Quality Improvement Standards for Management and Governance

Three main aspects of quality improvement standards in management and governance are introduced:

- An overview of quality improvement processes

- Core standards for management and governance

- An overview of the diversity of quality assurance processes in NSW

What is Quality Improvement?

Continuous quality improvement is a broad management term that describes a process when organisations systematically assess and improve their performance along a range of criteria. Typing 'quality improvement' or 'quality assurance' into a search engine, you are likely to be swamped by the number and range of quality processes many of which are used in the sector. There can be a great deal of confusion about the various quality standards and the processes that accompany them.

Some specifically focus on accreditation while others provide guidelines without measureable criteria. There is debate whether quality standards aim to prescribe minimum levels of attainment and monitor compliance with legislative or policy requirements, or focus on improving the quality of the service in the form of outcomes for clients. Service providers need to understand the focus of the tool they are using and assess whether it aligns with the needs of their organisation.

Quality Improvement Processes

Most quality processes used within the community sector require documentation to demonstrate compliance with legislation and policies, a self-assessment process and an external review. Documentation to fulfil accountability and reporting requirements may include:

- The organisation's annual report, including an audited financial statement

- The annual financial acquittal

- An annual return which demonstrates the organisation's compliance with the requirements of the funding agreement

- Performance reports that measure outcomes against key performance indicators

- Data concerning clients and services

- Incident reports detailing adverse incidents involving clients or work, health and safety issues

- Management and governance processes

The service review process generally encompasses:

- A detailed self-assessment document providing evidence that the requirements of the standards have been met

- A desk top review of the documentation by the assessors

- An onsite review

- A review report

- The development of a mutually agreed quality improvement program (an action plan) which is then monitored

The implementation of a quality improvement process has the potential to enable Boards and managers to fulfil their responsibilities, enhance the effectiveness of the organisation and identify and manage potential risks. The keys to a useful process are the relevance of the quality program, the manner in which it is implemented and the skill of the reviewing team.

Services funded by more than one government agency often deal with more than one quality assurance and accreditation program. In an effort to reduce duplication some funding agencies will partially or fully recognise other processes/tools.

Core Standards for Governance and Management

Despite the diversity of quality accreditation programs and their accompanying standards and processes, there is congruence on what is required to recognise effective governance and management of a service.

'Standards are published documents setting out specifications and procedures designed to ensure products, services and systems are safe, reliable and consistently perform the way they were intended to. They establish a common language which defines quality and safety criteria'.
(QIP, About Standards)

Key performance indicators cover a range of criteria affecting organisational capacity including governance, management systems and processes, and capacity building, all factors that ensure the sustainability of a service. These assess the overarching aspects of the organisation as opposed to the individual services and programs provided.

The following criteria are used in many accreditation models:

Governance
- Organisational Purpose: Organisational goals are clearly articulated and aligned with clients' needs and aspirations.

- Leadership: The organisation's leadership is able to provide direction and strategies to ensure the organisation's goals are achieved. There is a collective sense of purpose that enables its philosophy, goals and service priorities to be identified and met.

- Legal and Regulatory Compliance: The organisation understands and complies with all relevant legislation and regulations and manages its contractual obligations effectively.

- Policies and Procedures: Policies are developed to guide the operation of the Board and support the organisation's service delivery and administrative activities.

- Accountability: At every level of the organisation there are appropriate accountability and probity measures in place.

Management Systems and Processes

- Planning, evaluation and service improvement: The service has processes in place to ensure planning, review and quality improvement.

- Financial Management: Funds received from both government and private sources are spent and accounted for appropriately and the financial management system is congruent with the goals of the organisation, ensuring an efficient and sustainable service. A business plan is in place to ensure that the organisations objectives are able to be addressed.

- Privacy: Information is collected and used in accordance with privacy legislation and the best interests of all stakeholders.

- Risk Assessment and Management: A comprehensive risk management process is in place.

- Knowledge Management: There is a systematic approach to how an organisation finds, selects, creates, distils, organises, presents and accesses internal and external information which is used to develop and support the organisation ensuring its long term sustainability and development.

- Communication and Feedback: The organisation implements effective processes for communication and feedback from all stakeholders in meaningful and appropriate ways.

- Organisational culture: The culture of the organisation is positive, supportive and conducive in ensuring the best interests of clients, members, staff and volunteers are served.

Workforce Development

- Human Resources Management: An effective process of human resources management (recruitment, performance management, performance review and delegations) is in place.

- Workforce Planning: Effective planning is used to ensure continuity and quality in service delivery.

- Training and Development: Opportunities are available in accordance with the goals of the organisation and the learning needs of employees.

Physical Resources

- Assets: The organisation's equipment, facilities and resources are adequate to fulfil its objectives in a safe and effective manner.

- Workplace environment: The workplace environment is positive and conducive to the wellbeing of all stakeholders.

Capacity Building – Networks and Partnerships

- Collaboration: The organisation is able to demonstrate collaboration and shares knowledge with internal and external stakeholders to improve outcomes for clients, communities and the sector.

- Research: The organisation documents and evaluates its work, identifying both what has been effective and areas for improvement, to increase the quality of its services and that of others in the field.

Evidence

For each standard, the quality programs provide a set of questions organisations need to address to provide evidence they have met the standard. These may include:

- How are the organisation's directions and goals developed, communicated and monitored?

- How does the organisation implement plans to achieve its goals and objectives?

- How does the leadership team create a supportive environment and implement effective management processes to assist staff and other stakeholders to achieve the goals of the organisation?

- How does the organisation work in partnership with and account to stakeholders?

- How are clients and other stakeholders' interests represented in the management processes, both formal and informal?

- How is quality improvement embedded at all levels of the organisation and how is creativity fostered?

Diversity of Quality Improvement Processes

There are a wide range of quality programs currently in operation which generally comply with international standards for Quality Management Systems. In NSW, community sector services most commonly use standards developed by the Australian Council on Healthcare Standards (ACHS) or the Quality Improvement Council (QIC Standards and Accreditation Program).

The core accreditation program for ACHS is the Evaluation and Quality Improvement Program (EQuIP), which guides organisations through 'a four year cycle of self-assessment, organisation-wide survey and periodic review to meet the standards'. (ACHS, Programs and Services)

QIC accreditation certifies that organisations have met the relevant standards and are participating in the QIC Program to continuously build quality improvement. Many organisations use the Health and Community Services Standards, or the Australian Service Excellence Standards (ASES). Others utilise Quality Innovation Performance (QIP) to navigate accreditation across a range of standards.

Some, generally larger organisations, use the Australian Quality Council – Australian Quality Awards for Business Excellence Framework. Larger organisations may use the generic AS/NZS ISO 9001:2008 Standards owned by the International Organization for Standardization (ISO) offering international Quality Management accreditation.

In addition, both Federal and NSW Government departments have their own quality improvement policies which may apply to their funded programs where compliance and/or accreditation are part of the funding agreement or a requirement of service provision.

Organisations with multiple funding bodies, each with their own quality standards reporting requirements may be able to access the assistance of commercial management assistance. Software has been developed that reduces the time and energy Australian NGOs face in reporting against multiple standards. Free trials of assistive software such as the Standards & Performance Pathways may be available.

Any organisation considering quality assurance against independent standards must seek initial information from comparable service providers, accrediting bodies and their funding agencies. Accrediting bodies are more formally known as conformity assessment bodies or CABs. The Joint Accreditation System of Australian and New Zealand (JAS-ANZ) is the government appointed accreditation body providing accreditation to the CABs.

Conclusion

While a range of quality improvement measures are in operation across the sector there is a high degree of consensus about the management and governance processes that need to be in place to achieve desired outcomes.

It is the responsibility of each organisation to ensure that quality improvement is a core component of the ethos and systems that guide the organisation.

References and Resources

Australian Council on Healthcare Standards (ACHS)
- Programs and Services

BNG NGO Online Services
- Standards and Performance Pathways

International Organization for Standardization (ISO),
- Quality Management ISO 9001: 2008

Network of Alcohol and Other Drug Agencies (NADA)
- NADA Policy Toolkit
- Quality Improvement Policy
- Quality Improvement Action Plan Template;
- Quality Improvement Resource Tool for Non Government Drug and Alcohol Organisations - Version 2 (2013)

NSW Family and Community Services (FACS)
- Quality Policy for ADHC funded services, 3rd edition October 2015
- Contract Governance Tools
- Contract Governance Guidelines
- Contracting Portal
- Quality Management Chap 10 in It's your business

NSW Health

- Non-Government Organisation Grant Program- Operational Guidelines (2011)

Quality Improvement Council (QIC)

- Health and Community Services Standards

Quality Innovation Performance (QIP)

- About Standards

NB: The above websites were accessible in 4 Nov 2015. If the links do not work search on the title of the document or go directly to the website of the organisation.