, operations, and service delivery. This policy outlines the systems, responsibilities, and processes that support continuous improvement, policy development, team member engagement, and performance planning.
2. Thrive will:
  - a. Maintain systems for planning, monitoring, and evaluating quality initiatives at both organisational and program levels.
  - b. Encourage team member participation in strategic direction, policy development, and service improvement.
  - c. Promote collaborative relationships with stakeholders to enhance outcomes for clients and team members.
  - d. Support professional development and career progression for team members.
  - e. Ensure fairness and equity in performance review processes.
  - f. Align individual performance goals with Thrive's Strategic Plan and Business Plan.
  - g. Include CQI as a standing agenda item at Board and staff meetings.
  - h. Maintain a structured Quality Improvement Plan aligned with the Quality Cycle (Plan–Do–Check–Act). All improvement activities will consider Thrive's strategic goals and outcomes.
  - i. Actively seek feedback from Aboriginal and Torres Strait Islander individuals, communities, and organisations to ensure services are culturally safe and inclusive. This includes targeted consultations, partnerships, and culturally appropriate engagement methods such as yarning circles and community meetings.

## Procedures

### 1. Board responsibilities

The Board will:

- a. Demonstrate a culture of quality improvement through governance practices.
- b. Lead and endorse quality improvement activities aligned with strategic goals.

### 2. Chief Executive Officer Responsibilities

The Chief Executive Officer will:

- a. Lead the development of a quality improvement culture.
- b. Authorise team member participation in conferences and professional practice.
- c. Coordinate CQI systems, research partnerships, and benchmarking activities.
- d. Orient new team members to CQI systems.
- e. Monitor implementation of the Quality Improvement Plan.

### 3. Management Responsibilities

Management will:

- a. Support benchmarking activities and organisational change.
- b. Orient new team members to CQI systems.

### 4. Team Member responsibilities

Team members will:

- a. Promote and demonstrate commitment to CQI.
- b. Assist with implementation of CQI activities and processes.

### 5. Client and Feedback

Thrive will:

- a. Collect feedback through surveys, focus groups, interviews, audits, incident reports, complaints, and policy reviews.

- b. Review findings and implement corrective actions where necessary.
- c. Share findings with relevant team members and seek input on improvement solutions.

## 6. Initiating Additions or Changes

- a. Team members may email the CEO to propose changes to quality systems.
- b. The CEO or delegate will:
  - i. Clarify the issue
  - ii. Identify solutions
  - iii. Record significant improvements in the Quality Improvement Plan
  - iv. Assign responsibilities and timeframes
  - v. Provide feedback and evaluate effectiveness
  - vi. File documentation in the Quality Improvement Folder

## 7. Accreditation and Validation Reviews

- a. Thrive is required to undergo a Quality Accreditation review every two years against the NDIS Quality and Safeguards Commission. This review assesses performance and outcomes against the NDIS Practice Standards and identifies opportunities for improvement.
- b. Thrive is also required to undergo Aged Care Accreditation audits conducted by the Aged Care Quality and Safety Commission. These audits assess compliance with the Aged Care Quality Standards, including consumer dignity, participation, and service delivery.
- c. Improvements identified through both NDIS and Aged Care reviews in the Accreditation Report will be summarised and incorporated into the Quality Improvement Plan.
- d. Thrive will ensure all team members are informed of audit outcomes and involved in implementing required improvements.

## 8. Research

- a. Thrive will access and share evidence-based practice models and sector trends.
- b. Thrive documents and shares Internal research projects to promote quality initiatives

## 9. Internal Policy Development

- a. The Board will endorse new or amended policies.
- b. The CEO will lead policy development and engage Advisory Bodies.

- c. Management will prioritise policy reviews and support team member participation.
- d. Team members will provide feedback and participate in reviews.

#### 10. Policy Development Process

Thrive will:

- a. Identify the need for a new or revised policy
- b. Assign responsibility for development.
- c. Gather data through interviews, audits, surveys, and workshops.
- d. Draft the policy and procedures.
- e. Consult stakeholders for review.
- f. Submit for Board endorsement.
- g. Implement through training, distribution, and HR system acknowledgement.
- h. Review policies bi-annually or annually as scheduled.

#### 11. Team Member Engagement

Thrive will:

- a. Conduct biennial all-team member meetings for strategic planning and decision-making.
- b. Conduct quarterly team member surveys and culture audits.
- c. Consult team members on major workplace changes and encourage input on:
  - i. Service design
  - ii. Policy development
  - iii. Technology changes
  - iv. Workplace Health & Safety matters
  - v. Training and development

#### 12. Learning & Development

Thrive will:

- a. Provide opportunities for skill development and career progression.
- b. Fund position-specific training as required.

- c. Support team member-initiated development through flexible arrangements and financial assistance.
- d. Require presentations and application of new skills post-training.
- e. Maintain a training schedule aligned with the skills matrix.

## Related Business Procedures

1. OM1 – Governing Body Policy
2. OM5 – Feedback & Complaints Policy
3. HR8 – Learning & Development

## Responsible Persons

1. The Chief Executive Officer must:
  - a. Manage and monitor compliance with this policy.
  - b. Support team member competence and compliance with this policy.
2. Management must:
  - a. Manage and monitor compliance with this policy.
  - b. Ensure employees receive appropriate training, supervision and debriefing to comply with this policy.
3. All Thrive team members must comply with this policy.

## Definitions

1. **Accreditation:** An assessment by an external body or agency to determine the level of compliance with an agreed set of standards.
2. **Board:** The legally responsible managing body of Thrive.
3. **Board Member:** A Board member who does not have a formal title, such as Chair, Vice Chair, Treasurer or Secretary.

4. **Client Advisory Committee:** Committee established by Thrive composed of individuals who are current or former clients of Thrive's. The Committee represents the interests and perspectives of clients, providing feedback and recommendations to improve service delivery and client satisfaction.
5. **Clinical Care Committee:** Committee established by Thrive to oversee and ensure the quality and safety of clinical services, including the development and implementation of clinical policies, procedures, and guidelines, as well as monitoring and evaluating clinical performance and outcomes.
6. **Continuous Quality Improvement:** The process of continual review of Thrive, its structures and functions of governance, management, engagement with clients and other stakeholders and its service delivery.
7. **Finance Team:** Team responsible for managing the company's financial operations.
8. **HR System:** Employment Hero.
9. **Improving Performance:** Continuous adaptation of processes to meet stakeholder needs.
10. **Management:** Thrive's executive and leadership team responsible for overseeing its operations, strategic planning, and decision-making processes.
11. **Manager:** Staff member overseeing operations and personnel.
12. **People & Culture Team:** Team responsible for HR strategies and workplace culture.
13. **People Manager:** An individual employed by Thrive who is responsible for leading and managing a team of employees.
14. **Policy:** Statement of Thrive's position and actions on a specific issue.
15. **Professional Development Assistance:** Financial support for employee development.
16. **Quality:** Extent to which the properties of a service or product produce a desired outcome.
17. **Quality Cycle:** Plan–Do–Check–Act approach to continuous improvement.
18. **Quality Improvement Committee:** Committee established by Thrive to oversee and guide the organisation's quality improvement initiatives. The committee is responsible for identifying areas for improvement, developing strategies to enhance service delivery, monitoring the implementation of quality improvement projects, and evaluating their outcomes.
19. **Quality Improvement Folder:** Repository for quality improvement documentation.

20. **Quality Improvement Plan:** A plan developed by Thrive that Thrive works under which outlines the specific tasks to be undertaken by staff during the Quality Cycle and the steps to meet accreditation requirements.
21. **Stakeholders:** Clients, team members and suppliers as well as community professionals involved with Thrive.
22. **Strategic Plan:** Document outlining Thrive's long-term vision, goals, and objectives. It provides a roadmap for decision-making and resource allocation.
23. **Team Member:** All Thrive employees, volunteers and subcontractors.
24. **Thrive:** Thrive Care Group Pty Ltd ABN 68 637 232 752, together with each of its subsidiaries.
25. **Workplace Health and Safety (WHS):** the policies and procedures in place to ensure a safe and healthy working environment.
26. **Workplace Health and Safety Committee:** Committee established by Thrive to promote and ensure a safe and healthy working environment for all employees, volunteers, and visitors. The committee is responsible for developing, implementing, and monitoring WHS policies and procedures, conducting regular risk assessments, and facilitating communication and consultation on WHS matters.

## References

1. Aged Care Act 2024 (Cth) and its associated regulations
2. National Disability Insurance Scheme (NDIS) Practice Standards and their associated regulations
3. Fair Work Act 2009
4. Work Health and Safety Act 2011

## Version Control

Version 1          31 August 2025          New policy creation



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