

Housing Services

**Human Services Quality Framework**

**Continuous Improvement Plan Template for Specialist Homelessness Service Providers**

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# Introduction

This continuous improvement plan template is designed to assist organisations record and monitor actions for improvement identified through a self-assessment against the Human Services Quality Standards (the standards). It includes a coversheet and checklist for submitting your plan to the department, where required.

The template should be used in conjunction with its two companion resources (available at [www.hpw.qld.gov.au/Housing/Homelessness):](http://www.hpw.qld.gov.au/Housing/Homelessness%29)

* + *Human Services Quality Framework: Self-assessment and Continuous Improvement Guide*

which explains the self-assessment and continuous improvement cycle

* + *Human Services Quality Framework: Self-assessment Workbook.*

# About the continuous improvement plan template

After completing a self-assessment, organisations should act on any identified area for improvement as soon as possible. The continuous improvement plan provides a structured way to:

* + record areas for improvement, such as identified gaps in systems and processes that do not meet the standards
	+ outline the planned actions/tasks to be undertaken
	+ allocate responsibility for improvement activities to relevant people in your organisation
	+ prioritise improvement activities based on an assessment of the impact they will have for your organisation and the people who use your services
	+ set realistic timeframes for the completion of tasks
	+ monitor, measure and report on the effectiveness of the improvements
	+ identify further opportunities to improve the quality of services delivered to customers.

Once developed and implemented, this plan provides a basis for maintaining quality through ongoing improvement. Further information about the continuous improvement cycle is available in the *HSQF Quality Pathway for Service Providers* information sheets available at: [www.communities.qld.gov.au/hsqf](http://www.communities.qld.gov.au/hsqf).

# Coversheet – Continuous improvement plan

|  |  |
| --- | --- |
| **Organisation name** |  |
| **Organisation Head Office address** |  |
| **ABN** |  |
| **Service details** | **Service/service outlet name/s** | **Service number/s or Provider Outlet ID** |
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| **Contact details for Organisation** | (Insert contact name)(Insert postal, email and phone contact details) |
| **Name and position of person within the organisation who approved the continuous improvement plan** |  |
| **Signature of above named person** |  |
| **Due date for submission of the plan** |  |
| **Due date for review of the continuous improvement plan** |  |
| Please record below the details of the departmental contact point used to submit your continuous improvement plan and coversheet. |
| Name of lead region contact and/or contract manager |  |
| Email address |  |
| *Note: If your organisation is completing a continuous improvement plan across multiple funding streams and/or regions (e.g. Disability and Community Services), please submit the required documents to only one department contact point. Please liaise with your regional contract manager to confirm the correct contact point.* |

# Template – Continuous Improvement plan

The continuous improvement plan should reflect the ongoing effort from an organisation to improve processes and service delivery for customers. The identified items within the plan can be prioritised based on risk and addressed within a scheduled timeframe. Some examples of the information that might be included in a plan are provided in the template below. Please delete these before beginning your plan.

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| --- | --- | --- | --- | --- | --- | --- |
| **Standard indicator** | **Rating from self- assessment and/or date identified** | **Issue and improvement action required** | **Responsible person to action** | **Required by date** | **Outcome and date closed** | **Review date** |
| *Examples 1.6* | *Not met**1 July 2015**2015* | *Invite representation of people using the service to participate in the annual organisational strategic planning* | *John T* | *30 June**2016* | *Remains open – planning underway for strategic planning session in October 2015* | *1 November**2015* |
| *1.6* | *Met**1 July 2015* | *We would like to have an electronic feedback form on our website. Although not a priority for at least 18 months, we believe this would be a great way to get feedback from a wide range of stakeholders and would also allow people to give feedback to us anonymously.* | *Maggie F* | *1**December 2016* | *Remains open* | *Reassess priority in January 2016* |
| *1.7* | *Partially met 1 July 2015* | *Database of people using services needs to be password-protected.* | *Fred P* | *3 July**2015* | *Relevant access has been allocated and password protection installed on database 3 July 2015.* | *Not applicable– Improvement action closed* |
| *1.7* | *Partially met 12 July 2015* | *Test of IT system and data quality audit (schedule for one month’s time).* | *John T* | *12 August**2015* | *Test and audit completed 12 August**2015. Review in 3 months’ time.* | *1 November**2015* |
|  | *Partially met* | *New staff member registration forms have not been* | *Fred P* | *31 July* | *Retraining completed* | *4 January 2016* |

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| --- | --- | --- | --- | --- | --- | --- |
| **Standard indicator** | **Rating from self- assessment and/or date identified** | **Issue and improvement action required** | **Responsible person to action** | **Required by date** | **Outcome and date closed** | **Review date** |
| *1.7* | *14 July 2015* | *consistently completed (staff members are sometimes set in the system based on verbal instruction). Need to retrain relevant staff in new staff member registration (schedule for two weeks’ time).* |  | *2015* | *2 July 2015. Review in 6 months’ time.* |  |
| *4.5* | *Not met**21 July 2015* | *Client Plan to be revised within the next three months. At present there is no evidence that the client has received the rights and responsibilities document, so we will include a check box for the client to tick and sign that they have received the document. Also add a client goals’ section so that the client can outline their goals and aspirations.* | *Jane S* | *20**October 2015* | *Revision of client plan completed, document updated to include tick box and ‘client goals’ section**15 October 2015.* | *1 February**2016, review sample of all plans to make sure client goals and aspirations are being recorded.* |
| *4.5* | *Not met**21 July 2015* | *The organisation needs to provide information in appropriate formats to enable service users to participate and make choices about the services they receive.* | *Fred P* | *1**September 2015* | *Re-printing of required information in appropriate format.**1 September 2015.* | *1 March 2016* |
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# Checklist – Continuous improvement plan

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| **Checklist** |
| **Please ensure you have completed the following before submitting your plan to the department** | **Where can I find this?** |  |
| Your organisation’s details and Board or Management Committee approval of the workbook | Cover sheet | [ ]  |
| Have all the identified actions been added to your plan from the self- assessment workbook? | Self-assessment workbook/continuous improvement plan | [ ]  |
| Have you updated your continuous improvement plan with current activities and noted the outcome or planned completion date?*Note: As the continuous improvement process is an ongoing activity, it is possible that not all improvement actions will be completed by the time the plan is submitted to the department* |  | [ ]  |
| Have you recorded the departmental contact point used to submit your continuous improvement plan? | Your department contract manager can advise the most applicable email address to submit your plan | [ ]  |