**Service Provider Safety and Quality Assessment– Overview and Assessment Template**

 **Overview Service Provider Safety and Quality Assessment**

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| **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 |

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| **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****2.5** The organisation encourages participation by members of its target group and the broader community. | **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. |
| **Appropriate Services****2.6** The organisation plans its services in accordance with the needs of its target group. | **2.6a** The organisation develops and implements specialist activities, that are appropriate to its target group’s needs. |
| **Collaboration****2.7** The organisation collaborates and coordinates with the service system to deliver the most effective service delivery for its target group. | **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. |

| **Perspective 3: Continuous Quality Improvement** |
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| **Objectives** | **Indicators** |
| **Innovation and Learning****3.1** The organisation is committed to ongoing development of its service activities and workers. | **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. |
| **Workplace Health and Safety****3.2** The health and safety of all persons within the organisation is protected. | **3.2a** The organisation has a strategy to ensure safe management of work practices and physical and psychological aspects of the environment. |
| **Risk Management****3.3** The organisation monitors organisational risks and controls these where possible. | **3.3a** The organisation develops, documents and implements a risk management process. |
| **Evaluation****3.4** The organisation regularly evaluates its activities. | **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. |

| **Perspective 4: Management and Resourcing** |
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| **Objectives** | **Indicators** |
| **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. | **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. |
| **Operational Management****4.2** The organisation’s management is accountable for how services are delivered. | **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. |
| **Efficient Use of Resources****4.3** Services are delivered to the target group with an efficient use of resources. | **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. |
| **Sustainability****4.4** The Board or management committee has identified ways to maintain or enhance the sustainability of the organisation. | **4.4a** The Board or management committee addresses issues of sustainability and quality improvement in the organisation’s strategic plan.**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. |
| **Transparency and Accountability****4.5** The organisation is accountable to key stakeholders. | **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. |

**Service Provider Safety and Quality Assessment: Template**

**Service Provider Quality and Safety Report for the Period:**

[insert month] 20\_ \_ to [insert month] 20\_ \_

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

**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 |
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| **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? |
| [ ] [ ]  | YesNo |
| 2. How often does the organisation conduct a service user satisfaction survey or feedback collection process? |
| [ ]  | At every service delivery occasion |
| [ ]  | At least annually |
| [ ]  | At least once every three years |
| [ ]  | Rarely/never |
| 3. Is feedback from service users and community collated, analysed and used to inform service planning and improvement? |
| [ ] [ ]  | YesNo |
| **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: |
| [ ]  | Encourages and supports service users to raise concerns and protects them against retribution |
| [ ]  | Is consistent with policy and procedures on privacy |
| [ ]  | Promotes safety and the prevention of harm; is culturally safe and appropriate |
| [ ]  | Allows for the participation of a support person or advocate |
| [ ]  | Distinguishes between complaints and dispute resolution |
| [ ]  | Distinguishes between complaints of a serious or urgent nature and less serious complaints |
| [ ]  | Requires a record to be kept of complaints |
| [ ]  | Requires receipt of a complaint be acknowledged |
| [ ]  | Provides for prompt responses and timely action |
| [ ]  | Provides for appropriate investigation |
| [ ]  | Ensures that progress towards resolution is reviewed within an agreed timeframe |
| [ ]  | Is fair and impartial |
| [ ]  | Ensures outcomes are reported to the complainant and resultant actions implemented |
| [ ]  | 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? |
| [ ] [ ]  | YesNo |
| 6. Does the organisation ensure all service users are aware of its complaints procedure and make the following information available in appropriate formats: |
| [ ]  | Rights and responsibilities of the service user and service provider in relation to complaints |
| [ ]  | How a dispute or complaint should be lodged |
| [ ]  | Who is responsible for receiving and managing complaints |
| [ ]  | Steps and time frames in the process of investigating and resolving a complaint |
| [ ]  | Access to advocacy or independent support |
| [ ]  | Processes for review or appeal |
| [ ]  | How the person will be informed of progress and outcomes |
| [ ]  | External or alternative avenues for complaint  |
| [ ]  | 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? |
| [ ] [ ]  | YesNo |
| 8. Does the organisation ensure the nature and outcomes of service user complaints are reported to senior management and the Management Committee or Board? |
| [ ] [ ]  | YesNo |

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

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|  **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? |
| [ ] [ ]  | NoYes [if ‘yes’, indicate the number of complaints received and the number successfully resolved]       |
| [insert number][insert number] | Complaints receivedComplaints successfully resolved |

| **FOCUS AREA: Service User Focus** | **Indicator Questions for:*** Objective 2.2 : Indicator 2.2a

 : Indicator 2.2b |
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| **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? |
| [ ] [ ]  | YesNo (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?  |
| [ ] [ ]  | YesNo |
| 2. Does the organisation provide staff with a clear ethical framework for their behaviour and interactions with service users? |
| [ ] [ ]  | YesNo |
| 3. Does the organisation have a documented statement of service user’s rights and responsibilities that addresses: |
| [ ]  | Privacy and confidentiality |
| [ ]  | Scope and limitation of services to be provided  |
| [ ]  | Conditions of service provision (including any fees or charges) |
| [ ]  | Service user feedback, complaints or disputes |
| [ ]  | Staff behaviour towards service users |
| [ ]  | Service user decision making and right to self determination |
| [ ]  | Access to support or advocacy |
| [ ]  | Responsibilities of service users |
| 4. Are all service users, staff and other relevant people made aware of the rights and responsibilities of service users? |
| [ ] [ ]  | YesNo |
| 5. Are service users provided with the following information on commencement of service: |
| [ ]  | Service orientation or overview |
| [ ]  | Standard of service to be expected |
| [ ]  | Relevant policies and procedures |
| [ ]  | Service user rights and responsibilities |
| [ ]  | Procedures for reporting incidents, making a complaint or providing feedback |
| [ ]  | Any risks associated with receiving service |
| [ ]  | Contact information |
| **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? |
| [ ] [ ]  | YesNo |
| 7. When collecting personal information, is the consent of the person or of a delegated support person always obtained? |
| [ ] [ ]  | YesNo |
| 8. Does the organisation have documentation that complies with privacy obligations: |
| [ ]  | Aims to protect individual privacy |
| [ ]  | Ensures that only personal information that is needed is collected |
| [ ]  | Ensures personal information is collected in a manner that protects privacy |
| [ ]  | Ensures that individuals are aware of what information is kept about them and the reasons for this |
| [ ]  | Ensures personal records are accurate and up to date |
| [ ]  | Provides access for individuals to their own records |
| [ ]  | Enables individuals to have their own records amended to correct information |
| [ ]  | Ensures consent is given to any release of personal information |
| [ ]  | Ensures that any information released for evaluation or research purposes is de-identified |
| [ ]  | Is made publicly available  |
| 9. If the organisation is required to conform to Privacy legislation, does it?  |
| [ ] [ ] [ ]  | YesNoDoes 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? |
| [ ] [ ]  | YesNo |
| 11. Does the organisation have a procedure for handling requests for access to personal information and for handling appeals against decisions to refuse access? |
| [ ] [ ]  | YesNo |

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| **FOCUS AREA: Service User Focus** | **Evidence Questions for:*** Objective 2.2
 |
| [ ]  [insert date of last review] | Documented service user rights and responsibilities policy and procedures |
| [ ]  [insert date of last review] | Written statement of service user rights and responsibilities |
| [ ]  [insert date of last review]  | Documented privacy, confidentiality and consent policy and procedures |
| Please list any other evidence you regard as significant:        |

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

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| **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? |
| [ ] [ ]  | YesNo |
| 2. Does the organisation have a documented policy and procedure for the application of legislation regarding anti-discrimination? |
| [ ] [ ]  | YesNo |
| 3. Does the organisation ensure that services, activities or materials are culturally appropriate and inclusive of all people within the target group? |
| [ ] [ ]  | YesNo |
| 4. Does the organisation identify and respond to the particular cultural or support needs of the following groups within its target population?  |
| [ ]  | Aboriginal and Torres Strait Islander people |
| [ ]  | People from non-English speaking backgrounds |
| [ ]  | Culturally and linguistically diverse communities |
| [ ]  | People with disability |
| [ ]  | People who are physically isolated or transport disadvantaged |
| [ ]  | Lesbian, gay, bisexual or transgender |
| [ ]  | 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? |
| [ ] [ ]  | YesNo |
| 6. Are staff provided with professional development related to cultural awareness and the diversity of the service user group? |
| [ ] [ ]  | YesNo |
| 7. Does the organisation review the profile of its user group or program focus to ensure diversity is maintained? |
| [ ] [ ]  | YesNo |
| 8. Does the organisation evaluate the effectiveness of its cultural diversity and responsiveness strategies and update relevant policies? |
| [ ] [ ]  | YesNo |

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| **FOCUS AREA: Accessible Services** | **Evidence Questions for:*** Objective 2.3
 |
| [ ]  | Documented cultural diversity and access policy and procedures |
| [ ]  | Specific access strategies and information provision for [specify groups]:        |
| [ ]  | Staff training or cultural awareness sessions held in reporting period |
| Please list any other evidence you regard as significant:       |

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| **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 %][insert %][insert %][insert %][insert %][insert %][insert %] | Aboriginal and Torres Strait Islander peoplePeople from non-English speaking backgroundsCulturally and linguistically diverse communitiesPeople with disabilityPeople who are physically isolated or transport disadvantagedOther [specify group]:       |
| List any action taken in the reporting period to improve access for particular groups:        |
| [ ]  [insert number]  | Cultural awareness sessions and/or relevant staff training sessions about service user access held in reporting period |

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| **FOCUS AREA: Accessible Services** | **Indicator Questions for:*** Objective 2.4: Indicator 2.4a
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| **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? |
| [ ] [ ]  | YesNo |
| 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*  |
| [ ]  | [ ]  | Is in appropriate languages and formats so that it is accessible to the intended audience |
| [ ]  | [ ]  | Explains who the service is for, entry and eligibility criteria and procedures |
| [ ]  | [ ]  | Explains how service will be allocated and applicants prioritised  |
| [ ]  | [ ]  | Explains any conditions or fees that apply to the service |
| [ ]  | [ ]  | Explains what support or assistance will be provided to applicants in accessing the service |
| [ ]  | [ ]  | Explains what support or assistance will be provided to applicants in locating alternative or additional services |
| [ ]  | [ ]  | 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* |
| [ ]  | [ ]  | Location of the services or activities |
| [ ]  | [ ]  | Physical access to the premises where services or activities are located |
| [ ]  | [ ]  | Opening hours of the service |
| [ ]  | [ ]  | Look and feel of the service user areas |
| [ ]  | [ ]  | Information strategies to promote the service |
| [ ]  | [ ]  | Languages spoken or translation services provided |
| [ ]  | [ ]  | Flexibility in the way services are provided |

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| **FOCUS AREA: Accessible Services** | **Evidence Questions for:*** Objective 2.4
 |
| [ ]  | Documented Access policy and procedure |
| [ ]  [insert date of review] | Review of disability access to premises |
| [ ]  [insert date of review] | Information for potential service users |
| Please list any other evidence you regard as significant:        |

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| **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:        |

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| **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? |
| [ ]  | Sub committees or working groups |
| [ ]  | Consultation forums |
| [ ]  | Surveys or other structured feedback processes |
| [ ]  | Other [specify]:      |

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| **FOCUS AREA: Engagement and Participation** | **Evidence Questions for:*** Objective 2.5
 |
| [ ]  | Documented participation policy and procedures |
| [ ]  | Reports from surveys, consultations or other forums |
| Please list any other evidence you regard as significant:       |

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| **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 |

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| **FOCUS AREA: Appropriate Services** | **Indicator Questions for:*** Objective 2.6: Indicator 2.6a
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| **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? |
| [ ] [ ]  | YesNo |
| 2. Which of the following does the organisation use to inform the planning of its services and activities? |
| [ ]  | Researched needs and preferences of the service user or target group |
| [ ]  | Feedback or input from existing service users or target group representatives |
| [ ]  | Feedback or input from staff, volunteers or other stakeholders |
| [ ]  | Evidence of what types of services, activities or strategies are effective in achieving service outcomes  |
| [ ]  | 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? |
| [ ] [ ]  | YesNo |
| 4. In planning services and activities, does the organisation identify future trends in the needs of its service user or target groups? |
| [ ] [ ]  | YesNo |

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| **FOCUS AREA: Appropriate Services** | **Evidence Questions for:*** Objective 2.6
 |
| [ ]  [date conducted] | Documented needs analysis |
| [ ]  | Services and activities plan reflecting needs analysis |
| Please list any other evidence you regard as significant:       |

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| **FOCUS AREA: Appropriate Services** | **Performance Report for:*** Objective 2.6
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| 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:      |

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| **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? |
| [ ] [ ]  | YesNo |
| 2. Does the organisation identify and participate in interagency networks and activities? |
| [ ] [ ] [ ]  | YesNo relevant agencies existNo |
|  **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? |
| [ ] [ ]  | YesNo |
| 4.Does the organisation maintain up to date information on other services and agencies that it can refer service users to?  |
| [ ] [ ]  | YesNo |
| 5. Are service delivery roles and responsibilities across agencies negotiated and documented? |
| [ ] [ ]  | YesNo |
| 6. Are documented referral protocols negotiated with other agencies where relevant? |
| [ ] [ ]  | YesNo |
| 7. Does the organisation review its collaboration with other agencies on a regular basis? |
| [ ] [ ]  | YesNo |

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| **FOCUS AREA: Collaboration** | **Evidence Questions for:*** Objective 2.7
 |
| [ ]  [insert date of last review] | Documented plan or procedure for collaboration with other agencies |
| [ ]  [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 |

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| **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? |
| [ ] [ ]  | YesNo |
| 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? |
| [ ] [ ]  | YesNo |
| 3. Can the organisation demonstrate that it provides access for staff to relevant training and professional development opportunities? |
| [ ] [ ]  | YesNo |
| **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? |
| [ ] [ ]  | YesNo |
| 5. Does the organisation have a documented continuous quality improvement process? |
| [ ] [ ]  | YesNo |
| 6. Does the organisation make use of current research and industry benchmarks to inform the development of its services and review its performance? |
| [ ] [ ]  | YesNo |

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| **FOCUS AREA: Innovation and Learning** | **Evidence Questions for:*** Objective 3.1
 |
| [ ]  | Staff development needs analysis and staff development plan/s |
| [ ]  | Quality improvement plan |
| Please list any other evidence you regard as significant:       |

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| **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:      |

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| **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? |
| [ ] [ ]  | YesNo |
| 2. Does the organisation comply with legal obligations regarding fire safety and building safety requirements? |
| [ ] [ ]  | YesNo |
| 3. Does the organisation ensure the following: |
| [ ]  | Inspection and review of premises and equipment to identify hazards at least annually |
| [ ]  | Maintenance of First Aid Kits in accessible places |
| [ ]  | Information on emergency procedures displayed in prominent places |
| [ ]  | Maintenance of fire extinguishers or other firefighting equipment |
| [ ]  | Adequate lighting, ventilation and temperature controls throughout its premises |
| 4. Does the organisation have an evacuation procedure in the event of an emergency? |
| [ ] [ ]  | YesNo |
| 5. Does the organisation have a documented procedure for the reporting of incidents, accidents and injuries that ensures that they are: |
| [ ]  | Identified, recorded and reported |
| [ ]  | Investigated as to cause and action taken to prevent re-occurrence |
| [ ]  | Analysed for trends over time |
| [ ]  | Reported to Workplace Health and Safety Queensland in the case of death, serious injury or illness |
| [ ]  | Reported to Gold Coast PHN - death or serious injury and illness immediately and all other Reportable incidents as described in the contract under Special Conditions within three (3) business days  |
| 6. Does the organisation have procedures for ensuring infection control? |
| [ ] [ ]  | YesNo |
| 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? |
| [ ] [ ]  | YesNo |
| 8. Are emergency evacuation drills conducted at least annually? |
| [ ] [ ]  | YesNo |
| 9. Does the organisation have processes for identifying and responding to workplace stress, including critical incidents and psychological fatigue? |
| [ ] [ ]  | YesNo |

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| **FOCUS AREA: Workplace Health and Safety** | **Evidence Questions for:*** Objective 3.2
 |
| [ ]  [insert date of last review] | Workplace health and safety policy and procedures |
| [ ]  | Register of incidents, accidents and injuries |
| Please list any other evidence you regard as significant:       |

|  |  |
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| **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? |
| [ ] [ ]  | NoYes [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? |
| [ ] [ ]  | NoYes [if ‘yes’, indicate the number of these matters that are not yet resolved or finalised]:       |

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| **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? |
| [ ] [ ]  | YesNo |
| 2. Does the organisation’s risk management process:  |
| [ ]  | Identify and document potential risks |
| [ ]  | Assess risks in terms of their likelihood of occurring and likely impact |
| [ ]  | Identify ways of mitigating and managing each risk |
| [ ]  | Include processes for ensuring awareness of risk management procedures by all personnel |
| [ ]  | Identify responsibilities for implementing risk management procedures |
| [ ]  | Undergo regular review |
| [ ]  | Include an audit for compliance |
| 3. Which of the following areas of risk are addressed by the organisation’s risk management process: |
| [ ]  | Administration and information (including IT) |
| [ ]  | Finance, including fraud and corruption, longer term viability |
| [ ]  | Governance |
| [ ]  | Human Resources |
| [ ]  | Legal |
| [ ]  | Management and operations |
| [ ]  | Physical |
| [ ]  | Environmental |
| [ ]  | Reputation and relationships |
| [ ]  | Services and activities |
| 4. Does the organisation have the following insurance cover: |
| [ ]  | Worker’s Compensation |
| [ ]  | Public Liability (minimum $20 million for any one event) |
| [ ]  | Contents insurance |
| [ ]  | Other insurance required in the Service Agreement (*specify*) |
| Yes[ ]  | N/A[ ]  | Comprehensive insurance for vehicles *(Select ‘Not Applicable (N/A) if the organisation does not own any vehicles)* |

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| **FOCUS AREA: Risk Management** | **Evidence Questions for:*** Objective 3.3
 |
| [ ]  [insert date of last review] | Risk management plan |
| [ ]   | Certificates of currency for insurance |
| Please list any other evidence you regard as significant:       |

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| **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 |

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| **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? |
| [ ] [ ]  | YesNo |
| 2. Does the organisation have documented performance measures for key aspects of its services and operations? |
| [ ] [ ]  | YesNo |
| 3. Does the organisation collect and analyse data related to performance measures? |
| [ ] [ ]  | YesNo |
| 4. Does the organisation evaluate services or activities drawing on service user or activity participant feedback? |
| [ ] [ ]  | YesNo |
| 5. Does the organisation use performance data and evaluation findings to:  |
| [ ]  | Assess whether it is meeting its objectives related to its services and activities |
| [ ]  | Assess whether it is meeting any external requirements  |
| [ ]  | Make improvements in services and activities |
| [ ]  | 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? |
| [ ] [ ]  | YesNo |
| 7. Does the organisation participate in research or practice development organisations that contribute to improvements in the delivery of its services and activities? |
| [ ] [ ]  | YesNo |
| 8. Does the organisation participate in research or practice development projects that contribute to knowledge and practice in the sector? |
| [ ] [ ]  | YesNo |

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| **FOCUS AREA: Evaluation** | **Evidence Questions for:*** Objective 3.4
 |
| [ ]  | Documented service delivery monitoring and evaluation procedures |
| [ ]  [insert date of report] | Services and activities evaluation report |
| [ ]   | Report of participation in research |
| Please list any other evidence you regard as significant:       |

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| **FOCUS AREA: Evaluation** | **Performance Report for:*** Objective 3.4
 |
| List the evaluation activities carried out during the reporting period:      |
| Briefly outline the main findings from the last evaluation of services and activities:      |
| List any changes or improvements to be made as a result of evaluation:      |

|  **FOCUS AREA: Leadership and Governance** | **Indicator Questions for:*** Objective 4.1 : Indicator 4.1a

 : Indicator 4.1b  |
| --- | --- |
| **Objective 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.**  |
| **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: |
| **[ ]**  | Queensland Associations Incorporation Act |
| [ ]  | Commonwealth Corporations Act (Company Limited by Guarantee) |
| [ ]  | Corporations (Aboriginal and Torres Strait Islander) Act  |
| [ ]  | Queensland Cooperatives Act |
| [ ]  | Corporations Law (Companies) |
| [ ]  | Other [specify] |
| 2. Does the organisation have a current constitution that defines its membership and the relationship between the members and the governing body? |
| [ ] [ ]  | YesNo |
| 3. Does the Board or Management Committee have written policies and procedures that describe its responsibilities, decision making processes and meeting procedures? |
| [ ] [ ]  | YesNo |
| 4. Does the Board or Management Committee members all understand and comply with their statutory obligations? |
| [ ] [ ]  | YesNo |
| 5. Does the Board or Management Committee maintain clear records of its meetings, with minutes of discussions and decisions? |
| [ ] [ ]  | YesNo |
| 6. Are the lines of responsibility, reporting and communication between different parts of the organisation documented? |
| [ ] [ ]  | YesNo |
| 7. Are the decision making processes and delegations of authority documented? |
| [ ] [ ]  | YesNo |
| 8. Are the management and supervisory responsibilities of senior staff positions clearly identified and documented? |
| [ ] [ ]  | YesNo |
| 9. Is the distinction between the role and responsibility of the Board or management committee and that of the senior staff clearly documented? |
| [ ] [ ]  | YesNo |
| 10. Which of the following management processes are documented? |
| [ ]  | Decision making by senior staff  |
| [ ]  | Priority setting by senior staff |
| [ ]  | Resource allocation by senior staff |
| [ ]  | Coordination of the implementation of organisational plans by senior staff |
| [ ]  | Coordination of the work of staff by senior staff/team leaders |
| [ ]  | Supervision of the work of staff by senior staff |
| [ ]  | Providing leadership |
| 11. Do the organisation’s financial record keeping systems: |
| [ ]  | Meet basic accounting standards  |
| [ ]  | Use the Standard Chart of Accounts |
| [ ]  | Meet requirements under funding agreements or other contractual obligations |
| [ ]  | Provide clear and accurate data for reporting and monitoring |
| [ ]  | Document any asset exceeding $5,000 in value in an Asset Register |
| 12. Does the organisation have clear documented delegations of authority for expenditure? |
| [ ] [ ]  | YesNo |
| 13. Does the organisation have safeguards to prevent fraud or mismanagement of funds? |
| [ ] [ ]  | YesNo |
| 14. Does the organisation develop a budget for its planned activity each year which is approved by the Board or Management Committee? |
| [ ] [ ]  | YesNo |
| 15. Does the organisation provide regular financial reports to the Board or Management Committee and senior managers that address the following: |
| [ ]  | Income and expenditure for the period |
| [ ]  | Monitoring of actual expenditure against a budget |
| [ ]  | Impact of any budget variance |
| [ ]  | Financial risks associated with proposed activities (new projects, major purchases etc.) |
| [ ]  | 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? |
| [ ] [ ]  | YesNo |
| 17. Is the annual financial statement approved/signed off by the Board or management committee? |
| [ ] [ ]  | YesNo |
| 18. Does the Board or Management Committee receive information that enables it to monitor compliance with legal requirements and contractual obligations? |
| [ ] [ ]  | YesNo |
| 19. Does the organisation have an effective process for ensuring insurance cover is kept up to date? |
| [ ] [ ]  | YesNo |
| **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? |
| [ ] [ ]  | YesNo |
| 21. Which of the following have been addressed in this plan? |
| [ ]  | External factors that will have an impact on the organisation |
| [ ]  | Internal factors that will have an impact on the organisation |
| [ ]  | How the organisation will respond to factors that may impact |
| [ ]  | External requirements, including legislation, funding agreements and government policy |
| [ ]  | The views of the community, individuals or other stakeholders the organisation serves |
| [ ]  | How the organisation will respond to the needs of its community, service users or other stakeholders |
| [ ]  | The results or outcomes to be achieved |
| [ ]  | The types of services or activities that will be provided and what outcomes these services or activities will achieve  |
| [ ]  | The longer term sustainability of the organisation and its services and activities |
| 22. Does the Board or Management Committee oversee organisational planning, approve the final plan and use it to implement goals and priorities? |
| [ ] [ ]  | YesNo |
| 23. How are the implementation and progress of the organisational plan monitored? |
| [ ]  | Regular report to Board or Management Committee |
| [ ]  | Monitored through reporting by staff against operational or work plans |
| [ ]  | Annual report to members |
| [ ]  | No monitoring |
| 24. Does the organisation clearly communicate its plans to its own personnel, members and other stakeholders? |
| [ ] [ ]  | YesNo |

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

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|  **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 |

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| **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: |
| [ ]  | Short term objectives and priorities for the current period |
| [ ]  | Action that the organisation will take to meet objectives |
| [ ]  | Time frames for actions |
| [ ]  | Responsibilities for implementing actions allocated to individuals |
| [ ]  | Performance measures related to planned action |
| 2. Are the resources required to implement the plan identified and sourced? |
| [ ] [ ]  | YesNo |
| 3. Is there a documented process for reviewing, monitoring progress and achievement and reporting against this plan? |
| [ ] [ ]  | YesNo |
| 4. Does the Board or management committee monitor and review the performance of the personnel to whom it delegates key responsibilities?  |
| [ ] [ ]  | YesNo |
| **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? |
| [ ]  | Sub committees or working groups |
| [ ]  | Consultation forums |
| [ ]  | Surveys or other structured feedback processes |
| [ ]  | Representation on selection or recruitment panels |
| [ ]  | Designated positions on the Board or management committee |
| [ ]  | Other [specify]:      |

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| **FOCUS AREA: Operational Management** | **Evidence questions for:*** Objective 4.2
 |
| [ ]  [period covered by plan] | Operational or service plan |
| [ ]  [insert date] | Report to Board or management committee against operational or service plan |
| [ ]  | Stakeholder participation policy and procedures |
| Please list any other evidence you regard as significant:       |

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| **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 |

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| **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: |
| [ ]  | Development or review of position requirements |
| [ ]  | Documented position description |
| [ ]  | How selection criteria are identified |
| [ ]  | How the position is to be advertised |
| [ ]  | How selection panels are convened |
| [ ]  | How the selection process is conducted to ensure selection is fair, transparent and based on merit |
| [ ]  | How referee checks are conducted |
| [ ]  | 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? |
| [ ] [ ]  | YesNo |
| 3. Can the organisation demonstrate that it recruits people with the appropriate skills, qualifications and attributes? |
| [ ] [ ]  | YesNo |
| 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.)? |
| [ ] [ ] [ ]  | YesNo legal screening requiredNo |
| 5. Are records kept of all recruitment processes that retain copies of all paperwork in a secure manner? |
| [ ] [ ]  | YesNo |
| **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? |
| [ ] [ ]  | YesNo |
| 7. Does the organisation have documented procedures for financial planning and decision making? |
| [ ] [ ]  | YesNo |
| 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? |
| [ ] [ ]  | YesNo |

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

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| **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 |

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| **FOCUS AREA: Sustainability** | **Indicator Questions for:*** Objective 4.4 : Indicator 4.4a

 : Indicator 4.4b  |
| **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? |
| [ ] [ ]  | YesNo |
| 2. Does the organisation have a documented process for communication across the organisation on matters that impact on achievement of the organisational plan? |
| [ ] [ ]  | YesNo |
| 3. Does the planning process identify opportunities for improvements to the integration and coordination of services and activities? |
| [ ] [ ]  | YesNo |
| 4. Are there processes in place to encourage, support and involve managers and staff in initiating and contributing to innovation and improvement? |
| [ ] [ ]  | YesNo |
| 5. Can the organisation demonstrate that it has a systematic approach to identifying and implementing improvements? |
| [ ] [ ]  | YesNo |
| 6. Does the organisation conduct a capability analysis? |
| [ ] [ ]  | YesNo |
| **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: |
| [ ] [ ]  | YesNo |
| 8. Are proposals for new projects and activities assessed in the context of the organisation’s strategic or business plan and its financial plan? |
| [ ] [ ]  | YesNo |

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| **FOCUS AREA: Sustainability** | **Evidence Questions for:*** Objective 4.4
 |
| [ ]  [period covered by plan] | Strategic and/or Business Plan |
| [ ]  [period covered by plan] | 3-5 year Financial Plan |
| [ ]  | Balance Sheet |
| [ ]   | Template for new project or activity proposals |
| Please list any other evidence you regard as significant:       |

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| **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)? |
| [ ] [ ]  | YesNo |
| 2. Which of the following are addressed in the documents dealing with aims, values or ethics? |
| [ ]  | Non-discrimination or equity of access to services |
| [ ]  | Conflict of interest |
| [ ]  | Confidentiality  |
| [ ]  | Privacy |
| [ ]  | Responsiveness to community, service users or other stakeholder groups |
| [ ]  | Organisational accountability |
| [ ]  | Honesty |
| [ ]  | Respectful behaviour |
| [ ]  | Responsible use of the organisation’s resources and facilities |
| [ ]  | Professional misconduct |
| 3. Does the organisation actively communicate its aims, values and ethics and ensure that all personnel are aware of them? |
| [ ] [ ]  | YesNo |
| **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? |
| [ ] [ ]  | YesNo |
| 5. Is the annual report made available to members of the organisation, funding providers and other stakeholders? |
| [ ] [ ] [ ]  | YesNoNot applicable |
| 6. Does the annual report contain information on each of the following: |
| [ ]  | The aims and strategic directions of the organisation |
| [ ]  | The services and activities of the organisation |
| [ ]  | Outcomes of services and activities |
| [ ]  | Its achievements for the year |
| [ ]  | Its revenues and expenditures |
| [ ]  | Changes to its Board or management committee |
| [ ]  | Not applicable |
| 7. Does the organisation have a documented exit strategy covering assets, employees and records? |
| [ ] [ ]  | YesNo |
| **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? |
| [ ] [ ]  | YesNo |
| 9. Does the organisation have a written statement of its values or philosophy? |
| [ ] [ ]  | YesNo |
| 10. Does the organisation ensure that its aims and values are consistent with the program guidelines for any funding it receives? |
| [ ] [ ]  | YesNo |
| 11. Does the organisation follow documented eligibility criteria for accepting or prioritising service users that are: |
| [ ]  | Based on assessed need, organisational capacity and available resources |
| [ ]  | Consistent with anti-discrimination legislation  |
| [ ]  | Consistent with funding obligations and the purpose of the service |
| [ ]  | Fair, equitable, ethical and transparent |
| [ ]  | Consistently applied |
| 12. Where service cannot be provided, is information about alternative options provided, and a referral to another service provided wherever possible? |
| [ ] [ ]  | YesNo |

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| **FOCUS AREA: Transparency and Accountability** | **Evidence Questions for:*** Objective 4.5
 |
| [ ]  | Annual Report |
| [ ]  | Code of conduct |
| [ ]  | Service information or promotional material outlining service principles and eligibility |
| Please list any other evidence you regard as significant:       |

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| **FOCUS AREA: Transparency and Accountability** | **Performance Report for:*** Objective 4.5
 |
| After the end of the last financial year, did the organisation:  |
| **[ ]** **[ ]** **[ ]**  | Convene its Annual General Meeting (AGM) within the required time frameNotify members of the AGM within the required time frameConduct the AGM according to its constitutional rules |
| How was the Annual Report made available to members, service users and other stakeholders *(if applicable)*:      |

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

**DOCUMENT CONTROL**

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| **Managed by:** Program Coordinator – Performance Improvement and Evaluation | **Approved by:**Commissioning Director – Programs | **Version:** 1.1 |
| **Next review date:**11/5/2024 | **Date approved:**11/5/2023 | **Status:**Final |

**REVISION RECORD**

|  |  |  |
| --- | --- | --- |
| **Date**  | **Version**  | **Revision description**  |
| 11/5/2022 | 1.0 | No updates required |
| 11/05/2023 | 1.1 | Change in title only.  |