

The Junction Clubhouse Cairns Ltd		
Policy: Continuous Improvement		
Policy number: JQS.P1.15		Date adopted: 22/08/2018
Authorised by: The Board		
Date last reviewed: 21/10/2020	Reviewed by: Quality Review Panel	Date of next review: 22/10/2022

Related documents:	
Related policies and procedures, How To Task Lists, forms, registers or other organisational documents of The Junction	<ul style="list-style-type: none"> • Continuous Improvement Plan • Risk Management Plan • Complaints Policy • WHS Policy • Junction Quality System Framework policy
Other standards	<ul style="list-style-type: none"> • National Mental Health standards • International Standards for Clubhouse programs • Human Services Quality standards • NDIS Practice Standards
Other Requirements	<ul style="list-style-type: none"> • Human Rights Act 2019 (QLD)

1. Purpose:

The purpose of this policy is to guide The Junction in operating efficiently and effectively to meet the needs of members using our services, and to continuously improve its activities. We undertake ongoing quality control and evaluation of all our operations to ensure maintenance of standards appropriate to the expectations of members and the wider community.

2. Scope

This policy applies to all employees, members, contractors, volunteers and visitors involved in the operations of The Junction Clubhouse Cairns Ltd.

3. Policy statement:

The Junction is committed to continuously improving all aspects of its operations with the aim of delivering the best possible services to service users.

Specifically, we will:

- Regularly collect information, through various information sources, about things that are working well, things that are not working well, or have gone wrong, ideas for better processes, and changes in requirements or practice knowledge external to the service
- Record issues, ideas and proposed actions in the Continuous Improvement Plan
- Determine if an issue represents a risk, and record it on the Risk Management Plan
- Determine, in consultation with those affected, necessary actions to address or make changes
- Implement the changes, as agreed and documented
- Advise all relevant stakeholders of any changes made
- Monitor progress and review whether changes have had the intended positive outcomes; whether there are any unintended negative impacts of changes and any further changes required to address this
- Report regularly to the Board on the Continuous Improvement Plan and progress

4. Procedures

4.1 Continuous Improvement Plan (plan)

The Junction will use a model of continuous improvement per ***The Junction Quality System Framework policy*** to:

- Enhance member services using quality improvement techniques and processes
- Enact improvement by utilising the plan-do-check-act cycle (PDCA):

The PDCA is a four-step model for carrying out change. Just as a circle has no end, the PDCA cycle should be repeated for continuous improvement.



1. **Plan:** Identify an opportunity and plan for change
2. **Do:** Implement the change on a small scale
3. **Check:** Use data to analyse the results of the change and determine whether it made a difference
4. **Act:** If the change was successful, implement it and continuously assess results. If the change did not work, begin the cycle again

The Director will provide, with the assistance of employees, members, contractors, volunteers and visitors, the capture and recording of information for the Continuous Improvement Plan

The Plan will include the following information:

- Date identified: date the issue or idea was identified
- Agreed action/s to respond to the idea or issue
- Who will be responsible for taking action/s
- Date action/s are to be completed
- Date to review actions and any outcomes or unintended impacts; further actions required.

4.2 Implementing the Plan (Do)

The Junction will implement the plan and provide training to all employees, members, volunteers involved in the daily operations of The Junction.

4.3 Reviewing Your Plan (Check)

Reviews of the Plan occur annually by the Director and the Senior Recovery Facilitator as part of our planning cycle and risk management process. The review may include the following methods:

- Employees and volunteers may often receive feedback (formal and informal) or complaints from members in the first instance. These processes are detailed in the ***Complaints by Members policy***
- Employees, members and volunteers are also responsible for completing ***Incident Report Forms*** as required in the ***WHS policies***
- Workplace safety audits as required in the ***WHS policies***
- Surveying members from time to time, and audits of operational aspects of The Junction
- Employees may collect feedback and other information from networking with other agencies
- Collecting information from other sources, such as regulatory requirements, and external audits and compliance processes, is the responsibility of the Director
- Board members may also access information and feedback which indicates needed improvements
- Discussions at employees and member meetings may also identify improvements, including discussions of risks they have identified.

4.4 Implementing Improvements (Act)

The Junction will implement improvements through a variety of ways, such as:

- Employees', volunteers' and members' training
- Provision of information
- Changes in procedures or practices
- Further consultation or formation of a working group to explore the issue and possible responses. Outcomes would be reported back to future team meetings
- Seeking external services or advice
- Acquiring or replacing equipment or software, etc.

The Junction will respond to different issues in terms of urgency and importance, for example:

- Some complaints and feedback instances may require an immediate response. These are generally referred to the Director, who will determine the actions required
- Some improvements may be minor and implemented within a work team. Such instances are discussed at team meetings and required actions agreed upon. This may be confirmed during supervision between the Senior Recovery Facilitator and the Director
- All improvement actions should be reported to the Director to enable updating of the Continuous Improvement Plan
- Major issues or changes may be referred to the Board for a decision, such as when there is a significant cost, risk or impact to the organisation
- Strategic Planning processes may also identify issues and actions required. Other improvements may be identified consistent with the future aspirations of The Junction (eg: building specialist skills, expansion of services, developing partnerships).

Other actions which form part of the continuous improvement process, such as:

- Any improvements already implemented are also discussed to determine effectiveness, unintended impacts and any further actions required
- Actions will need to include the necessary advice to those affected by any improvements, and how this will occur.

4.5 Recording and Reporting on Improvements

The Director is responsible for the recording and reporting of information into the Continuous Improvement Plan. The plan will be tabled and tracked for progress at employees and member meetings each month, to ensure that actions on improvement are achieved. The steps are:

- All identified issues and improvements planned and implemented are recorded in the Continuous Improvement Plan as well as in the Risk Management Plan/Register (where relevant) to ensure that they are implemented, monitored and evaluated
- Information source documents, such as complaint or feedback forms, will be annotated to show that they have been included in the Continuous Improvement Plan
- The Plan is regularly reviewed at employees' and members' meetings to monitor progress in implementing improvements and the effectiveness of improvements
- The Director will report annually (or as deemed necessary) to the Board on the Continuous Improvement Plan and progress. Major and urgent improvement issues will be reported for Board information or decision as required.

5. Review processes

Policy review frequency: Annually	Responsibility for review: The Director
Review process: The Director, as Chair of the Quality Review Panel convenes the panel to conduct reviews.	
Documentation and communication: All policy decisions will be documented and communicated through the Quality Review Panel observing the Document Control HTTL. Note: add version number after review.	