Continuous Improvement Plan

Self-Assessable Organisations

| Continuous Improvement Plan and Organisation Details | | | | | | | |
|---|-----------------------------|--------------------------|----------------------------|-----------------------|--|--|--|
| Organisation name (legal entity) | | | | | | | |
| Trading name (where applicable) | | | | | | | |
| Australian Business No (ABN) | | | | | | | |
| Service details | Service outlet name/s | | Service outlet number/s | Funding department | | | |
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| Organisation postal, email and telephone contact details | | | | | | | |
| Organisation contact person for the | | | | | | | |
| Continuous Improvement Plan | | | | | | | |
| Please record submission details for your Continuous Improvement Plan below. If your organisation receives funding under multiple funding streams and/or | | | | | | | |
| from different departments e.g. Young People DCYJMA and Community Services DCHDE, you are only required to complete and submit one self- | | | | | | | |
| assessment and continuous improvement plan for all of your self-assessable services. Please submit your completed self-assessment to all your Contract Officer/s. | | | | | | | |
| Contract officer/s name | | Contract officer/s email | | | | | |
| Continuous Improvement Plan (CIP) | □ Initial CIP □ Updated CIP | Date submitted | | | | | |



April 2022

| Declaration of Accountable/Authorised Officer | | | | | |
|---|----------|--|--|--|--|
| I Click here to enter text. hereby declare the following: | | | | | |
| 1. I am the Accountable/Authorised Officer for Click here to enter text. (the Organisation); and | | | | | |
| 2. the information provided in the Continuous Improvement Plan is true and correct to the best of my knowledge; and | | | | | |
| as at Click or tap to enter a date. the Organisation has developed, and will fully implement, the policies, procedures and management systems detailed in this Continuous Improvement Plan in accordance with the requirements of the Human Services Quality Standards; and | | | | | |
| 4. I have provided the completed Continuous Improvement Plan to the Governing Body (if any) of the Organisation and the Governing Body is aware that these policies, procedures and management systems have been developed and the Governing Body is committed to the implementation of those policies, procedures and management systems. | | | | | |
| Signed: Date: | Witness: | | | | |
| Name: Position: | Date: | | | | |
| Privacy Notice: The Queensland Government is collecting your personal information to assess the completeness of this self-assessment against the Human Services Quality Standards as required in your service agreement with the department/s. The department/s will handle your personal information in accordance with the <i>Information Privacy Act 2009</i> . | | | | | |

| Continuous Improvement Plan Checklist | | | | | | |
|---|---|-------|--|--|--|--|
| Please check before submitting your self-assessment | Where can I find this? | Check | | | | |
| The HSQF User Guide – Self-Assessable Organisations and the Guide to Self-Assessment and Continuous Improvement – Self-Assessable Organisations were used to complete this plan | On the HSQF website at: <u>www.dsdsatsip.qld.gov.au/our-</u> work/human-services-quality-framework | | | | | |
| All identified actions have been added to the Continuous Improvement Plan from the Self- Assessment Workbook | Continuous Improvement Plan/Self-Assessment Workbook | | | | | |
| Continuous Improvement Plan has been updated prior to submitting it to your contract officer 12 months after the self-assessment due date | Continuous Improvement Plan | | | | | |
| Organisation and departmental contact details are complete | Continuous Improvement Plan (coversheet) | | | | | |
| The declaration has been completed and signed by the accountable person | Above on this page | | | | | |

Continuous Improvement Plan

The Continuous Improvement Plan should reflect the ongoing effort of your organisation to improve processes and service delivery.

You should use the HSQF User Guide – Self-Assessable Organisations and the Guide to Self-Assessment and Continuous Improvement – Self-Assessable Organisations to complete this plan. Please follow the recommended timeframes for completion of improvement actions outlined in the Guide to Self-Assessment and Continuous Improvement – Self-Assessable Organisations (Appendix 4).

| Standard indicator | Rating from self- assessment and date identified | Issue and improvement action required | Responsible person to action | Required by date | Outcome and date closed | Review date |
|-----------------------|--|---------------------------------------|------------------------------------|------------------|-------------------------|----------------|
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