

Service Agreement Service Details

Service Agreement Number	Folio Number
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1. Term (Clause 2)

Commencement Date	DD Month Year
End Date	DD Month Year

2. Contact Details (Clause 21.10(1))

	Our Company Details	Your Company Details
Name of Legal Entity	Primary Care Gold Coast Limited (Trading as Gold Coast Primary Health Network)	xxxx
GST Registered. Yes or No	Yes	xxxx
ABN	47 152 953 092	xxxx
Entity Contact Person <i>Note: Entity contact only. The Service Manager or relevant contact person for the service is listed in the Service Schedule.</i>	Matthew Carrodus CEO	xxxx
Address	Level 1/14 Edgewater Court Robina 4226 PO Box 3576 Robina Town Centre QLD 4230	xxxx
Telephone	07 5635 2455	xxxx
Email	mattc@gcphn.com.au	xxxx

3. Funding under the Service Schedule (Clauses 1.1(9) & (29) and 3)

Each attached Service Schedule describes:

- (a) Funding that We will provide to You, including the basis on which that Funding will be paid; and
- (b) the Services that You must provide and that You must use that Funding towards, including:
 - (i) The Establishment Date (if any) for the Services;
 - (ii) deliverables and Service Delivery Requirements; and
 - (iii) any prior services in respect of the subject matter of this Agreement performed by the Contractor before the Commencement Date;
 - (iv) some specific requirements that You must comply with, such as Reporting Requirements.

4. Performance Criteria (Clause 6)

The Contractor must perform the Services so that they meet the performance criteria set out in the Service Schedule at 7.2 Data, Statements, Reports You are to Submit and meetings you are to attend.

5. Financial Reporting

You must complete and submit periodic Financial Acquittals and Financial Statements as specified in the table below.

	Reporting Period and Due Date	Details and Standard of Reporting	Lodgement
Financial Acquittals	<p><u>Reporting Period:</u> Quarterly</p> <p><u>Due Date:</u> Within Fourteen (14) days after the end of each quarter - due 14 October 14 January 14 April 14 July (of each year)</p>	<p>Quarterly financial data must be acquitted on the template at (Attachment 1 to the Service Agreement Service Details) for each project specified at Item 5 of the Service Schedule.</p> <p>If You are a local government authority or tertiary institution, You may submit a statement against the line-items specified at Item 5 of the Service Schedule and certified by the chief accounting officer or equivalent.</p> <p>If the Funding is provided for part of the reporting period (either at the Service Schedule Start Date or Service Schedule End Date) Financial Acquittals must still be submitted for the relevant part of that reporting period.</p>	<p>Financial Acquittals are to be submitted via email to commissioning@gcphn.com.au using the Excel Spreadsheet provided by GCPHN upon execution.</p>
<p>Audited Annual Financial Acquittal Report and Audited General Purpose Financial Statement</p> <p>Or</p> <p>Financial Declaration (<i>if there is no audit requirements</i>)</p>	<p><u>Reporting Period:</u> Annually</p> <p><u>Due Date:</u> In accordance with the lodgement period of Your incorporating legislation, or if not otherwise stated, by 30 September</p>	<p>Audited financial data must be acquitted on the template at (Attachment 1 to the Service Agreement Service Details) for each project specified at Item 5 of the Service Schedule.</p> <p>And</p> <p>You must provide a copy* of Your Audited General Purpose Financial Statement prepared in accordance with the Australian Accounting Standards comprising the following documents:</p> <ol style="list-style-type: none"> Statement of Profit and Loss and other comprehensive income Statement of financial position Statement of changes in equity Statement of Cashflows Notes to and forming part of the Financial Statement Directors' statement/declaration Independent Audit Report, and Asset Register in relation to Funded Assets (where applicable). <p><u>Or</u></p> <p>If your organisation is not required to prepare an Audited General Purpose Financial Statement (as above), you will be required to submit a Financial Declaration as per the template</p>	<p>Audited Annual Financial Acquittal Report and Audited General Purpose Financial Statement must be submitted via email to commissioning@gcphn.com.au</p> <p><u>Or</u></p> <p>Financial Declaration must be submitted via email to commissioning@gcphn.com.au</p>

		<p>provided at (Attachment 3 to the Service Agreement Details).</p> <p>* If You have more than one Service Agreement with Us, You are only required to submit one copy of the Audited General Purpose Financial Statement or Financial Declaration to Us.</p>	
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5.1 Certification of Reporting

You must ensure that the quarterly reports completed and submitted by your service team have been certified by the Authorised signatory or delegated signatory of your organisation as specified in the table below.

	Reporting Period and Due Date	Details and Standard of Reporting	Lodgement
Authorised/ Delegated Signatory Certification	<p><u>Reporting period:</u> Quarterly</p> <p><u>Due date:</u> Within Fourteen (14) days after the end of each quarter - due 14 October 14 January 14 April 14 July</p>	<p>You must complete the Authorised/Delegated Signatory section of your service’s Quarterly Performance Measurement and Reporting template provided by GCPHN.</p> <p><u>Or</u> where a template is not provided, submit an Authorised/Delegated Signatory Certification at (Attachment 4 to the Service Schedule), signed by two members of Your executive or management committee responsible for Your activities, certifying that the information contained in all reports submitted under this Service Agreement are an accurate reflection of the performance of the services.</p>	<p>If applicable, your Authorised/Delegated Signatory Certification must be submitted via email to commissioning@gcphn.com.au</p>

6. Invoicing Requirements (Clause 14, 15 and 16)

Frequency of Invoices	Upon satisfactory completion of each deliverable listed in the Service Schedule at 8. Timing of Payments or as otherwise reasonably directed by GCPHN.
Invoice Content	<p>Invoices must be addressed to GCPHN’s Entity Contact Person in Item 2 of the Service Agreement Service Details and emailed to commissioning@gcphn.com.au and must include the following information:</p> <ul style="list-style-type: none"> (a) The Name and Date of this Agreement (including Service Schedule number) (b) The correct Invoice amount (c) Details of the work that is the subject of the Invoice; including the period of time during which the work was carried out (corresponding deliverable) (d) Substantiation of out of pocket expenses, if applicable to this Contract, to the reasonable satisfaction of GCPHN (e) Payment method details (Direct Credit Account details); and (f) Contact person (including address, email address and telephone number) for accounts queries.

	If a supply to which the Invoice relates is a Taxable Supply, the Invoice must be in the form of a Tax Invoice.
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7. Insurance (Clause 13)

Minimum amount of Professional Indemnity Insurance <i>A copy of current Certificate of Currency to be provided upon Execution of Contract</i>	Not less than \$X million per claim.
Minimum amount of Public Liability Insurance <i>A copy of current Certificate of Currency to be provided upon Execution of Contract</i>	Not less than \$X million per claim.
Minimum amount of Workers' Compensation Insurance <i>A copy is not required but must have a copy on file at your place of business.</i>	As required by WorkCover Queensland (or relevant state body).

8. Performance of Services (Clause 3)

Service Delivery Quality Performance Framework and Reporting

Select only one option, delete other option

You are required to complete the Service Delivery Quality Performance Framework Report at Attachment 3, or provide your own Quality Performance Report (that meets the requirements of the report at Attachment 3), unless We otherwise notify You. You can apply for an exemption from completing the Service Delivery Quality Performance Framework Report if You can demonstrate that You have been accredited as meeting the criteria of the following standards, as accepted by GCPHN.

The standards accepted by GCPHN are as follows:

3 Core standards:

- Human Services Quality Standards
- National Standards for Mental Health Services
- Quality Improvement Council

2 Clinical Quality standards:

- Royal Australian College of General Practices Standards
- National Safety and Quality Health Standards

Or, if organisation is accredited, the GCPHN Contract developer will delete above and insert the following wording and provide the data to be inserted in yellow sections.

You are exempt from submitting the Service Delivery Quality Performance Framework Report Attachment 3 until **insert expiry date of quality certification** as you have provided evidence of **insert name of standard/quality system** certification to

this date. You will need to reapply for exemption from reporting against the Service Delivery Quality Performance Framework from insert day after expiry date of quality certification.

This wording to remain regardless of the wording chosen

Audits may be undertaken from time to time as determined by GCPHN, to ensure compliance with the Service Delivery Quality Performance Framework, Service Providers must grant GCPHN and/or its authorised personnel access to complete the necessary audit requirements. GCPHN will give 14 days’ notice of audits to Service Provider.

Reporting Requirements

	Reporting Period and Due Date	Details and Standard of Reporting	Lodgement
Service Delivery Quality Performance Framework – Report	<p><u>Reporting Period:</u> Establishment period <u>and</u> Six-Monthly</p> <p><u>Due Dates:</u> Establishment - within one (1) month after commencement <u>and</u> Six-monthly – within one (1) month after the end of each six-month period – due by 31 January and 31 July (of each year)</p>	<p>The Service Delivery Quality Performance Framework Report must be completed as per (Attachment 4 to the Service Agreement Service Details) except as specified in Item 8 above.</p> <p>If you have more than one Service Schedule under this Agreement, You are only required to submit one copy of the completed Service Delivery Quality Performance Framework Report to Us.</p>	<p>The Service Delivery Quality Performance Framework Report (or Yours as agreed by GCPHN) must be submitted via email to commissioning@gcphn.com.au</p>

9. Special Conditions

Changes to delivery model or your service partners

At any time during the course of this Service Agreement, if any changes occur with the service delivery model or your Service Partners described in this Service Agreement. You must advise Us accordingly.

Marketing, communication, media and promotion

You are required to follow the Guideline located here [Marketing, communication, media and promotion guideline](#) ; which sets out marketing, communication, media and promotional standards for GCPHN commissioned services that have received funding from Gold Coast Primary Health Network (GCPHN). This is to ensure increased community awareness and uptake of the promoted service leading to improved health outcomes, consistency of messaging and branding and increased awareness and recognition of GCPHN services.

TEMPLATES

Attachment 1: Financial Acquittal and Annual Financial Acquittal

Attachment 2: Financial Declaration

Attachment 3: Service Delivery Quality Performance Framework – Overview and Report

Attachment 1 — Financial Acquittal and Annual Financial Acquittal Template
 (Examples only – GCPHN to provide a template electronically upon contract execution)

INSTRUCTIONS: Please complete in the Excel spreadsheet format provided and submit via email to commissioning@gcphn.com.au

GOLD COAST PRIMARY HEALTH NETWORK
QUARTERLY FINANCIAL REPORTING TEMPLATE

REPORTING PERIOD: From: _____
 To: _____
 Contractor Name: _____
 Program/Service Name: _____

	FTE	ANNUAL BUDGET	ACTUALS				YTD ACTUAL	VARIANCE TO BUDGET	YTD ACTUALS AS % OF ANNUAL BUDGET
			Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	TOTAL		
FUNDING									
GCPHN							0	0	0.0%
Other (please specify)							0	0	0.0%
TOTAL FUNDING		0	0	0	0	0	0	0	0.0%
EXPENSES									
DIRECT OPERATING EXPENSES									
Employment Expenses									
Salaries & superannuation							0	0	0.0%
Professional Development							0	0	0.0%
Recruitment							0	0	0.0%
Other							0	0	0.0%
Total Employment Expenses		0	0	0	0	0	0	0	0.0%
Travel Expenses									
Car expenses							0	0	0.0%
Other travel							0	0	0.0%
Total Travel Expenses		0	0	0	0	0	0	0	0.0%
Other Direct Expenses									
Please list -							0	0	0.0%
							0	0	0.0%
							0	0	0.0%
Total Other Direct Expenses		0	0	0	0	0	0	0	0.0%
TOTAL DIRECT EXPENSES		0	0	0	0	0	0	0	0.0%
OTHER OPERATING EXPENSES									
Indirect Program Expenses									
Marketing, communications, printing							0	0	0.0%
Training							0	0	0.0%
IT Support/Hardware							0	0	0.0%
Other							0	0	0.0%
							0	0	0.0%
Total Indirect Program Expenses		0	0	0	0	0	0	0	0.0%
Administration & Overhead Expenses									
Admin/office expense allocation							0	0	0.0%
Other (please list) -							0	0	0.0%
							0	0	0.0%
Total Admin & Overhead Expenses		0	0	0	0	0	0	0	0.0%
TOTAL OTHER EXPENSES		0	0	0	0	0	0	0	0.0%
ESTABLISHMENT EXPENSES (if applicable)									
Staffing Expenses									
Salaries & on-costs							0	0	0.0%
Recruitment							0	0	0.0%
Other							0	0	0.0%
Total Staffing Expenses		0	0	0	0	0	0	0	0.0%
Other expenses									
Computer purchases							0	0	0.0%
Office equipment purchases							0	0	0.0%
Other (please list) -							0	0	0.0%
							0	0	0.0%
Total Other Expenses		0	0	0	0	0	0	0	0.0%
TOTAL ESTABLISHMENT EXPENSES		0	0	0	0	0	0	0	0.0%
GRAND TOTAL ALL EXPENSES		0	0	0	0	0	0	0	0.0%
SURPLUS/(DEFICIT)		0					0	0	

GOLD COAST PRIMARY HEALTH NETWORK
SIX MONTHLY FINANCIAL REPORTING TEMPLATE

REPORTING PERIOD: From: _____
 To: _____

Contractor Name:
 Program/Service Name:

	FTE	ANNUAL BUDGET	ACTUALS		YTD ACTUAL	VARIANCE TO BUDGET	YTD ACTUALS AS % OF ANNUAL BUDGET
			Jul-Dec	Jan-Jun	TOTAL		
FUNDING							
GCPHN					0	0	0.0%
Other (please specify)					0	0	0.0%
TOTAL FUNDING		0	0	0	0	0	0.0%
EXPENSES							
DIRECT OPERATING EXPENSES							
Employment Expenses							
Salaries & superannuation					0	0	0.0%
Professional Development					0	0	0.0%
Recruitment					0	0	0.0%
Other					0	0	0.0%
Total Employment Expenses		0	0	0	0	0	0.0%
Travel Expenses							
Car expenses					0	0	0.0%
Other travel					0	0	0.0%
Total Travel Expenses		0	0	0	0	0	0.0%
Other Direct Expenses							
Please list -					0	0	0.0%
					0	0	0.0%
					0	0	0.0%
Total Other Direct Expenses		0	0	0	0	0	0.0%
TOTAL DIRECT EXPENSES		0	0	0	0	0	0.0%
OTHER OPERATING EXPENSES							
Indirect Program Expenses							
Marketing, communications, printing					0	0	0.0%
Training					0	0	0.0%
IT Support/Hardware					0	0	0.0%
Other					0	0	0.0%
Total Indirect Program Expenses		0	0	0	0	0	0.0%
Administration & Overhead Expenses							
Admin/office expense allocation					0	0	0.0%
Other (please list) -					0	0	0.0%
					0	0	0.0%
Total Admin & Overhead Expenses		0	0	0	0	0	0.0%
TOTAL OTHER EXPENSES		0	0	0	0	0	0.0%
ESTABLISHMENT EXPENSES (if applicable)							
Staffing Expenses							
Salaries & on-costs					0	0	0.0%
Recruitment					0	0	0.0%
Other					0	0	0.0%
Total Staffing Expenses		0	0	0	0	0	0.0%
Other expenses							
Computer purchases					0	0	0.0%
Office equipment purchases					0	0	0.0%
Other (please list) -					0	0	0.0%
					0	0	0.0%
Total Other Expenses		0	0	0	0	0	0.0%
TOTAL ESTABLISHMENT EXPENSES		0	0	0	0	0	0.0%
GRAND TOTAL ALL EXPENSES	0	0	0	0	0	0	0.0%
SURPLUS/(DEFICIT)		0			0	0	

Attachment 2: Financial Declaration Template

(Example only – GCPHN to provide a template electronically upon contract execution)

INSTRUCTIONS: To be submitted if your organisation is not required to prepare an Audited General Purpose Financial Statement. Please copy the format below, add to your letterhead to the template, complete and submit via email to commissioning@gcphn.com.au

FINANCIAL DECLARATION

Activity Name: _____

Service Agreement Number: _____

Entity Name: _____

Funding amount (excl GST): \$_____ (As per the Funding Agreement and any Variations)

Are there any unspent funds? Yes No

If yes, please state amount: \$ _____

I verify:

That I am authorised by the rules governing the above entity to provide this statement in respect of those funds and that:

- the funding referred to above was spent in accordance with the Terms and Conditions under which the funding was provided;
- the activities for which funding was provided were completed as described in the schedule(s) to the funding agreement; and
- all records of financial transactions relating to the funding will be kept for 5 years or the minimum prescribed by any legislation under which the organisation falls e.g. Incorporated Associations Act, Tax Act etc.

Signed: _____ Date: _____

Name: _____

Position: _____

Giving false or misleading information is a serious offence.

Attachment 3: Service Delivery Quality Performance Framework – Overview and Report Template

(Example only – if applicable, GCPHN to provide a Word version electronically upon contract execution)

INSTRUCTIONS: To be completed and submitted via email to commissioning@gcphn.com.au

or

Attachment 3: Service Delivery Quality Performance Framework – Overview and Report Template

(To be viewed online - GCPHN to provide a Word version electronically upon execution)

INSTRUCTIONS: Below is an overview of the Service Delivery Quality Performance Framework. As the full document is 30 pages long, we have provided you with a link to copy and paste into your internet browser, where you can view the full content prior to executing your contract. Here is the link to be pasted into your internet browser: www.GCPHN.org.au;

Overview Service Delivery Quality Performance Framework

Perspective 1: Funded Service Delivery	
Objectives	Indicators
Service Types 1.1 The organisation delivers the services as agreed with GCPHN	1.1a The organisation describes its funded Service Types
Service Statistics 1.2 Services and service user data will provide GCPHN with information to monitor an organisation’s performance	1.2a The organisation collects and reports direct service delivery statistics to GCPHN as per the Service Agreement Schedules

Perspective 2: Service User and Community	
Objectives	Indicators
Service User Focus 2.1 The organisation’s service users are satisfied with funded services delivered.	2.1a The organisation has a process for monitoring service user satisfaction and improves its service according to the feedback collected. 2.1b The organisation has documented, advertised and accessible complaint mechanism.
2.2 The organisation ensures its service users are aware of their rights and responsibilities and upholds those rights.	2.2a The organisation ensures workers inform service users of their rights and responsibilities, and assists them to exercise those rights and meet their responsibilities. 2.2b The organisation has systems in place to ensure the confidentiality, privacy and consent of service users.
Accessible Services 2.3 Services are provided with consideration for the target group’s social and cultural needs and expectations.	2.3a The organisation develops strategies to ensure that its services are culturally appropriate and non-discriminatory to the target group.
2.4 The organisation addresses physical and knowledge barriers that may prevent the target group from using its services.	2.4a The organisation addresses barriers to access its services by service users, including hours of operation, publicising service availability, and service delivery location and environment.
Engagement and Participation	2.5a The organisation has a process in place to allow its service users and representatives of the community to participate in service planning, delivery and evaluation.

<p>2.5 The organisation encourages participation by members of its target group and the broader community.</p>	
<p>Appropriate Services 2.6 The organisation plans its services in accordance with the needs of its target group.</p>	<p>2.6a The organisation develops and implements specialist activities, that are appropriate to its target group’s needs.</p>
<p>Collaboration 2.7 The organisation collaborates and coordinates with the service system to deliver the most effective service delivery for its target group.</p>	<p>2.7a The organisation identifies priorities and documents how it will collaborate and coordinate with other agencies to improve the health and wellbeing of the target group. 2.7b The organisation actively collaborates with other agencies to improve its service delivery.</p>

Perspective 3: Continuous Quality Improvement	
Objectives	Indicators
<p>Innovation and Learning 3.1 The organisation is committed to ongoing development of its service activities and workers.</p>	<p>3.1a The organisation provides workers with opportunities for education and professional development. 3.1b The organisation supports learning about best practice approaches to service delivery, management and operations.</p>
<p>Workplace Health and Safety 3.2 The health and safety of all persons within the organisation is protected.</p>	<p>3.2a The organisation has a strategy to ensure safe management of work practices and physical and psychological aspects of the environment.</p>
<p>Risk Management 3.3 The organisation monitors organisational risks and controls these where possible.</p>	<p>3.3a The organisation develops, documents and implements a risk management process.</p>
<p>Evaluation 3.4 The organisation regularly evaluates its activities.</p>	<p>3.4a The organisation has developed valid systems or processes for evaluating and improving its service activities and outcomes. 3.4b The organisation participates in research, by other parties, that relates to health services for the target group.</p>

Perspective 4: Management and Resourcing	
Objectives	Indicators
<p>Leadership and Governance 4.1 The Board or management committee provides leadership and takes responsibility for ensuring that the organisation’s achievements and services contribute to improving the health and wellbeing of the target group.</p>	<p>4.1a The Board or management committee meets its obligations under its incorporation legislation, including matters relating to corporate governance, financial administration and insurance. 4.1b The Board or management committee leads the identification of the organisation’s service priorities and development of the strategic or business plan.</p>
<p>Operational Management 4.2 The organisation’s management is accountable for how services are delivered.</p>	<p>4.2a The organisation has an operational plan that clearly identifies its goals and strategies, and assigns workers responsibilities and accountabilities. 4.2b Management involves the organisation’s stakeholders in decision making.</p>
<p>Efficient Use of Resources 4.3 Services are delivered to the target group with an efficient use of resources.</p>	<p>4.3a The organisation’s human resource policies and practices comply with requirements of the Service Agreement and relevant legislation. 4.3b The Board or management committee is accountable for the efficiency of service delivery.</p>
<p>Sustainability</p>	<p>4.4a The Board or management committee addresses issues of sustainability and quality improvement in the organisation’s strategic plan.</p>

Perspective 4: Management and Resourcing	
Objectives	Indicators
<p>4.4 The Board or management committee has identified ways to maintain or enhance the sustainability of the organisation.</p>	<p>4.4b Financial analyses of organisation or activity proposals are developed to assist the Board or management committee with decisions that may significantly affect service delivery and resources.</p>
<p>Transparency and Accountability 4.5 The organisation is accountable to key stakeholders.</p>	<p>4.5a The organisation ensures that workers comply with the applicable codes of ethics, standards of practice and registration requirements. 4.5b The Board or management committee is accountable to its members, service users and key stakeholders. 4.5c The organisation has a documented set of principles that guide the delivery of services to the target group.</p>

Service Delivery Quality Performance Framework Report: Template

Service Delivery Quality Performance Framework Report for the Period:

[insert month] 20__ to [insert month] 20__

Organisation:	
Service Provider:	
Project Title/s:	
Contract Period:	
Service Schedule number:	
Authorised/Delegated Signatory Name and Title:	<i>I, _____, verify that the information provided in this template is a true record at date of submission.</i>

Perspective 1: Funded Service Delivery

Indicators relating to Perspective 1 are addressed in the Service Schedule for each program.

Perspective 2: Service User and Community

FOCUS AREA:	Service User Focus	Indicator Questions for:
		➤ Objective 2.1 : Indicator 2.1a : Indicator 2.1b
Objective 2.1	The organisation's service users are satisfied with funded services delivered.	
Indicator 2.1a	The organisation has a process for monitoring service user satisfaction and improves its service according to the feedback collected.	
1. Does the organisation follow a documented procedure for encouraging service users to provide feedback?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
2. How often does the organisation conduct a service user satisfaction survey or feedback collection process?		
<input type="checkbox"/>	At every service delivery occasion	
<input type="checkbox"/>	At least annually	
<input type="checkbox"/>	At least once every three years	
<input type="checkbox"/>	Rarely/never	
3. Is feedback from service users and community collated, analysed and used to inform service planning and improvement?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
Indicator 2.1b	The organisation has a documented, advertised and accessible complaint mechanism.	
4. Does the organisation follow a documented complaints management procedure that complies with relevant legislation or other contract requirements:		
<input type="checkbox"/>	Encourages and supports service users to raise concerns and protects them against retribution	
<input type="checkbox"/>	Is consistent with policy and procedures on privacy	
<input type="checkbox"/>	Promotes safety and the prevention of harm; is culturally safe and appropriate	
<input type="checkbox"/>	Allows for the participation of a support person or advocate	
<input type="checkbox"/>	Distinguishes between complaints and dispute resolution	
<input type="checkbox"/>	Distinguishes between complaints of a serious or urgent nature and less serious complaints	
<input type="checkbox"/>	Requires a record to be kept of complaints	
<input type="checkbox"/>	Requires receipt of a complaint be acknowledged	

FOCUS AREA: Service User Focus		Indicator Questions for: ➤ Objective 2.1 : Indicator 2.1a : Indicator 2.1b
<input type="checkbox"/>	Provides for prompt responses and timely action	
<input type="checkbox"/>	Provides for appropriate investigation	
<input type="checkbox"/>	Ensures that progress towards resolution is reviewed within an agreed timeframe	
<input type="checkbox"/>	Is fair and impartial	
<input type="checkbox"/>	Ensures outcomes are reported to the complainant and resultant actions implemented	
<input type="checkbox"/>	Provides for review or appeal, including advice of other avenues such as the funding body or other complaints agencies	
5. Does the organisation make information about its complaints procedure available to all service users, in appropriate formats, and place it on display in a public area of its service?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
6. Does the organisation ensure all service users are aware of its complaints procedure and make the following information available in appropriate formats:		
<input type="checkbox"/>	Rights and responsibilities of the service user and service provider in relation to complaints	
<input type="checkbox"/>	How a dispute or complaint should be lodged	
<input type="checkbox"/>	Who is responsible for receiving and managing complaints	
<input type="checkbox"/>	Steps and time frames in the process of investigating and resolving a complaint	
<input type="checkbox"/>	Access to advocacy or independent support	
<input type="checkbox"/>	Processes for review or appeal	
<input type="checkbox"/>	How the person will be informed of progress and outcomes	
<input type="checkbox"/>	External or alternative avenues for complaint	
<input type="checkbox"/>	What records are kept and reports made	
7. Does the organisation keep records of complaints and service user feedback and use the information to make service improvements?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
8. Does the organisation ensure the nature and outcomes of service user complaints are reported to senior management and the Management Committee or Board?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	

FOCUS AREA: Service User Focus		Evidence Questions for: ➤ Objective 2.1
<input type="checkbox"/> [insert date of last review]	Documented service user feedback policy and procedures	
<input type="checkbox"/>	Report from previous service user survey or feedback collection	
<input type="checkbox"/> [insert date of last review]	Documented complaints policy and procedures	
<input type="checkbox"/>	Service user information handout or wall poster	
<input type="checkbox"/> [indicate frequency]	Reports to senior management and/or Management Committee/Board	
Please list any other evidence you regard as significant:		

FOCUS AREA: Service User Focus		Performance Report for: ➤ Objective 2.1
Provide a brief summary of the results of your organisation's feedback from service users:		

Has your organisation received any complaints from service users in the reporting period?	
<input type="checkbox"/>	No
<input type="checkbox"/>	Yes [if 'yes', indicate the number of complaints received and the number successfully resolved]
[insert number]	Complaints received
[insert number]	Complaints successfully resolved

FOCUS AREA:	Service User Focus	Indicator Questions for:
		➤ Objective 2.2 : Indicator 2.2a : Indicator 2.2b
Objective 2.2	The organisation ensures its service users are aware of their rights and responsibilities and upholds those rights.	
Does the organisation provide services to individual service users?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No (If 'No' please skip this section and go to Objective 2.3)	
Indicator 2.2a	The organisation ensures workers inform service users of their rights and responsibilities and assist them to exercise those rights and meet their responsibilities.	
1. Does the organisation follow documented policies and procedures that provide service users with protection of their legal and human rights and of their right to privacy, dignity and confidentiality?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
2. Does the organisation provide staff with a clear ethical framework for their behaviour and interactions with service users?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
3. Does the organisation have a documented statement of service user's rights and responsibilities that addresses:		
<input type="checkbox"/>	Privacy and confidentiality	
<input type="checkbox"/>	Scope and limitation of services to be provided	
<input type="checkbox"/>	Conditions of service provision (including any fees or charges)	
<input type="checkbox"/>	Service user feedback, complaints or disputes	
<input type="checkbox"/>	Staff behaviour towards service users	
<input type="checkbox"/>	Service user decision making and right to self determination	
<input type="checkbox"/>	Access to support or advocacy	
<input type="checkbox"/>	Responsibilities of service users	
4. Are all service users, staff and other relevant people made aware of the rights and responsibilities of service users?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
5. Are service users provided with the following information on commencement of service:		
<input type="checkbox"/>	Service orientation or overview	
<input type="checkbox"/>	Standard of service to be expected	
<input type="checkbox"/>	Relevant policies and procedures	
<input type="checkbox"/>	Service user rights and responsibilities	
<input type="checkbox"/>	Procedures for reporting incidents, making a complaint or providing feedback	
<input type="checkbox"/>	Any risks associated with receiving service	
<input type="checkbox"/>	Contact information	

FOCUS AREA: Service User Focus		Indicator Questions for: ➤ Objective 2.2 : Indicator 2.2a : Indicator 2.2b
Indicator 2.2b The organisation has systems in place to ensure the confidentiality, privacy and consent of service users.		
6. Does the organisation have written guidelines on who may access particular groups of records and a way of preventing unauthorised access?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
7. When collecting personal information, is the consent of the person or of a delegated support person always obtained?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
8. Does the organisation have documentation that complies with privacy obligations:		
<input type="checkbox"/>	Aims to protect individual privacy	
<input type="checkbox"/>	Ensures that only personal information that is needed is collected	
<input type="checkbox"/>	Ensures personal information is collected in a manner that protects privacy	
<input type="checkbox"/>	Ensures that individuals are aware of what information is kept about them and the reasons for this	
<input type="checkbox"/>	Ensures personal records are accurate and up to date	
<input type="checkbox"/>	Provides access for individuals to their own records	
<input type="checkbox"/>	Enables individuals to have their own records amended to correct information	
<input type="checkbox"/>	Ensures consent is given to any release of personal information	
<input type="checkbox"/>	Ensures that any information released for evaluation or research purposes is de-identified	
<input type="checkbox"/>	Is made publicly available	
9. If the organisation is required to conform to Privacy legislation, does it?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
<input type="checkbox"/>	Does not need to conform	
10. Does the organisation have a procedure for disposing of obsolete personal records or for transferring records of service users that protects the privacy of individuals?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
11. Does the organisation have a procedure for handling requests for access to personal information and for handling appeals against decisions to refuse access?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	

FOCUS AREA: Service User Focus		Evidence Questions for: ➤ Objective 2.2
<input type="checkbox"/> [insert date of last review]	Documented service user rights and responsibilities policy and procedures	
<input type="checkbox"/> [insert date of last review]	Written statement of service user rights and responsibilities	
<input type="checkbox"/> [insert date of last review]	Documented privacy, confidentiality and consent policy and procedures	
Please list any other evidence you regard as significant:		

FOCUS AREA: Service User Focus		Performance Report for: ➤ Objective 2.2
Has any training or induction been provided to staff in the reporting period on service user rights and responsibilities:		

<input type="checkbox"/>	No
<input type="checkbox"/>	Yes [if 'yes', indicate the number of session and number of staff involved in each session]
Have any complaints been received about breaches of service user rights in the reporting period:	
<input type="checkbox"/>	No
<input type="checkbox"/>	Yes [if 'yes', indicate the number of complaints received and the number successfully resolved]
Provide a brief summary of what strategies are used by the organisation to ensure that service users understand their rights and responsibilities:	

FOCUS AREA: Accessible Services		Indicator Questions for: ➤ Objective 2.3: Indicator 2.3a
Objective 2.3	Services are provided with consideration for the target group's social and cultural needs and expectations.	
Indicator 2.3a	The organisation develops strategies to ensure that its services are culturally appropriate and non-discriminatory to the target group.	
1. Does the organisation have ways of ensuring that the diverse social and cultural needs of people within the target group are taken into consideration in making services, activities or materials accessible?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
2. Does the organisation have a documented policy and procedure for the application of legislation regarding anti-discrimination?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
3. Does the organisation ensure that services, activities or materials are culturally appropriate and inclusive of all people within the target group?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
4. Does the organisation identify and respond to the particular cultural or support needs of the following groups within its target population?		
<input type="checkbox"/>	Aboriginal and Torres Strait Islander people	
<input type="checkbox"/>	People from non-English speaking backgrounds	
<input type="checkbox"/>	Culturally and linguistically diverse communities	
<input type="checkbox"/>	People with disability	
<input type="checkbox"/>	People who are physically isolated or transport disadvantaged	
<input type="checkbox"/>	Lesbian, gay, bisexual or transgender	
<input type="checkbox"/>	Other [specify group]:	
5. Does the organisation consult with and/or maintain links with Aboriginal and Torres Strait Islander and other community groups to inform its service delivery?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
6. Are staff provided with professional development related to cultural awareness and the diversity of the service user group?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
7. Does the organisation review the profile of its user group or program focus to ensure diversity is maintained?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	

8. Does the organisation evaluate the effectiveness of its cultural diversity and responsiveness strategies and update relevant policies?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

FOCUS AREA: Accessible Services		Evidence Questions for: ➤ Objective 2.3
<input type="checkbox"/>	Documented cultural diversity and access policy and procedures	
<input type="checkbox"/>	Specific access strategies and information provision for [specify groups]:	
<input type="checkbox"/>	Staff training or cultural awareness sessions held in reporting period	
Please list any other evidence you regard as significant:		

FOCUS AREA: Accessible Services		Performance Report for: ➤ Objective 2.3
What percentage of service users who seek your service or participate in activities you provide are in the following groups:		
[insert %]	Aboriginal and Torres Strait Islander people	
[insert %]	People from non-English speaking backgrounds	
[insert %]	Culturally and linguistically diverse communities	
[insert %]	People with disability	
[insert %]	People who are physically isolated or transport disadvantaged	
[insert %]	Other [specify group]:	
[insert %]		
List any action taken in the reporting period to improve access for particular groups:		
<input type="checkbox"/> [insert number]	Cultural awareness sessions and/or relevant staff training sessions about service user access held in reporting period	

FOCUS AREA: Accessible Services		Indicator Questions for: ➤ Objective 2.4: Indicator 2.4a
Objective 2.4	The organisation addresses physical and knowledge barriers that may prevent the target group from using its services.	
Indicator 2.4a	The organisation addresses barriers to access its services by service users, including hours of operation, publicising service availability, and service delivery location and environment.	
1. Does the organisation have ways of identifying and addressing physical, knowledge and other barriers that may prevent the target group from accessing the service, participating in activities or accessing materials?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
2. Does the organisation provide information to potential service users or participants that:		
Y	N/A	Select 'Not Applicable' (N/A) if the organisation does not provide service to individual service users
<input type="checkbox"/>	<input type="checkbox"/>	Is in appropriate languages and formats so that it is accessible to the intended audience
<input type="checkbox"/>	<input type="checkbox"/>	Explains who the service is for, entry and eligibility criteria and procedures
<input type="checkbox"/>	<input type="checkbox"/>	Explains how service will be allocated and applicants prioritised
<input type="checkbox"/>	<input type="checkbox"/>	Explains any conditions or fees that apply to the service
<input type="checkbox"/>	<input type="checkbox"/>	Explains what support or assistance will be provided to applicants in accessing the service

<input type="checkbox"/>	<input type="checkbox"/>	Explains what support or assistance will be provided to applicants in locating alternative or additional services
<input type="checkbox"/>	<input type="checkbox"/>	Explains how, and under what conditions, the service is concluded or terminated, or a service user exits the service
3. Does the organisation consider the following when ensuring that services are accessible to the target group it aims to assist?		
Y	N/A	Select 'Not Applicable' (N/A) if the organisation does not provide service to individual service users
<input type="checkbox"/>	<input type="checkbox"/>	Location of the services or activities
<input type="checkbox"/>	<input type="checkbox"/>	Physical access to the premises where services or activities are located
<input type="checkbox"/>	<input type="checkbox"/>	Opening hours of the service
<input type="checkbox"/>	<input type="checkbox"/>	Look and feel of the service user areas
<input type="checkbox"/>	<input type="checkbox"/>	Information strategies to promote the service
<input type="checkbox"/>	<input type="checkbox"/>	Languages spoken or translation services provided
<input type="checkbox"/>	<input type="checkbox"/>	Flexibility in the way services are provided

FOCUS AREA: Accessible Services		Evidence Questions for: ➤ Objective 2.4
<input type="checkbox"/>		Documented Access policy and procedure
<input type="checkbox"/>	[insert date of review]	Review of disability access to premises
<input type="checkbox"/>	[insert date of review]	Information for potential service users
Please list any other evidence you regard as significant:		

FOCUS AREA: Accessible Services		Performance Report for: ➤ Objective 2.4
List any action taken in the reporting period to improve physical access:		
List any action taken in the reporting period to publicise the services available:		

FOCUS AREA: Engagement and Participation		Indicator Questions for: ➤ Objective 2.5 : Indicator 2.5a
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Objective 2.5	The organisation encourages participation by members of its target group and the broader community.
Indicator 2.5a	The organisation has a process in place to allow its service users and representatives of the community to participate in service planning, delivery and evaluation
1. Which of the following processes are used by the organisation to enable service users and community representatives to participate in service planning, delivery and evaluation?	
<input type="checkbox"/>	Sub committees or working groups
<input type="checkbox"/>	Consultation forums
<input type="checkbox"/>	Surveys or other structured feedback processes
<input type="checkbox"/>	Other [specify]:

FOCUS AREA:	Engagement and Participation	Evidence Questions for: ➤ Objective 2.5
<input type="checkbox"/>	Documented participation policy and procedures	
<input type="checkbox"/>	Reports from surveys, consultations or other forums	
Please list any other evidence you regard as significant:		

FOCUS AREA:	Engagement and Participation	Performance Report for: ➤ Objective 2.5
Briefly describe any actions taken to encourage participation by service users or community representatives in the reporting period:		
[insert number]	Service users participating in service planning or evaluation in reporting period	
[insert number]	Consultation forums, working group meetings or planning sessions involving service users or community representatives in reporting period	

FOCUS AREA:	Appropriate Services	Indicator Questions for: ➤ Objective 2.6: Indicator 2.6a
Objective 2.6	The organisation plans its services in accordance with the needs of its target group.	
Indicator 2.6a	The organisation develops and implements specialist activities, appropriate to its target group's needs.	
1. Does the organisation have a documented process for planning services and activities?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
2. Which of the following does the organisation use to inform the planning of its services and activities?		
<input type="checkbox"/>	Researched needs and preferences of the service user or target group	
<input type="checkbox"/>	Feedback or input from existing service users or target group representatives	
<input type="checkbox"/>	Feedback or input from staff, volunteers or other stakeholders	
<input type="checkbox"/>	Evidence of what types of services, activities or strategies are effective in achieving service outcomes	

<input type="checkbox"/>	Results from monitoring or evaluation of the organisation's services and activities
3. In planning services and activities, does the organisation identify different groupings within its target group and the particular factors that impact on them?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
4. In planning services and activities, does the organisation identify future trends in the needs of its service user or target groups?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

FOCUS AREA: Appropriate Services		Evidence Questions for:
		➤ Objective 2.6
<input type="checkbox"/> [date conducted]	Documented needs analysis	
<input type="checkbox"/>	Services and activities plan reflecting needs analysis	
Please list any other evidence you regard as significant:		

FOCUS AREA: Appropriate Services		Performance Report for:
		➤ Objective 2.6
List the main needs identified for the organisation's target group:	List service or activity provided by the organisation to meet this need:	
List any findings from service user feedback or evaluations that demonstrate that services provided were appropriate to identified needs:		

FOCUS AREA: Collaboration		Indicator Questions for:
		➤ Objective 2.7 :Indicator 2.7a : Indicator 2.7b
Objective 2.7 The organisation collaborates and coordinates within the service system to deliver the most effective service delivery to its target group.		
Indicator 2.7a The organisation identifies priorities and documents how it will collaborate and coordinate with other agencies to improve the health and wellbeing of the target group.		
1. Does the organisation have documented processes for collaborating and coordinating with other agencies?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
2. Does the organisation identify and participate in interagency networks and activities?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No relevant agencies exist	
<input type="checkbox"/>	No	
Indicator 2.7b The organisation actively collaborates with other agencies to improve its service delivery.		
3. Does the organisation work with other agencies to improve the service system and outcomes for service users?		

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
4. Does the organisation maintain up to date information on other services and agencies that it can refer service users to?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
5. Are service delivery roles and responsibilities across agencies negotiated and documented?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
6. Are documented referral protocols negotiated with other agencies where relevant?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
7. Does the organisation review its collaboration with other agencies on a regular basis?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

FOCUS AREA: Collaboration		Evidence Questions for: ➤ Objective 2.7
<input type="checkbox"/> [insert date of last review]	Documented plan or procedure for collaboration with other agencies	
<input type="checkbox"/> [insert date of last review]	Report on collaboration with other agencies	
Please list any other evidence you regard as significant:		
FOCUS AREA: Collaboration		Performance Report for: ➤ Objective 2.7
Describe any action taken in the reporting period to improve service delivery in collaboration with other agencies:		
[insert number]	How many interagency meetings or forums has the organisation attended in the reporting period	
[insert number]	How many agencies does the organisation have formal referral or partnership arrangements with	

FOCUS AREA: Innovation and Learning		Indicator Questions for: ➤ Objective 3.1 :Indicator 3.1a : Indicator 3.1b
Objective 3.1 The organisation is committed to ongoing development of its service activities and workers.		
Indicator 3.1a The organisation provides workers with opportunities for education and professional development.		
1. Does the organisation have a documented process for assessing staff performance and providing feedback to staff on their performance?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
2. Does the organisation have a process for assessing the competencies of staff, identifying skills gaps and ensuring these are addressed through training or development?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
3. Can the organisation demonstrate that it provides access for staff to relevant training and professional development opportunities?		
<input type="checkbox"/>	Yes	

<input type="checkbox"/>	No
Indicator 3.1b The organisation supports learning about best practice approaches to service delivery, management and operations	
4. Does the organisation have systems for keeping up to date and informed on current issues, research and developments for its particular fields of interest?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
5. Does the organisation have a documented continuous quality improvement process?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
6. Does the organisation make use of current research and industry benchmarks to inform the development of its services and review its performance?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

FOCUS AREA: Innovation and Learning		Evidence Questions for: ➤ Objective 3.1
<input type="checkbox"/>	Staff development needs analysis and staff development plan/s	
<input type="checkbox"/>	Quality improvement plan	
Please list any other evidence you regard as significant:		

FOCUS AREA: Innovation and Learning		Performance Report for: ➤ Objective 3.1
List training and development opportunities attended by staff in the reporting period (include conferences and 'in-house' development):		
[insert number of staff]	[Focus of development or training activity]	[Length of session or course]
List relevant journals, newsletters, practice updates and information networks from which the organisation receives regular or periodic information:		
Briefly outline any results from evaluation or review of practice and changes made:		

FOCUS AREA: Workplace Health and Safety		Indicator Questions for: ➤ Objective 3.2 : Indicator 3.2a
Objective 3.2 The health and safety of all persons within the organisation is protected.		
Indicator 3.2a The organisation has a strategy to ensure safe management of work practices and physical and psychological aspects of the environment.		
1. Does the organisation have policies and procedures that ensure a safe workplace in accordance with relevant legislation?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
2. Does the organisation comply with legal obligations regarding fire safety and building safety requirements?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
3. Does the organisation ensure the following:		
<input type="checkbox"/>	Inspection and review of premises and equipment to identify hazards at least annually	
<input type="checkbox"/>	Maintenance of First Aid Kits in accessible places	
<input type="checkbox"/>	Information on emergency procedures displayed in prominent places	
<input type="checkbox"/>	Maintenance of fire extinguishers or other firefighting equipment	
<input type="checkbox"/>	Adequate lighting, ventilation and temperature controls throughout its premises	
4. Does the organisation have an evacuation procedure in the event of an emergency?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
5. Does the organisation have a documented procedure for the reporting of incidents, accidents and injuries that ensures that they are:		
<input type="checkbox"/>	Identified, recorded and reported	
<input type="checkbox"/>	Investigated as to cause and action taken to prevent re-occurrence	
<input type="checkbox"/>	Analysed for trends over time	
<input type="checkbox"/>	Reported to Workplace Health and Safety Queensland in the case of death, serious injury or illness	
<input type="checkbox"/>	Reported to the Department of Health in the case of major incident and/or intervening event	
6. Does the organisation have procedures for ensuring infection control?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
7. Does the organisation provide orientation and training to staff and volunteers on emergency procedures, workplace safety and any specific risks associated with their work areas?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
8. Are emergency evacuation drills conducted at least annually?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
9. Does the organisation have processes for identifying and responding to workplace stress, including critical incidents and psychological fatigue?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	

FOCUS AREA: Workplace Health and Safety		Evidence Questions for: ➤ Objective 3.2
<input type="checkbox"/>	[insert date of last review]	Workplace health and safety policy and procedures
<input type="checkbox"/>		Register of incidents, accidents and injuries
Please list any other evidence you regard as significant:		

FOCUS AREA: Workplace Health and Safety		Performance Report for: ➤ Objective 3.2
Have any staff members, service users or visitors reported any incidents, accidents or injuries in the reporting period?		
<input type="checkbox"/>	No	
<input type="checkbox"/>	Yes [if 'yes', indicate the number of these matters that are not yet resolved or finalised]:	
[insert date of inspection]	Inspection of premises for hazards	
[insert date of inspection]	Inspection of fire safety equipment and first aid equipment	
Have any staff members submitted a claim for Worker's Compensation in the reporting period?		
<input type="checkbox"/>	No	
<input type="checkbox"/>	Yes [if 'yes', indicate the number of these matters that are not yet resolved or finalised]:	

FOCUS AREA: Risk Management		Indicator Questions for: ➤ Objective 3.3 : Indicator 3.3a
Objective 3.3 The organisation monitors organisational risks and controls these where possible.		
Indicator 3.3a The organisation develops, documents and implements a risk management process.		
1. Does the organisation have a documented risk management process?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
2. Does the organisation's risk management process:		
<input type="checkbox"/>	Identify and document potential risks	
<input type="checkbox"/>	Assess risks in terms of their likelihood of occurring and likely impact	
<input type="checkbox"/>	Identify ways of mitigating and managing each risk	
<input type="checkbox"/>	Include processes for ensuring awareness of risk management procedures by all personnel	
<input type="checkbox"/>	Identify responsibilities for implementing risk management procedures	
<input type="checkbox"/>	Undergo regular review	
<input type="checkbox"/>	Include an audit for compliance	
3. Which of the following areas of risk are addressed by the organisation's risk management process:		
<input type="checkbox"/>	Administration and information (including IT)	
<input type="checkbox"/>	Finance, including fraud and corruption, longer term viability	
<input type="checkbox"/>	Governance	
<input type="checkbox"/>	Human Resources	
<input type="checkbox"/>	Legal	
<input type="checkbox"/>	Management and operations	
<input type="checkbox"/>	Physical	
<input type="checkbox"/>	Environmental	
<input type="checkbox"/>	Reputation and relationships	
<input type="checkbox"/>	Services and activities	
4. Does the organisation have the following insurance cover:		
<input type="checkbox"/>	Worker's Compensation	
<input type="checkbox"/>	Public Liability (minimum \$20 million for any one event)	
<input type="checkbox"/>	Contents insurance	
<input type="checkbox"/>	Other insurance required in the Service Agreement (<i>specify</i>)	
Yes <input type="checkbox"/>	N/A <input type="checkbox"/>	Comprehensive insurance for vehicles (Select 'Not Applicable (N/A) if the organisation does not own any vehicles)

FOCUS AREA: Risk Management	Evidence Questions for:
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		➤ Objective 3.3
<input type="checkbox"/> [insert date of last review]	Risk management plan	
<input type="checkbox"/>	Certificates of currency for insurance	
Please list any other evidence you regard as significant:		

FOCUS AREA: Risk Management		Performance Report for: ➤ Objective 3.3
Briefly describe any action taken in the reporting period to prevent or manage specific risks:		
[type of risk]	[action taken or to be taken]	
[insert date]	When did the Board or Management Committee last receive a risk assessment report	
[insert date]	When did the Board or Management Committee last check and review currency of insurance cover	

FOCUS AREA: Evaluation		Indicator Questions for: ➤ Objective 3.4 : Indicator 3.4a : Indicator 3.4b
Objective 3.4 The organisation regularly evaluates its activities.		
Indicator 3.4a The organisation has developed valid systems or processes for evaluating and improving its service activities and outcomes.		
1. Does the organisation have a documented approach to monitoring and evaluating its performance across key aspects of its services and operations?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
2. Does the organisation have documented performance measures for key aspects of its services and operations?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
3. Does the organisation collect and analyse data related to performance measures?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
4. Does the organisation evaluate services or activities drawing on service user or activity participant feedback?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
5. Does the organisation use performance data and evaluation findings to:		
<input type="checkbox"/>	Assess whether it is meeting its objectives related to its services and activities	
<input type="checkbox"/>	Assess whether it is meeting any external requirements	
<input type="checkbox"/>	Make improvements in services and activities	
<input type="checkbox"/>	Inform planning and decision making by relevant staff and Board or Management Committee	
Indicator 3.4b The organisation participates in research by other parties that relates to health services for the target group.		
6. Does the organisation have a system for information collection, research and analysis to keep abreast of latest developments in its field?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
7. Does the organisation participate in research or practice development organisations that contribute to improvements in the delivery of its services and activities?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	

FOCUS AREA: Leadership and Governance		Indicator Questions for: ➤ Objective 4.1 : Indicator 4.1a : Indicator 4.1b
Indicator 4.1a The Board or Management Committee meets its obligations under its incorporation legislation, including matters relating to corporate governance, financial administration and insurance.		
1. Under which legislation is the organisation incorporated:		
<input type="checkbox"/>	Queensland Associations Incorporation Act	
<input type="checkbox"/>	Commonwealth Corporations Act (Company Limited by Guarantee)	
<input type="checkbox"/>	Corporations (Aboriginal and Torres Strait Islander) Act	
<input type="checkbox"/>	Queensland Cooperatives Act	
<input type="checkbox"/>	Corporations Law (Companies)	
<input type="checkbox"/>	Other [specify]	
2. Does the organisation have a current constitution that defines its membership and the relationship between the members and the governing body?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
3. Does the Board or Management Committee have written policies and procedures that describe its responsibilities, decision making processes and meeting procedures?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
4. Does the Board or Management Committee members all understand and comply with their statutory obligations?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
5. Does the Board or Management Committee maintain clear records of its meetings, with minutes of discussions and decisions?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
6. Are the lines of responsibility, reporting and communication between different parts of the organisation documented?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
7. Are the decision making processes and delegations of authority documented?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
8. Are the management and supervisory responsibilities of senior staff positions clearly identified and documented?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
9. Is the distinction between the role and responsibility of the Board or management committee and that of the senior staff clearly documented?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
10. Which of the following management processes are documented?		
<input type="checkbox"/>	Decision making by senior staff	
<input type="checkbox"/>	Priority setting by senior staff	
<input type="checkbox"/>	Resource allocation by senior staff	
<input type="checkbox"/>	Coordination of the implementation of organisational plans by senior staff	
<input type="checkbox"/>	Coordination of the work of staff by senior staff/team leaders	
<input type="checkbox"/>	Supervision of the work of staff by senior staff	
<input type="checkbox"/>	Providing leadership	
11. Do the organisation's financial record keeping systems:		
<input type="checkbox"/>	Meet basic accounting standards	
<input type="checkbox"/>	Use the Standard Chart of Accounts	
<input type="checkbox"/>	Meet requirements under funding agreements or other contractual obligations	

FOCUS AREA: Leadership and Governance		Indicator Questions for: ➤ Objective 4.1 : Indicator 4.1a : Indicator 4.1b
<input type="checkbox"/>	Provide clear and accurate data for reporting and monitoring	
<input type="checkbox"/>	Document any asset exceeding \$5,000 in value in an Asset Register	
12. Does the organisation have clear documented delegations of authority for expenditure?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
13. Does the organisation have safeguards to prevent fraud or mismanagement of funds?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
14. Does the organisation develop a budget for its planned activity each year which is approved by the Board or Management Committee?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
15. Does the organisation provide regular financial reports to the Board or Management Committee and senior managers that address the following:		
<input type="checkbox"/>	Income and expenditure for the period	
<input type="checkbox"/>	Monitoring of actual expenditure against a budget	
<input type="checkbox"/>	Impact of any budget variance	
<input type="checkbox"/>	Financial risks associated with proposed activities (new projects, major purchases etc.)	
<input type="checkbox"/>	Cash flow projections	
16. Does the organisation produce an annual audited financial statement which includes a balance sheet and a statement of income and expenditure/profit and loss?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
17. Is the annual financial statement approved/signed off by the Board or management committee?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
18. Does the Board or Management Committee receive information that enables it to monitor compliance with legal requirements and contractual obligations?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
19. Does the organisation have an effective process for ensuring insurance cover is kept up to date?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
Indicator 4.1b The Board or Management Committee leads the identification of the organisation's service priorities and development of the organisation's strategic or business plan.		
20. Does the organisation have a longer term (3-5 year) organisational plan that documents what the organisation is trying to achieve and broadly describes how it will do this?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
21. Which of the following have been addressed in this plan?		
<input type="checkbox"/>	External factors that will have an impact on the organisation	
<input type="checkbox"/>	Internal factors that will have an impact on the organisation	
<input type="checkbox"/>	How the organisation will respond to factors that may impact	
<input type="checkbox"/>	External requirements, including legislation, funding agreements and government policy	
<input type="checkbox"/>	The views of the community, individuals or other stakeholders the organisation serves	
<input type="checkbox"/>	How the organisation will respond to the needs of its community, service users or other stakeholders	
<input type="checkbox"/>	The results or outcomes to be achieved	
<input type="checkbox"/>	The types of services or activities that will be provided and what outcomes these services or activities will achieve	
<input type="checkbox"/>	The longer term sustainability of the organisation and its services and activities	

FOCUS AREA: Leadership and Governance		Indicator Questions for: ➤ Objective 4.1 : Indicator 4.1a : Indicator 4.1b
22. Does the Board or Management Committee oversee organisational planning, approve the final plan and use it to implement goals and priorities?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
23. How are the implementation and progress of the organisational plan monitored?		
<input type="checkbox"/>	Regular report to Board or Management Committee	
<input type="checkbox"/>	Monitored through reporting by staff against operational or work plans	
<input type="checkbox"/>	Annual report to members	
<input type="checkbox"/>	No monitoring	
24. Does the organisation clearly communicate its plans to its own personnel, members and other stakeholders?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	

FOCUS AREA: Leadership and Governance		Evidence Questions for: ➤ Objective 4.1
<input type="checkbox"/>	Constitution	
<input type="checkbox"/> [insert date of last review]	Documented delegations of authority	
<input type="checkbox"/> [period covered by plan]	Strategic and/or business plan	
<input type="checkbox"/>	Annual budget for current financial year	
<input type="checkbox"/>	Board or Management Committee Minutes	
<input type="checkbox"/>	Financial reports and records for reporting period	
Please list any other evidence you regard as significant:		

FOCUS AREA: Leadership and Governance		Performance Report for: ➤ Objective 4.1
[insert % for each meeting]	Proportion of Board or Management Committee members attending the last three (3) meetings	
[insert number]	Number of meetings cancelled or lacking a quorum in the reporting period	
[insert date]	Board or Management Committee review and sign off on strategic or business plan	
[insert date]	Report to Board or Management Committee against the strategic and/or business plan	
[insert date]	Report to Board or Management Committee against the annual budget	

FOCUS AREA: Operational Management		Indicator Questions for: ➤ Objective 4.2 : Indicator 4.2a : Indicator 4.2b
Objective 4.2	The organisation's management is accountable for how services are delivered.	
Indicator 4.2a	The organisation has an operational plan that clearly identifies its goals and strategies, and assigns workers responsibilities and accountabilities.	
1. Does the organisation have a documented plan or plans which reflect the broader goals of the organisation and include the following:		

<input type="checkbox"/>	Short term objectives and priorities for the current period
<input type="checkbox"/>	Action that the organisation will take to meet objectives
<input type="checkbox"/>	Time frames for actions
<input type="checkbox"/>	Responsibilities for implementing actions allocated to individuals
<input type="checkbox"/>	Performance measures related to planned action
2. Are the resources required to implement the plan identified and sourced?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
3. Is there a documented process for reviewing, monitoring progress and achievement and reporting against this plan?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
4. Does the Board or management committee monitor and review the performance of the personnel to whom it delegates key responsibilities?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
Indicator 4.2b Management involves the organisation's stakeholders in decision making.	
5. How does the organisation provide service users, community members and other relevant stakeholders' access or input to decision making?	
<input type="checkbox"/>	Sub committees or working groups
<input type="checkbox"/>	Consultation forums
<input type="checkbox"/>	Surveys or other structured feedback processes
<input type="checkbox"/>	Representation on selection or recruitment panels
<input type="checkbox"/>	Designated positions on the Board or management committee
<input type="checkbox"/>	Other [specify]:

FOCUS AREA: Operational Management		Evidence questions for: ➤ Objective 4.2
<input type="checkbox"/> [period covered by plan]	Operational or service plan	
<input type="checkbox"/> [insert date]	Report to Board or management committee against operational or service plan	
<input type="checkbox"/>	Stakeholder participation policy and procedures	
Please list any other evidence you regard as significant:		

FOCUS AREA: Operational Management		Performance Report for: ➤ Objective 4.2
[insert frequency]	How often do staff report on services and activities to senior staff or managers	
[insert frequency]	How often do staff or managers report on services and activities to the Board or management committee	

FOCUS AREA: Efficient Use of Resources		Indicator Questions for: ➤ Objective 4.3 : Indicator 4.3a : Indicator 4.3b
Objective 4.3 Services are delivered to the target group with an efficient use of resources.		
Indicator 4.3a The organisation's human resource policies and practices comply with requirements of the Service Agreement and relevant legislation.		
1. Does the organisation have a documented recruitment process for paid staff that includes the following:		
<input type="checkbox"/>	Development or review of position requirements	

<input type="checkbox"/>	Documented position description
<input type="checkbox"/>	How selection criteria are identified
<input type="checkbox"/>	How the position is to be advertised
<input type="checkbox"/>	How selection panels are convened
<input type="checkbox"/>	How the selection process is conducted to ensure selection is fair, transparent and based on merit
<input type="checkbox"/>	How referee checks are conducted
<input type="checkbox"/>	How applicants are notified of the outcome
2. Does the organisation ensure that recruitment processes apply principles of equal employment opportunity and comply with anti-discrimination legislation?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
3. Can the organisation demonstrate that it recruits people with the appropriate skills, qualifications and attributes?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
4. Does the organisation perform required employment screening risk management checks to comply with relevant legislation (e.g. relevant police checks, working with children etc.)?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No legal screening required
<input type="checkbox"/>	No
5. Are records kept of all recruitment processes that retain copies of all paperwork in a secure manner?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
Indicator 4.3b The Board or management committee is accountable for the efficiency of service delivery.	
6. Does the organisation have a financial or business plan which supports its organisational goals and ensures that it is able to meet its financial obligations?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
7. Does the organisation have documented procedures for financial planning and decision making?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
8. Can the organisation demonstrate that it uses its resources as efficiently as possible and maximises the amount of funds available for the provision of services and activities?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

FOCUS AREA: Efficient Use of Resources		Evidence Questions for: ➤ Objective 4.3
<input type="checkbox"/> [insert date of last review]	Human resource management policies and procedures (recruitment, industrial conditions, supervision and staff development)	
<input type="checkbox"/>	Service or activity budgets	
Please list any other evidence you regard as significant:		

FOCUS AREA: Efficient Use of Resources		Performance Report for: ➤ Objective 4.3
[insert length of time position was vacant]	Vacant positions during the reporting period	
[insert %]	Proportion of staff hours used in direct service delivery	

[insert number]	Total hours of service delivery provided to individuals
[insert number]	Total hours of service delivery provided to groups
[insert number]	Approximate staff hours involved in health promotion or related activity

FOCUS AREA: Sustainability	Indicator Questions for: ➤ Objective 4.4 : Indicator 4.4a : Indicator 4.4b
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Objective 4.4 The Board or management committee has identified ways to maintain or enhance the sustainability of the organisation.

Indicator 4.4a The Board or management committee addresses issues of sustainability and quality improvement in the organisation's strategic plan.

1. Are the organisation's strategic and operational plans, linked to one another, and is there an integrated planning and reporting process across the organisation?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
2. Does the organisation have a documented process for communication across the organisation on matters that impact on achievement of the organisational plan?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
3. Does the planning process identify opportunities for improvements to the integration and coordination of services and activities?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
4. Are there processes in place to encourage, support and involve managers and staff in initiating and contributing to innovation and improvement?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
5. Can the organisation demonstrate that it has a systematic approach to identifying and implementing improvements?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
6. Does the organisation conduct a capability analysis?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

Indicator 4.4b Financial analyses of organisation or activity proposals are developed to assist the Board or management committee with decisions that may significantly affect service delivery and resources.

7. Does the organisation have a template for providing proposals to senior staff and the Board or management committee that provides an analysis of the likely impact, outcomes, costs and benefits:	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
8. Are proposals for new projects and activities assessed in the context of the organisation's strategic or business plan and its financial plan?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

FOCUS AREA: Sustainability	Evidence Questions for: ➤ Objective 4.4
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<input type="checkbox"/> [period covered by plan]	Strategic and/or Business Plan
<input type="checkbox"/> [period covered by plan]	3-5 year Financial Plan
<input type="checkbox"/>	Balance Sheet

<input type="checkbox"/>	Template for new project or activity proposals
Please list any other evidence you regard as significant:	

FOCUS AREA: Sustainability		Performance Report for: ➤ Objective 4.4
What are the main threats to the longer term sustainability of the organisation?		
What action has been taken in the reporting period to address these threats?		
Year 3 (last year): [insert amount] Year 2: [insert amount] Year 1: [insert amount]	What has been the pattern of operating surplus or deficit over the previous three (3) financial years?	
[insert item]: [insert amount] [insert item]: [insert amount] [insert item]: [insert amount]	List the current and fixed liabilities shown in the previous year's financial statements	
[insert amount]	What amount is set aside in reserve funds for liabilities?	

FOCUS AREA: Transparency and Accountability		Indicator Questions for: ➤ Objective 4.5 : Indicator 4.5a : Indicator 4.5b : Indicator 4.5c
Objective 4.5 The organisation is accountable to key stakeholders.		
Indicator 4.5a The organisation ensures that workers comply with the applicable codes of ethics, standards of practice and registration requirements.		
1. Does the organisation have a code of ethics or conduct that applies to its personnel (including Board or management committee, staff and volunteers)?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
2. Which of the following are addressed in the documents dealing with aims, values or ethics?		
<input type="checkbox"/>	Non-discrimination or equity of access to services	
<input type="checkbox"/>	Conflict of interest	
<input type="checkbox"/>	Confidentiality	
<input type="checkbox"/>	Privacy	
<input type="checkbox"/>	Responsiveness to community, service users or other stakeholder groups	
<input type="checkbox"/>	Organisational accountability	
<input type="checkbox"/>	Honesty	
<input type="checkbox"/>	Respectful behaviour	
<input type="checkbox"/>	Responsible use of the organisation's resources and facilities	

FOCUS AREA: Transparency and Accountability		Indicator Questions for: ➤ Objective 4.5 : Indicator 4.5a : Indicator 4.5b : Indicator 4.5c
<input type="checkbox"/>	Professional misconduct	
3. Does the organisation actively communicate its aims, values and ethics and ensure that all personnel are aware of them?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
Indicator 4.5b The Board or Management Committee is accountable to its members, service users and key stakeholders.		
4. Does the organisation produce an annual report?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
5. Is the annual report made available to members of the organisation, funding providers and other stakeholders?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
<input type="checkbox"/>	Not applicable	
6. Does the annual report contain information on each of the following:		
<input type="checkbox"/>	The aims and strategic directions of the organisation	
<input type="checkbox"/>	The services and activities of the organisation	
<input type="checkbox"/>	Outcomes of services and activities	
<input type="checkbox"/>	Its achievements for the year	
<input type="checkbox"/>	Its revenues and expenditures	
<input type="checkbox"/>	Changes to its Board or management committee	
<input type="checkbox"/>	Not applicable	
7. Does the organisation have a documented exit strategy covering assets, employees and records?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
Indicator 4.5c The organisation has a documented set of principles that guide the delivery of services to the target group.		
8. Does the organisation have a written statement of its overall aim and purpose?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
9. Does the organisation have a written statement of its values or philosophy?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
10. Does the organisation ensure that its aims and values are consistent with the program guidelines for any funding it receives?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
11. Does the organisation follow documented eligibility criteria for accepting or prioritising service users that are:		
<input type="checkbox"/>	Based on assessed need, organisational capacity and available resources	
<input type="checkbox"/>	Consistent with anti-discrimination legislation	
<input type="checkbox"/>	Consistent with funding obligations and the purpose of the service	
<input type="checkbox"/>	Fair, equitable, ethical and transparent	
<input type="checkbox"/>	Consistently applied	
12. Where service cannot be provided, is information about alternative options provided, and a referral to another service provided wherever possible?		
<input type="checkbox"/>	Yes	
<input type="checkbox"/>	No	

FOCUS AREA: Transparency and Accountability		Evidence Questions for: ➤ Objective 4.5
<input type="checkbox"/>	Annual Report	
<input type="checkbox"/>	Code of conduct	
<input type="checkbox"/>	Service information or promotional material outlining service principles and eligibility	
Please list any other evidence you regard as significant:		

FOCUS AREA: Transparency and Accountability		Performance Report for: ➤ Objective 4.5
After the end of the last financial year, did the organisation:		
<input type="checkbox"/>	Convene its Annual General Meeting (AGM) within the required time frame	
<input type="checkbox"/>	Notify members of the AGM within the required time frame	
<input type="checkbox"/>	Conduct the AGM according to its constitutional rules	
How was the Annual Report made available to members, service users and other stakeholders <i>(if applicable)</i> :		

Gold Coast Primary Health Network gratefully acknowledges the permission to use the Service Delivery Quality Performance Framework developed by Queensland Health.