

# Quality Improvement Plan 2007 - 2008

## Perspective 2: Consumer and Community

Focus Area: Consumer Focus

<b>Objective 2.1 The organisation's consumers are satisfied with services delivered.</b>					
<b>Indicator 2.1a The organisation has a process for monitoring consumer satisfaction and improves its service according to the feedback collected.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
2.1a.1	QAHC will provide all consumers with the opportunity to provide feedback through evaluation of individual events, activities and general service delivery.	All project staff	Ongoing		Evaluation forms for training, workshops and events. Feedback Discussion Board on website. Focus testing of printed/electronic resources.
2.1a.2	Comments, evaluation and feedback data will be collated and suggestions for improvement acted upon where appropriate. Reports of feedback and recommendations will be provided to the Board at least every 12 months.	GM, Program Managers	Ongoing June		Individual evaluation reports produced within projects. Summary report provided to Board in June.

<b>Indicator 2.1b The organisation has a documented, advertised and accessible complaint mechanism.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
2.1b.1	QAHC will document all complaints in accordance with documented procedures and report regularly to the Management Committee on the nature of any complaints, the actions taken and outcomes achieved.	GM, Program Managers	Ongoing		Report complaints and outcomes to Board.
2.1b.2	QAHC will ensure consumers are advised of the complaints procedure.	GM All project staff	Ongoing		Complaints procedure on website. Clients referred to complaints procedure where necessary.

<b>Objective 2.2</b> <b>The organisation ensures its consumers are aware of their rights and responsibilities and upholds those rights.</b>					
<b>Indicator 2.2a</b> <b>The organisation ensures workers inform consumers of their rights and responsibilities, and assist them to exercise those rights and meet their responsibilities.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
2.2a.1	QAHC will maintain written policies and procedures on the mutual rights and responsibilities of both the organisation and consumers that will be reviewed and updated annually where required. This information will be made available to consumers so they can exercise their rights and responsibilities in accessing services.	GM  Program managers Project staff	Ongoing		Consumer Rights & Responsibilities Statement on website. CR&RS included in staff induction.  CR&RS promoted among consumers.

<b>Indicator 2.2b</b> <b>The organisation has systems in place to ensure the confidentiality, privacy and consent of consumers.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
2.2b.1	QAHC will have systems and processes in place that uphold consumer's rights to privacy and confidentiality, taking into account relevant privacy and other legislative requirements. QAHC will maintain written policies and procedures regarding confidentiality, privacy and consent.	GM  GM	August 07	December 07	Included in CR&RS.  Develop specific privacy policy for consumers and members
2.2b.2	Consumers will be informed of QAHC's policies and procedures on protecting consumer privacy and confidentiality.	GM	Ongoing		CR&RS on website.

**Focus Area: Accessible Services**

<b>Objective 2.3 Services are provided with consideration for the target group’s social and cultural needs and expectations.</b>					
<b>Indicator 2.3a The organisation develops strategies to ensure that its services are culturally appropriate and non-discriminatory to the target group.</b>					
	<b>Organisation’s Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
2.3a.1	QAHC will provide services that are appropriate to the social and cultural needs of consumers.	GM, Program Managers, All Staff	Ongoing		Focus testing printed and electronic resources among target group. Involvement of target communities in programs and staff, volunteers and advisory group members.

<b>Objective 2.4 The organisation addresses physical and knowledge barriers that may prevent the target group from using its services.</b>					
<b>Indicator 2.4a The organisation identifies and addresses barriers to access to the service by groups or individuals, including hours of operation, publicising service availability, and service delivery location and environment.</b>					
	<b>Organisation’s Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
2.4a.1	QAHC will manage issues of consumer access by monitoring and addressing any unintended structural or communication barriers that consumers may perceive in accessing services.	GM, Program Managers, All Staff	Ongoing		State-wide free-call number and after hours recorded information service. Outreach to venue, events, groups and online. Publicity in gay and mainstream media. Gain feedback from staff, volunteers and consumers.

**Focus Area: Engagement and Participation**

<b>Objective 2.5 The organisation encourages participation by members of the target group and the broader community.</b>					
<b>Indicator 2.5a The organisation has a process in place to allow its consumers and representatives of the community to participate in service planning, delivery and evaluation.</b>					
	<b>Organisation’s Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
2.5a.1	Opportunities to participate in service planning, delivery and evaluation (other than consumer feedback) will be made available to consumers and stakeholders through a variety of mechanisms and processes to accommodate individual needs, resources and availability.	GM, Program Managers, Project Staff	Ongoing		Volunteer recruitment and training program. Focus testing of printed and electronic resources. Community members recruited to Board and Advisory Groups.

2.51.2	The views of consumers and stakeholders will be recorded and considered by QAHC in future service delivery.	GM, Program Managers, Project Staff	Ongoing		Feedback included in annual planning processes.
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**Focus Area: Appropriate Services**

<b>Objective 2.6 The organisation plans its services in accordance with the needs of its target group.</b>					
<b>Indicator 2.6a The organisation develops and implements specialist health service delivery strategies, using principles appropriate to the target group's needs.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
2.6a.1	QAHC will ensure mechanisms are in place to provide access to a range of services appropriate to the target group, within available resources.	GM, Program Managers, Project Staff	Ongoing		Planning based on evidence of need, evaluation of effectiveness and feedback from consumers. Delivery of services within settings used by consumers (e.g. venues, groups, events, online, telephone). Sex positive, honest information provided.

**Focus Area: Collaboration**

<b>Objective 2.7 The organisation collaborates to enhance service delivery for its target group.</b>					
<b>Indicator 2.7a The organisation actively collaborates with other agencies to improve its service delivery.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
2.7a.1	QAHC will develop and continue to maintain collaborative processes for planning and coordinating services with other agencies to improve services for consumers. This will be achieved through: <ul style="list-style-type: none"> <li>networking with other organisations to develop and deliver resources and programs</li> <li>sharing information about other organisations and the services available for consumers; and</li> <li>developing appropriate referral processes with other agencies according to consumer's needs, as required.</li> </ul>	GM  Program Managers  Project Staff  Office Manager	Ongoing  Ongoing  Ongoing  Ongoing		Participate in PONGHO meetings.  Participate in Advisory Groups. Chair Campaign Reference Groups.  Participate in local interagency groups. Maintain knowledge of local services and referral pathways.  On-line services directory provided via website.

## Perspective 3: Continuous Quality Improvement

### Focus Area: Innovation and Learning

<b>Objective 3.1 The organisation is committed to ongoing development of its service activities and workers.</b>					
<b>Indicator 3.1a The organisation supports learning about best practice approaches to service delivery, management and operations.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
3.1a.1	QAHC will maintain membership and/or affiliation with key groups within the community to remain informed regarding issues of best practice in service delivery and management.	GM	Ongoing		Maintain membership of AFAO, Australian Health Promotion Association, Public Health Association of Australia, QCOSS.
3.1a.2	QAHC will ensure that its staff are appropriately supported to effectively undertake their roles and duties within the organisation to provide a quality service to consumers.	GM, Program Managers	Ongoing		Training and development needs assessed annually as part of appraisal process.
3.1a.3	QAHC will ensure staff: <ul style="list-style-type: none"> <li>• Have access to ongoing training and development opportunities appropriate to their roles and duties within the organisation;</li> <li>• are involved in regular staff appraisals; and</li> <li>• have access to professional supervision (where appropriate).</li> </ul>	GM, Program Managers	Ongoing		\$750 allocated to each staff members for training & development. Whole of staff training conducted at staff face-to-face meetings twice a year. All staff participate in annual appraisal. All staff have access to external staff counselling service, Interlock.

### Focus Area: Workplace Health & Safety

<b>Objective 3.2 The health and safety of all persons within the organisation is protected.</b>					
<b>Indicator 3.2a The organisation has a strategy to ensure safe management of work practices and physical and psychological aspects of the environment.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
3.2a.1	Workplace health and safety practices within the workplace will be regularly reviewed to ensure they comply with workplace health and safety ethics, standards and relevant legislation.	GM, Office Manager	Ongoing		Review to be conducted in January.

3.2a.2	Staff will be provided with regular access to debriefing or critical incident sessions, as required.	GM	Ongoing		Session provided as needed.
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**Focus Area: Risk Management**

<b>Objective 3.3 The organisation monitors organisational risks and controls these where possible.</b>					
<b>Indicator 3.3a The organisation develops, documents and implements a risk management process.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
3.3a.1	QAHC will conduct a regular risk assessment to identify, assess and manage risk and potential hazards associated with the organisations, its activities and services on a regular basis.	GM	Ongoing	October	Continue development of Risk Management policy.
3.3a.2	QAHC will ensure staff receive information to understand the legal responsibilities of their work, including but not limited to, anti-discrimination, workplace health and safety and confidentiality requirements. This will be provided upon induction, in addition to regular update sessions.	GM, Program Managers, All Staff	Ongoing September		Include in staff induction program. Policies available via website. Complete staff manual.

**Focus Area: Evaluation**

<b>Objective 3.4 The organisation regularly evaluates its activities.</b>					
<b>Indicator 3.4a The organisation has developed valid systems or processes for evaluating and improving its service activities and outcomes.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
3.4a.1	<p>The organisation will establish processes to regularly monitor and evaluate its activities to determine the impact, quality and effectiveness of its services. Information and data will be used to:</p> <ul style="list-style-type: none"> <li>• encourage ongoing improvement;</li> <li>• identify trends and emerging issues;</li> <li>• provide evidence of the impact of activities; and</li> <li>• provide an informed basis for decision making, review and future planning of services.</li> </ul>	GM, Program Managers, Project Staff	Ongoing  Ongoing	September	<p>Continue development of evaluation framework for gay/msm program. Continue to collect statistical information via stats database. Undertake evaluation of specific areas of the program on a rolling basis.</p>

## Perspective 4: Management and Resourcing

### Focus Area: Leadership and Governance

<b>Objective 4.1</b>		<b>The Management Committee provides leadership and takes responsibility for ensuring that the organisation's achievements and services contribute to improving the health and well-being of the target group.</b>			
<b>Indicator 4.1a</b>		<b>The Management Committee meets its obligations under the <i>Association Incorporation Act</i>, including matters relating to corporate governance, financial administration and insurance.</b>			
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
4.1a.1	The Board will comply with all of its legal, contractual and administrative requirements, including but not limited to obligations under the Association Incorporation Act and the Queensland Health Service Agreement.	Board, Secretary, GM	Ongoing		
4.1a.2	The Board will: <ul style="list-style-type: none"> <li>ensure that assets are applied towards the organisation's aim and purpose;</li> <li>operate in an accountable and transparent manner;</li> <li>provide financial information on an accurate, relevant and timely basis; and</li> <li>ensure that adequate and appropriate insurance cover for the organisation is maintained.</li> </ul>	Board	Ongoing		Maintain assets register. Report on the work of the organisations to members, communities and funders. Financial information provided to Board monthly and to funding bodies at least quarterly. Report on insurance cover in annual report.
4.1a.3	QAHC will have an agreed set of financial procedures that cover accountability, audit trails, segregation of duties, recording, reporting and decision making tasks. These procedures will be reviewed regularly.	Board, GM, Senior Finance Officer	Ongoing	November 07	Review Delegations of Authority by November.
4.1a.4	QAHC will ensure that all Board members participate in an induction program to inform them of their roles and responsibilities and the organisation's constitution.	Board, GM	November 07		Induction program provided to new Board members following election.

<b>Indicator 4.1b The Management Committee leads the identification of the organisation's service priorities and development of the service activity plan.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
4.1b.1	The Board will lead staff and other stakeholders in determining the direction and scope of the organisation by developing a strategic plan which: <ul style="list-style-type: none"> <li>• analyses the internal and external environment;</li> <li>• considers changes and transitions;</li> <li>• sets out clear directions; and</li> <li>• sets concrete goals for the future.</li> </ul>	Board, GM	Ongoing		Implement Strategic Transition Plan 2007-2009.
4.1b.2	QAHC will explore innovative options to maximise the QAHC's sustainability.	Board, GM	Ongoing		Appoint funding writer (from fundraised monies).

**Focus Area: Operational Management**

<b>Objective 4.2 The organisation's management is accountable for how services are delivered.</b>					
<b>Indicator 4.2a The organisation has an operational plan that clearly identifies its goals and strategies, and assigns workers responsibilities and accountabilities.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
4.2a.1	QAHC's business plan will: <ul style="list-style-type: none"> <li>• link with the QAHC's goals and strategies outlines in the Strategic Plan;</li> <li>• detail the actions required to implement each strategy;</li> <li>• assign responsibilities and timeframes; and</li> <li>• identify resources required.</li> </ul>	GM, Program Staff	Ongoing April 08	June 08	Report against Operational Plan for 2007/08. Develop Operational Plan for 2008/09.

**Focus Area: Efficient Use of Resources**

<b>Objective 4.3 Services are delivered to the target group with an efficient use of resources.</b>					
<b>Indicator 4.3a The Management Committee is accountable for the efficiency of service delivery.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
4.3a.1	The organisation will regularly review all policies and procedures to ensure appropriate systems are in place to manage the financial, human and environmental (eg property, equipment, assets) resources effectively and within any relevant legislative requirements.	Board, GM	Ongoing		Rolling program of policy review.

**Focus Area: Transparency and Accountability**

<b>Objective 4.5 The organisation is accountable to key stakeholders.</b>					
<b>Indicator 4.5a The organisation ensures that workers comply with the applicable codes of ethics, standards of practice and registration requirements.</b>					
	<b>Organisation's Strategy</b>	<b>Responsibility</b>	<b>Start</b>	<b>End</b>	<b>Process</b>
4.5a.1	QAHC will maintain a Code of Conduct that prescribes standards of conduct for staff and Board.	GM	Ongoing		Code of Conduct part of induction process for new staff and volunteers.
4.5a.2	QAHC will ensure that staff are appropriately qualified and maintain the relevant professional registrations/standards to preform their roles.	GM, Program Managers, All Staff	Ongoing		Person specifications require appropriate qualification ( where relevant).
4.5a.3	For organisations that work with young people under 18 years of age or people with impaired capacity, staff and Board will be required to hold a Blue Card issues by the Commission for Children and Young People.	GM, Program Managers	Ongoing		All staff and volunteers to have Blue Card as condition of work.