QUALITY IMPROVEMENT PLAN

Disability Housing Properties Pty Ltd

Date created- 10/05/2022

Review date- 10/05/2023

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Quality Improvement Plan 1 – Fundamental Documentation

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| Criteria: 1.1 – Strategic and Operational Plan | |
| Description of Action: | The CEO/Director is responsible for developing a specified Strategic Plan for Disability Housing Properties Pty Ltd. This will highlight the organisational and operational structure of the business. These structures will be inclusive, diversified and culturally acceptable. This will reflect the NDIS’s rules, regulations, standards, and legislations. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 1 month after approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Strategic and Operational Plan annually. (1 year after creation and finalisation). |
| Review Date: |  |

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| Criteria: 1.2 – Client Handbook | |
| Description of Action: | The CEO/Director is responsible for developing a Client Handbook that is easily accessible for all participants, underlines the organisations objectives, services, policies, procedures, values, mission, and philosophy. This Client Handbook should outline what services the participant may receive and to which standards and quality. It should outline what the participant can expect when receiving services and protective measures implemented. This information may range from the complaints and feedback protocols to the medication management aspects of service delivery. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 2 months after approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Client Handbook annually. (1 year after creation and finalisation). When required, review or update in lieu with new or updated Policies and Procedures reflected in the organisations manual. |
| Review Date: |  |

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| Criteria: 1.3 – Service Agreement | |
| Description of Action: | The CEO/Director is responsible for developing a Service Agreement that is easily accessible for all participants, underlines the service provision required, this will include the objectives, services, prices, fees, additional supports, exit information etc. This Service Agreement must be accessible in various formats such as Easy English and should the participant or their relevant personnel require reflection or voice explanation, the CEO/Director should comply in a timely and professional manner. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 2 weeks after approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Service Agreement annually. (1 year after creation and finalisation). When required, review or update in lieu with new or updated Policies and Procedures reflected in the organisations manual. |
| Review Date: |  |

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| Criteria: 1.4 – Client Charter | |
| Description of Action: | The CEO/Director is responsible for developing a Client Charter that is easily accessible for all participants. To ensure this is easily accessible, it will be provided in different languages if requires, in Easy English format and provided in both hard copy and soft copy if required. If the participant or their relevant personnel require a face to face meeting, this will be provided in a timely manner and in accordance with their preference. If required, an advocacy service or interpreter may be utilised. Updated and current documents of the Client Charter will be published on the organisation’s website, in the Client Handbook and displayed in the head office. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 2 months after approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Client Charter annually. (1 year after creation and finalisation). When required, review or update in lieu with new or updated Policies and Procedures reflected in the organisations manual. |
| Review Date: |  |

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| Criteria: 1.5 – Policy and Procedure Manual | |
| Description of Action: | The CEO/Director is responsible for reviewing the organisations Policy and Procedure Manual which reflects the organisations operational requirements in accordance with the NDIS’s rules, regulations, standards, and legislation. The Policy and Procedure Manual is a requirement of the organisation and will be continuously referred to when required. It is a guide of compliance which assist to maintain safe standards for all persons related to the organisation. This includes participants, workers, staff, Management, visitors, family etc. It guides the organisation through all areas of maintenance, management, care provision and service provision. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | Prior to approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Policy and Procedure Manual annually. (1 year after creation and finalisation). When required, review or update in lieu with new or updated standards reflected in the requirements set forth by the NDIS Commission. |
| Review Date: |  |

Quality Improvement Plan 2 – Marketing and Networking

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| Criteria: 2.1 – Website | |
| Description of Action: | The CEO/Director is responsible for developing and creating our organisations website which examines the services and care provided. It will include all relevant information participants, or their related persons may require or wish to know. It aims to reflect our summarised policies, procedures, mission, and value statements. It is user friendly and beneficial to the community. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 1 month after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Website to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary. |
| Review Date: |  |

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| Criteria: 2.2 – Provided Resources | |
| Description of Action: | The CEO/Director is responsible for developing and creating appropriate marketing and networking resources in order to provide the public and community with relevant information regarding our organisations services. It aims to accommodate the needs of the community and the public. This aims to reflect the organisations cultural diversity, inclusion, acceptance, service provision and personal views. These resources may include, brochures, pamphlets, signate, business cards etc. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 1 month after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Provided Resources to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary. |
| Review Date: |  |

Quality Improvement Plan 3 – Finance and Governance

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| Criteria: 3.1 – Price Guide | |
| Description of Action: | The CEO/Director is responsible for developing and creating a price guide which adequately set outs the organisations price for service, external fees, any contingencies, administration fees or support fees. This will be provided to participants in an accessible and easy to read format. This will be referenced in the participants individualised Service Agreement. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 1 month after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Price Guide to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary. |
| Review Date: |  |

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| Criteria: 3.2 – Documentation Creation | |
| Description of Action: | The CEO/Director is responsible for developing and creating all documents, templates and forms that are utilised to reflect the organisations financial statements, invoicing, payments systems, accounting systems and financial systems. These documents and templates will be utilised throughout the organisation and implemented where necessary. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 1 month after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Financial Documentation to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary. |
| Review Date: |  |

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| Criteria: 3.3 – Service Promotion | |
| Description of Action: | The CEO/Director is responsible for continuously promoting the organisations services to the public and the community. This information should be easily accessible, readable, and useful for others. This will involve ensuring information is provided in accordance with the access requirements required by the general public, community, and potential participants. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | Prior to the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Service Promotion documentation to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary. |
| Review Date: |  |

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| Criteria: 3.4 – Financial Management Policy and Procedure Review | |
| Description of Action: | The CEO/Director is responsible for reviewing and monitoring the Financial Management Policy and Procedure. This review will encompass examination of the organisation’s financial management and participants financial management protocols. This review will require review of all archived or current documentation related to finance or accounting. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 6 months after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Financial Management Policy and Procedure to examine any changes or alterations in the organisation that are required to be referenced in the organisations Policy and Procedure Manual. Adjustments may be made as deemed necessary and will be individually dependant. |
| Review Date: |  |

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| Criteria: 3.5 – Compliance Management | |
| Description of Action: | The CEO/Director is responsible for reviewing, monitoring, and ensuring the organisation is continuously compliant throughout their legislative documents as well as throughout their practice. The organisation will continuously comply with the rules, regulations, legislation, and standards set forth by the NDIS Quality and Safety Commission. Compliance will also be in lieu with the Australian Department of Health and Human Services Standards. The CEO/Director is also responsible for ensuring the organisation is prepared for the internal and external reviews as depicted in 9.1 if the Quality Improvement Plan. Audits will be conduced by an external registered and certified agency annually. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 6 months after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the various aspects to Compliance Management to examine any changes or alterations in the organisation that are required to be referenced in the organisations Policy and Procedure Manual. Adjustments may be made as deemed necessary and will be individually dependant. |
| Review Date: |  |

Quality Improvement Plan 4 – Employment Procedures

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| Criteria: 4.1 – Employment System | |
| Description of Action: | The CEO/Director is responsible for developing and creating a through system when employing new personnel. This will include providing potential employees with a position description and allow them to begin the application and interview process should they meet the relevant criteria. Respectful advertising will be conducted whilst always attempting to maintain equal employment opportunity. Also refer to Quality Improvement Plan 11 as a further reference. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 2 months after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Employment System to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary. |
| Review Date: | Ongoing. |

Quality Improvement Plan 5 – Human Resources

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| Criteria: 5.1 – Human Resource Implementation | |
| Description of Action: | The CEO/Director is responsible for ensuring the Human Resource protocols are continuously upheld and implemented throughout operation. This will include ensuring workers who are recruited have the appropriate qualifications, experience, and certificates. It aims to delegate specific roles and ensures the organisation is taking all responsible measures to ensure the care and service provided to participants is of the highest quality. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | Before, during and after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the organisations Human Resource practices to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary or where updates are required. |
| Review Date: |  |

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| Criteria: 5.2 – Human Resource Policy and Procedure | |
| Description of Action: | The CEO/Director is responsible for upholding, implementing, and reviewing the Human Resource Policy and Procedure. The compliance of Human Resources must be continuously upheld. The maintenance of the Human Resource Policy and Procedure ranges from employment management, training regimes etc. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 6 months after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the organisations Human Resources Policy and Procedure to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary or where updates are required. |
| Review Date: |  |

Quality Improvement Plan 6 – Privacy and Confidentiality

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| Criteria: 6.1 – Privacy and Confidentiality Protocols | |
| Description of Action: | The CEO/Director is responsible for upholding, implementing, and reviewing the Privacy and Confidentiality Protocols outlined in the organisations policy and procedure manual. This information will be provided to any persons requesting the information in their desirable format. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 1 month after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the organisations Privacy and Confidentiality Protocols to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary or where updates are required. |
| Review Date: |  |

Quality Improvement Plan 7 – Referral Networking

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| Criteria: 7.1 – Referral System | |
| Description of Action: | The CEO/Director is responsible for developing and creating a structured Referral System which allows participants to access further services or assistance where necessary. A data base will be created and updated were necessary. This database will be accessible by staff and management of the organisation where deemed necessary. Further information will be provided when asked. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 2 months after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Referral System to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary or as updates occur. |
| Review Date: | Ongoing. |

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| Criteria: 7.2 – Networks | |
| Description of Action: | The CEO/Director is responsible for developing and creating Referral Networks with external agencies or organisations. This will include liaising and forming an agreement with others to ensure all participants receive the care and service they require. This also includes creating Referral Networks for stakeholders or sub-contracted personnel. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 1 month after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Referral Networking system to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary or as updates occur. |
| Review Date: | Ongoing. |

Quality Improvement Plan 8 – Complaint and Feedback Process

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| Criteria: 8.1 – Complaints and Feedback Information | |
| Description of Action: | The CEO/Director is responsible for developing a clear and easily accessible Complaint and Feedback Process that is provided to any persons related to the organisation. The Complaint and Feedback Brochure will be created which details how to inform our organisation of any complaints or feedback they wish to voice. In order to further assist with this process, our organisation will provide a Suggestion Box at the head office in order to provide the option of anonymity and transparency. Information will be adequately provided to any persons wishing to be informed of the Complaints and Feedback Process, this will be completed in a timely and respectful manner. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 2 months after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Complaint and Feedback Process in lieu with new or updated Policies and Procedures reflected in the organisations manual. |
| Review Date: |  |

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| Criteria: 8.2 – Complaints and Feedback Documentation (Provided Forms) | |
| Description of Action: | The CEO/Director is responsible for developing or creating the Complaint and Feedback Forms that are provided to others. These forms will adequately provide all persons wishing to voice a complaint or provide positive or negative feedback in a respectful manner. It will provide the option to remain anonymous and examine room for adjustment, improvement, or rectification in our organisation’s operations. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 2 months after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update or alter the Complaint and Feedback Forms in lieu with new or updated Policies and Procedures reflected in the organisations manual or should a person voice an issue or rectification that is required to be depicted through the forms. |
| Review Date: |  |

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| Criteria: 8.3 – Complaints and Feedback Register | |
| Description of Action: | The CEO/Director is responsible for developing and creating the Complaints and Feedback Register which appropriately tracks all brought forth forms of complaints, feedback, or compliments. This will include named or anonymous forms and will depict any non-conformities and their outcomes. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 2 months after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update or alter the Complaint and Feedback Register in lieu with new or updated Policies and Procedures reflected in the organisations manual or should the non-conformities brough forth entail a major non-compliance that needs to be rectified immediately. |
| Review Date: |  |

Quality Improvement Plan 9 – Injury and Abuse Protocols

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| Criteria: 9.1 – Injury and Abuse Protocols | |
| Description of Action: | The CEO/Director is responsible for developing and creating Injury and Abuse Protocols which aim to promote the health and safety of all persons related to the organisation. The guidelines developed aim to incorporate risk reduction, harm reduction, and avoid circumstances of abuse, neglect, and discrimination. This system aims to recognise risks and implement reduction mechanisms. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 1 month after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Injury and Abuse Protocols and Systems to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary. |
| Review Date: | [review annually] |

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| Criteria: 9.2 – Injury and Abuse Awareness | |
| Description of Action: | The CEO/Director is responsible for developing and creating Injury and Abuse Awareness throughout the organisation. This will be thoroughly explained to all staff, workers, and employees as well as participants. Appropriate information such as brochures or pamphlets will be provided to all workers in order to ensue, they understand the requirements set forth in the organisation’s guidelines. This documentation will be easily accessible, and this information will be provided upon request and in the requestor’s desirable format. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 2 months after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Injury and Abuse Awareness Systems to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary. |
| Review Date: |  |

Quality Improvement Plan 10 – Risk Management

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| Criteria: 10.1 – Risk Management Observations | |
| Description of Action: | The CEO/Director is responsible for preparing the organisation to thoroughly manage and examine Risk Management protocols in various areas of the organisation, this includes operation for both participants and workers. These areas include risks to participants, visitors and workers, financial and asset risks, risks associated with service delivery, risks of working with children (if applicable), risks to working with those with a disability, business continuity management, health and safety of all persons, building and fire/disaster management, security management etc. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 1 month after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the organisations Risk Management systems to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary or where updates are required. |
| Review Date: |  |

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| Criteria: 10.2 – Financial Risk Management | |
| Description of Action: | The CEO/Director is responsible for preparing the organisation to thoroughly manage and examine Financial Risk Management. This will be completed by utilising and engaging with an independent accountant to assist in managing accounts, financials and assets as well as provide expert advice to the organisation. Annual budgets will also be prepared. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 1 month after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the organisations Financial Risk Management systems to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary or where updates are required. |
| Review Date: |  |

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| Criteria: 10.3 – Risk Management Documentation | |
| Description of Action: | The CEO/Director is responsible for developing and creating appropriate documentation to successfully evaluate and manage Risk Management within the organisation. All documentation such as risk assessments, hazard assessments etc, will be appropriately maintained and updated, as necessary. Documentation will be provided to all persons who request it. This includes, participants, workers, etc. It will be provided in the requestor’s preferred format. The Framework will depict all appropriate measures to undertake when participating in Risk Management. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 3 months after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the organisations Risk Management Documentation to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary or where updates are required. |
| Review Date: |  |

Quality Improvement Plan 11 – Assessment, Planning and Review

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| Criteria: 11.1 – Assessment, Planning and Review | |
| Description of Action: | The CEO/Director is responsible for developing and creating a thorough system which assists the organisations personnel to conduct Assessments, Planning and Review accurately and respectfully. This will be conducted in accordance with the current and best standards of practice in the industry. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 1 month after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Assessment, Planning and Review systems to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary. |
| Review Date: | Ongoing. |

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| Criteria: 11.2 – Assessment, Planning and Review Documents | |
| Description of Action: | The CEO/Director is responsible for developing and creating Assessment, Planning and Review Documentation that is easily accessible for all persons including workers or participants etc. This information will be provided upon request and in the requestor’s desirable format. These tools will be continuously implemented in the organisation. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 1 month after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Assessment, Planning and Review Documents to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary. |
| Review Date: | Ongoing. |

Quality Improvement Plan 12 – Audit Review

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| Criteria: 12.1 – Audit Preparation | |
| Description of Action: | The CEO/Director is responsible for preparing the organisation for any upcoming internal or external audits. This may include knowledge checks for workers or documentation preparation. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 6 months after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the organisations Audit Review Systems to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary or where updates are required. |
| Review Date: |  |

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| Criteria: 12.2 – Audit Documentation Review | |
| Description of Action: | The CEO/Director is responsible for developing, creating, and monitoring Audit Documentation. This will include documentation related to many aspects of the organisation such as complaint and feedback forms and registers, current review of service delivery and preparation, review and implementation of policies and procedures, participant forms and files. This will ensure documented practices and protocols are implemented throughout practice in the organisation. |
| Delegation of Responsibility: | Erfan Ranjbar |
| Due Date: | In 3 months after the approval date [insert approval date]. |
| Completion Date: |  |
| Outcome: | Review, adjust, update, or alter the Audit Documentation to examine any changes or alterations in the organisation including reflecting new or updated Policies and Procedures depicted in the organisations manual. Adjustments may be made as deemed necessary. |
| Review Date: |  |