

# Continuous Improvement Plan

## Self-Assessable Organisations

September 2020

Continuous Improvement Plan and Organisation Details			
Organisation name (legal entity)			
Trading name (where applicable)			
Australian Business No (ABN)			
Service details	Service/service outlet name/s	Service outlet number/s	
Organisation postal, email and telephone contact details			
Organisation contact person for the Continuous Improvement Plan			
<b>Please record submission details for your Continuous Improvement Plan below.</b> If your organisation receives funding under <u>multiple</u> funding streams and/or regions e.g. Disability <u>and</u> Community Services, your Continuous Improvement Plan should cover all your self-assessable funding. Confirm the correct department contact point for submitting your Continuous Improvement Plan with your contract officer(s).			
Contract officer name		Contract officer email	
Continuous Improvement Plan (CIP)	<input type="checkbox"/> Initial CIP <input type="checkbox"/> Updated CIP	Date submitted	

## 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
3. 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 Department of Communities, Disability Services and Seniors and/or the Department of Child Safety, Youth and Women 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. The departments will handle your personal information in accordance with the *Information Privacy Act 2009*.

## Continuous Improvement Plan Checklist

Please check before submitting your self-assessment	Where can I find this?	Check
The <b>HSQF User Guide – Self-Assessable Organisations</b> and the <b>Guide to Self-Assessment and Continuous Improvement – Self-Assessable Organisations</b> were used to complete this plan	On the HSQF website at: <a href="http://www.communities.qld.gov.au/hsqf">www.communities.qld.gov.au/hsqf</a>	<input type="checkbox"/>
All identified actions have been added to the Continuous Improvement Plan from the Self-Assessment Workbook	Continuous Improvement Plan/Self-Assessment Workbook	<input type="checkbox"/>
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	<input type="checkbox"/>
Organisation and departmental contact details are complete	Continuous Improvement Plan (coversheet)	<input type="checkbox"/>
The declaration has been completed and signed by the accountable person	Above on this page	<input type="checkbox"/>

**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