

Quality Management Policy and Procedure

1.0 Purpose

The purpose of this policy is to outline how the quality management system at SilaCa Tasmania Pty Ltd supports the delivery of safe, effective, and person-centred services. The system provides a structured approach to ensuring high standards of service delivery and organisational performance, while maintaining a strong focus on participant outcomes and satisfaction.

This policy ensures:

- People and resources are aligned with the organisation's mission and vision
- Quality, risk, and planning systems are integrated across all operational areas
- Ongoing collaboration with stakeholders to share best practice and support evaluation
- Clear responsibilities and accountabilities through governance and management structures
- A strong culture of continuous improvement across all services and functions

2.0 Scope

The policy applies to all staff involved in service delivery and organisational operations at SilaCa Tasmania Pty Ltd.

3.0 Policy

SilaCa Tasmania Pty Ltd is committed to maintaining a quality management system that supports service excellence, promotes continuous improvement, and ensures compliance with the NDIS Practice Standards and Quality Indicators. The system is designed to uphold participant safety, promote dignity and choice, and ensure that all services meet regulatory and best practice expectations.

The quality management system at SilaCa Tasmania Pty Ltd includes:

- Using data from complaints and feedback to improve services and procedures
- Operating a continuous improvement system informed by:
 - Complaints and Feedback Policy and Procedure
 - Risk Management Policy and Procedure
 - Reportable Incident, Accident and Emergency Policy and Procedure
 - Continuous Improvement Policy and Procedure
- Recording improvements in the Continuous Improvement Register and applying them to corporate governance
- Identifying and responding to risks through the Risk Management Policy and Procedure

- Reviewing all incidents, including those classified as reportable under the NDIS (Incident Management and Reportable Incidents) Rules, to inform service improvements and participant safeguarding
- Managing human resources, including staff training to deliver high-quality, individualised support
- Ensuring all staff maintain valid NDIS Worker Screening clearance, monitored as part of compliance and safeguarding
- Providing participants with access to quality services and opportunities to contribute feedback
- Implementing and maintaining an Internal Audit Schedule – Core Module, which includes:
 - Regular review of legislation relevant to service provision
 - Ongoing policy and procedure audits using the Internal Audit NDIS Policy Review Form
- Delivering services based on best practice, including evidence-based, person-centred support plans tailored to individual participant needs
- Reviewing policies and procedures alongside feedback mechanisms to support quality management across all services

The system supports the key NDIS Practice Standards modules, including Governance and Operational Management, Provision of Supports, Risk Management, and Rights and Responsibilities. It ensures participant safeguarding, dignity of risk, and participant choice are considered across all aspects of service delivery and organisational decision-making.

4.0 Quality plan

4.1 Monitoring the quality plan

Quality management processes are directly linked to our Incident Management, Complaints and Feedback, and Continuous Improvement systems. All incidents, complaints, and feedback are reviewed to identify improvements and safeguarding actions, with outcomes recorded in the Continuous Improvement Plan Register and reported to governance.

Quality reviews will be conducted promptly when participant needs, risks, or safeguarding concerns change, ensuring services remain safe and effective. Participants, families, and advocates will actively contribute to service improvements through feedback and co-design efforts.

Management will receive regular reports on quality outcomes, trends, and systemic issues, including safeguarding, complaints, and incidents. The Board will oversee quality improvements to ensure alignment with NDIS Practice Standards, participant rights, and compliance requirements.

- SilaCa Tasmania Pty Ltd will hold regular managerial meetings with relevant stakeholders (including managerial staff, participant representatives, staff representatives, accountants or bookkeepers, and community members)

Version: 1 **Date approved:** 31/07/2025

Approved by: J Croft - Director **Next review date:** 31/07/2026

- Monitoring strategies include a review of the following data:
 - Participant's risks
 - Environmental risks
 - Working with participants' risks (work health safety)
 - Feedback from participants, staff and community
 - Complaints from participants, staff and community
 - Incidents (both non-reportable and reportable)
 - Accident information
 - Compliance changes (including legal)
 - Human resources (requirements, vacancies, potential adjustments)
 - Financial (NDIS income, outgoings)
 - Technology issues
 - Continuous Improvement Register (new and ongoing)
 - Building maintenance and safety issues

- Managerial meetings will use an agenda that will include the following items:
 - Financial report
 - Manager's report
 - Ratification of executive decisions
 - Funding and compliance
 - Organisational risk management
 - Continuous Improvement
 - Complaints, compliments, concerns
 - Human Resources (issues, people, planning)
 - Work health and safety
 - Risk management
 - Information management
 - Incidents (if applicable)
 - General business

4.2 Review

1. Management meetings and input from various sources are used to determine any adjustment to the following:
 - strategic or business plans
 - policies and procedures
 - current practices
2. Review the Continuous Improvement Register to:
 - sign off actions
 - reallocates responsibilities if required

External Complaints and Reporting Options:

In addition to internal quality processes, participants, families, staff, and advocates can raise concerns or complaints externally if issues are not resolved or where serious safeguarding concerns arise.

External bodies include:

- **NDIS Quality and Safeguards Commission:** 1800 035 544, www.ndiscommission.gov.au
- **Commonwealth and State Ombudsman services**
- **State Work Health and Safety (WHS) Authorities** for workplace safety concerns. SilaCa Tasmania Pty Ltd supports participants and staff to access these pathways when necessary

4.3 Update

After monitoring and reviewing current information, the Manager or their delegate will:

- ensure that staff are trained in new practices
- record training in staff files
- adjust policies and procedures and implement versioning control
- inform participants of changes

5.0 Related documents

- Complaints and Feedback Policy and Procedure
- Complaint and Feedback Form
- Anonymous Complaint and Feedback Form
- Continuous Improvement Policy and Procedure
- Corporate Governance Policy and Procedure
- Continuous Improvement Plan Register
- Documentation, including meetings, agendas and memos
- Hazard Report Form
- Quality Audit Schedule
- Internal Audit - NDIS Policy Review Form
- Internal Audit Schedule - Core Module
- Governing Body Meeting Agenda and Minutes
- Position Descriptions
- Reportable Incident, Accident and Emergency Policy and Procedure
- Risk Assessment Form
- Risk Indemnity Form
- Risk Management Policy and Procedure
- Risk Management Plan Register
- Service Agreement
- Staff Training Record
- Staff Training Plan

- Business Plan and Strategic Plan

6.0 References

- NDIS (Quality and Safeguards) Commission 2018
- NDIS Practice Standards and Quality Indicators 2021
- NDIS Act 2013 (Commonwealth)
- Privacy Act 1988 (Commonwealth)
- Work Health and Safety Act 2011 (Commonwealth)
- Disability Services Act 1986 (Commonwealth)
- NDIS Code of Conduct (2018)
- NDIS (Incident Management and Reportable Incidents) Rules 2018
- NDIS Worker Screening Rules 2018