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| Community services quality governance frameworkSafe, effective, connected, and person-centred community services for everybody, every time |
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Department of Health

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| To receive this publication in an accessible format phone 039096 0464, using the National Relay Service 13 36 77 if required, or email csqso@dhhs.vic.gov.auAuthorised and published by the Victorian Government, 1 Treasury Place, Melbourne.© State of Victoria, Department of Health and Human Services October, 2018Where the term ‘Aboriginal’ is used it refers to both Aboriginal and Torres Strait Islander people. Indigenous is retained when it is part of the title of a report, program or quotation.ISBN/ISSN 978-1-76069-509-5 <Print>ISBN 978-1-76069-510-1 <pdf/online/MS word>Available from the [Community Services Quality Governance framework](https://dhhs.vic.gov.au/community-services-quality-governance-framework) page on the Department of Health and Human Services website <https://dhhs.vic.gov.au/community-services-quality-governance-framework> |
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# Secretary’s foreword

The Victorian Department of Health and Human Services delivers, funds and regulates community services that have a real and tangible impact on people’s lives.

We have a duty to keep the people who use our services safe from preventable harm. This is, and must be, our non-negotiable starting point when delivering positive outcomes for all Victorians.

The department, sector and service providers all have an important role to play in collectively preventing harm, and delivering an evidence-informed approach to meet the unique needs of our community.

Effective quality governance is fundamental to consistently delivering safe, effective, connected and person centred community services.

The implementation of this Community services quality governance framework connects existing safeguards and approaches to quality and safety. It shifts the focus from compliance, to continuous improvement and reinforces the need to listen directly to the voices of people who use our services.

It also places a spotlight on the leadership and culture of our organisations, and on the importance of valuing the experience and expertise of our workforce and volunteers who deliver community services every day.

I would like to acknowledge the many community services and departmental staff and people who use community services who have contributed to the delivery of this framework, through their ideas, collaboration and key insights. In a time of increasing complexity we need to use our understanding of systems to maximise the value we can bring.

We have an opportunity to learn from the experience of other sectors in their successes and failings, to look at what we can apply and scale, such as the aviation and health care systems approach to quality improvement. We will also harness the unique characteristics and strengths of community services, such as our investment in practice development. Implementation will not happen overnight; it will require us to test, reflect and refine; to iterate and evaluate as we go.

I am pleased to share this Community services quality governance framework with you, and look forward to working together to continuously improve our delivery across the entire community services system.

Kym Peake

Secretary

Department of Health and Human Services

##### The Community services quality governance framework sets the objective of safe, effective, connected and person-centred community services for everybody, every time. It outlines the roles and responsibilities involved in delivering on that objective, and the domains and systems which promote and support its consistent delivery.

# 1. Background and context

Community services in Victoria are undergoing considerable reform. This reform supports people in getting the right services when they need them, and provides an earlier, connected and coordinated response. It aims to reduce service silos and recognises that people’s needs are not distinct but overlap and change over time.

The reform will also see community services become more outcomes-driven, where the focus is on the outcomes and experiences of service users.

Reform creates an opportunity to focus on what is at the centre of community services – making a difference to ensure that people can live their best possible life. We will only know if we are achieving this if we measure it, listen to the people we support and to the people who provide our services. Measurement will tell us about what is working well and what we need to improve; it will help us track and share our progress.

Community services are complex. Our service system is complex. People’s lives can be complex, particularly in times of vulnerability and stress. Collectively our community services are charged with providing the right support, at the right time, in the right way, for people who access our services and for this to be delivered in a connected and coordinated way.

Everyone should expect to be safe in our community services. Unfortunately there continues to be clear evidence from external reviews, internal reviews and incidents that we do not always get it right. Preventable harm does occur and this is not acceptable.

A recurring theme from the 2017 Royal Commission into Institutional Sexual Abuse was of governance failings, ‘where poor practices, inadequate governance structures, failures to record and report complaints or understating the seriousness of complaints have been frequent’. These failures highlight the need for accountable leadership, for effective governance structures and practices, and for cultures that prioritise the best interests and safety of every person receiving services.

Similar system failing themes can be identified in the 2017 Victorian Ombudsman’s Review of Autism Plus: ‘Lines of responsibility were unclear – a point underlined by many of those subject to this investigation, who were eager to deny responsibility or blame someone else for the failings identified. …[clients] have been failed in this case, by people and systems.’

…..‘The report highlights the need for … a rigorous accountability and oversight system that will hold organisations to account and adequately protect people with disabilities.’

These findings are not unique to Victorian community services and there are opportunities to learn from the experience of other sectors and settings. An alarming number of similar failings are available to review within our own jurisdiction, within Australia and internationally. Tragedy lies in the service system’s inability to learn from both its own and others’ failings.

Importantly, service failings happen in services that are accredited. This tells us that accreditation cannot and does not tell the whole story, nor can it provide complete assurance of quality and safety within an organisation.

Reviews of safety system failings such as *Targeting Zero: The Review into Hospital Safety and Quality Assurance* have highlighted the importance of:

* culture
* setting clear expectations at all levels through an organisation of roles in ensuring high quality services are delivered
* strong and accountable leadership
* the need for the department to be clear on how it supports and holds services to account
	+ the importance of using information to drive improvement and of the need for the people who deliver and receive services to be partners in the improvement effort.

The 2017 South Australian Independent Commissioner against Corruption’s review into Oakden, a public older persons mental health service, found ‘salient lessons about identifying and properly dealing with complaints, the consequences of attempting to “contain” issues of concern and withhold information from senior persons and the extraordinary dangers associated with poor oversight, poor systems, unacceptable work practices and poor workplace culture. Above all it highlights what can occur when staff do not step up and take action in the face of serious issues*.’*

Not only have system reviews highlighted the failures in listening to and valuing the experiences of service users, they also note the importance of organisational culture. Frontline staff who were unable to speak up about safety concerns, or who were not listened to when they did, were not able to protect clients and service users from harm. Just as the people using community services should always be safe from preventable harm, so too should our staff. This encompasses physical, psychological and cultural safety.

‘Complaints from patients and families … is the smoke under the door.’

– Robert Francis (author of the inquiry into the failings in care at Mid Staffordshire, NHS).

The department has a number of safeguarding mechanisms in place including regulation, performance management processes for funded organisations, external complaints and oversight bodies, and audit and review of services by external bodies against standards.

Each of these safeguards plays an important role in protecting people who access community services. Unfortunately, despite these safeguards, system failings leading to preventable harm continue to take place and hurt some of the most vulnerable members of our community. These safeguards, though required and a critical component of the service system, are not enough to prevent harm if they don’t work together in a connected and coordinated way.

‘The people you rely on are the ones you don’t feel safe with – that’s the conundrum.’

– Client

This quality governance framework is designed to provide a basis from which safeguarding functions are brought together and connected. It is this connection that will move us from harm prevention to a coordinated approach of continuous improvement and safety and service excellence.

*Compliance with regulation such as the Child Safe Standards and Human Service Standards are foundational and fundamental requirements for quality and safety. To continuously strive for high-quality community services requires more than compliance with regulations and standards.*

Achieving this vision requires a whole-of-organisation approach where everyone is focused on the same goal of excellent services and where there are strong connections between all parts of the quality and safety system.

Quality governance is not about compliance. A recent study by Ham and others found that high-performing services achieve great outcomes by taking actions that go beyond compliance. These include:

* a vision for the future – clearly communicated, specific and quantifiable goals for improving services
* client and family partnerships – the client is at the centre of services and is viewed as a partner in design and delivery
* organisational culture – a ‘just’ culture\* exists whereby staff are supported and their wellbeing prioritised
* continual learning and improvement – staff are provided with opportunities and encouragement to further their skill sets
* leadership – strong, transparent, supportive and accessible leadership fosters a culture of learning, accountability and openness with strong practice engagement
* teamwork – staff are supported at all levels of the organisation by skilled management
* quality improvement – established methods and data are used to drive and design actions to improve safety and quality.

\*’*Just’ culture recognises that individuals should not be held accountable for system failings. It is a culture of trust, learning and accountability. It is a culture where frontline staff are not punished for actions taken by them that are proportionate to their experience, training and role, but where there is accountability for reckless behaviour and an absence of care.*

The culture of learning from when things go wrong and taking a systems approach to prevent future harm is well developed in other industries and underpins a system approach to improvement.

‘To err is human, to cover up is unforgiveable, and to fail to learn is inexcusable.’

– Sir Liam Donaldson, World Health Organisation Envoy for Patient Safety

Quality governance will be a new concept for some community services. Implementing quality governance means change. Some organisations will have begun exploring quality governance in their own settings. Others will have incorporated components of this approach as they establish robust quality and safety systems. Each service will be at a different place in the change journey. The systems, structures and processes to support quality governance will need to be tailored by each service to reflect the scale and complexity of services delivered and should evolve as it learns and grows. It will never be a ‘set and forget’ exercise – organisations must always ask what they are aiming for and how they are measuring achievement towards this goal. Continuous improvement will be a constant, and the focus will always be on achieving the best possible outcome on what matters to the client.

*The Community Services Quality and Safety Office is a new part of the department focussed on connecting systems and approaches to drive continuous improvement in community services.*

# 2. Quality governance goal and definition

*Quality governance: the integrated systems, processes, leadership and culture that are at the core of safe, effective, connected, person-centred community services underpinned by continuous improvement.*

*Delivering safe, effective, connected, person-centred community services is a shared goal of all community service providers.*

**Safe**: free from preventable harm including neglect or isolation.

**Effective**: incorporates contemporary evidence, providing appropriate services in the right way, at the right time, supporting the right outcomes for every person.

**Person-centred**: people’s values, beliefs and situations guide how services are designed and delivered. People are enabled and supported to meaningfully participate in decisions and to form partnerships with their service providers.

**Connected**: services work together to achieve shared goals; people experience service and support continuity as they move through the service system.

High quality services require a commitment from all staff in pursuing and maintaining excellence, especially in the face of complexity and adversity. Fundamental to achieving excellence and providing quality person-centred services are robust, integrated quality governance systems.

Quality governance provides a framework for organisations and individuals to deliver safe, effective, person-centred community services for everybody, every time. Its purpose is to help organisations and their staff achieve this goal through continuous monitoring, evaluating and improving.

‘Quality improvement requires a focus on data not just trust.’

– CRANAplus 2013

# 3. How to use this resource

This framework has been developed so that services can scale, adapt and implement components to meet the needs and scope of their organisation. Each service should use it to review, design and continuously improve its own structures, systems and processes. It specifies that everyone, whether a volunteer, manager, CEO or member of a governing body, has a role to play in achieving the best possible experience and outcome for the people who use community services. No-one can ignore this responsibility.

It is important that governance systems are regularly reviewed and evaluated to meet local requirements and drive continuous improvement. The framework is to be used to inform organisations’ planning, performance measuring and benchmarking, and board activity and review. It should be used to support clients and practitioners in amplifying their voices and promoting the goal of safe, effective, connected, person-centred community services.

Data that reflects quality and safety should be collected, performance-monitored and connected to drive improvement. Using data to understand and inform quality and safety in services supports systemic improvement.

Boards and their subcommittees should use this framework to drive their organisation to ensure that it meets the needs of the people it supports through formal arrangements and reporting but also through culture and leadership.

All community services should have formal quality governance functions and structures in place that are proportionate to the needs and scope of the organisation.

This framework has been deliberately crafted to align with Safer Care *Victoria’s Delivering high-quality healthcare: Victoria’s clinical governance framework* for organisations such as mental health community services, community health services and alcohol and drug services where both frameworks may apply.

## 3.1 Audience

This framework is designed for all organisations that deliver community services, including the department and community service organisations.

Every person in an organisation has a responsibility to deliver on safety and service excellence. For this reason, this framework is designed to be accessed and used by everyone from frontline staff and volunteers, through to team leaders, managers, executives and board members. The framework outlines how these responsibilities differ, and how important it is that staff at every level of an organisation understand their role in pursuing service excellence.

## 3.2 Scope

Community services span:

* department-delivered community services – child protection, disability and housing services
* department-funded community services – child and family, community housing, alcohol and drug, community mental health, disability, family violence and community health services
* department-regulated community services such as NDIS services
	+ Family Safety Victoria and its funded/contracted services.

‘I’m not asking for a lot, I’m just trying to get a basic service.’

– Client

# 4. Quality governance principles

The principles listed in Table 1 guide effective, high-quality governance systems. Common characteristics of high-performing services are reflected in these principles.

Table 1: Quality governance principles

| Principle | What this looks like |
| --- | --- |
| Excellence in client experience always | Commitment to a positive experience for clients every time (safe , effective, connected and person-centred) |
| Continuous improvement | Rigorous measurement of performance and progress that is benchmarked and used to manage risk and drive improvement in the quality of services and experience |
| Partnership with clients and families | Client engagement is actively sought and supported at all levels, from engagement in direct service provision, service design and delivery to governance and oversight |
| Clear accountability and ownership | Accountability and ownership for quality and safety is demonstrated by all staffCompliance with legislative and departmental policy requirements |
| Effective planning and resource allocation | Staff have access to regular training and educational resources to maintain and enhance their skills |
| Proactive collection and sharing of information | The ‘way we do things’ is regularly challenged and additional information sought when clarity is requiredRobust data is collected, shared and informs decision making and improvement |
| Openness and transparency | Reporting, reviews and decision making are underpinned by transparency and accuracy, and are clearly linked to decision making |
| Empowered staff and clients | Organisational culture and systems are designed to promote and support safe servicesStaff and clients feel comfortable to speak up about quality and safety concerns, and are listened toService delivery centres on clients and families |
| Workforce leadership and engagement | A culture of all staff owning and contributing to service outcomes is promoted and practised by all staffStaff actively participate and contribute their expertise and experience |

# 5. Quality governance roles and responsibilities

Excellent services and outcomes for every Victorian require everyone at every level in community services to play a role. Everyone from support staff to practice leaders, CEOs and departmental staff should focus on:

* partnering with clients, families and communities
* regular review, evaluation and identifying areas for improvement
* ownership and accountability for the quality of services provided.

Specific roles are highlighted in Figure 1.

Figure 1: Quality governance roles and responsibilities



## 5.1 Clients and families

People are the central focus of quality governance. Their experiences of and participation in community services are fundamental indicators of quality and safety.

Clients and families:

* participate to their desired extent in the services they receive
* participate in system-wide service improvement
* advocate for safety to support the best possible outcomes for themselves and other clients
	+ share their experience, provide feedback and offer suggestions to support improvement.

## 5.2 Frontline staff and volunteers

The people who have direct contact with, and deliver services to, our clients are the face of service quality. Frontline staff and volunteers:

* support clients to share their experience
* work within relevant standards, protocols and guidelines
* speak up and raise concerns about quality and safety for their colleagues and clients
* share information and learnings regarding safety
* monitor and review their services and focus on continuous improvement
* work collaboratively as part of coordinated teams and services
* work with and support clients to exercise their voice, recognising clients may be hesitant to do this for a range of reasons
* go beyond the bare minimum to pursue excellence for clients
* regularly update their skills and knowledge to provide the best service possible.

## 5.3 Operational managers and team leaders

Operational managers and team leaders:

* provide a safe environment for staff and clients that supports a culture of collaboration, teamwork and transparency
* ensure that staff and volunteers are clear about their roles and responsibilities
* support and develop staff and volunteers to deliver the best possible service
* proactively identify and manages risks
* lead and model behaviour that supports continuous learning and speaking up about quality and safety concerns
* promote a culture of continuous improvement through sharing information and supporting and enabling staff and clients to contribute to and lead improvement efforts
	+ support staff to seek out client voices in a way that responds to power imbalances.

## 5.4 Executive

The executive and CEO:

* provides visible leadership and demonstrates a commitment to delivering the organisation’s strategic direction
* creates and promotes a safe and open culture that empowers staff to speak up and raise quality and safety concerns
* fosters a ‘just’ culture of safety, fairness, transparency, learning and improvement in which staff are empowered and supported to deliver their roles and responsibilities
* proactively seeks information from qualitative and quantitative sources including staff and clients to test and understand the quality of all areas of service delivery
* drives a culture that is committed to supporting clients to exercise their voice
* maintains focus on the quality of services, ensuring that listening to and acting on the client voice is at the centre of the business and the organisation remains focused on continuous improvement
* regularly reports to the board or committee of management on risks, outcomes, areas for improvement and progress on achieving the best service across all areas of service delivery.

## 5.5 Boards, directors, committees of management

Governance bodies have specific responsibilities for quality and safety in their service. These should be specified in their constitution, strategic plan or other governing charter.

Governing bodies have ultimate responsibility to ensure the services delivered within their organisation are safe and of a high quality. Governing bodies must also take the necessary steps to assure themselves that the services within their organisations are safe. Governing bodies must ensure they have appropriate subcommittees with suitably skilled members, including a subcommittee dedicated to quality and safety.

Governing bodies:

* set a clear vision, strategic direction and ‘just’ organisational culture to drive consistently high-quality services and to facilitate effective employee and client engagement and participation
* ensure they have clear and regular reporting on the quality and safety of their service via a subcommittee dedicated to quality
* stay engaged, visible and accessible to staff
* ensure they have the necessary skill set, composition, knowledge and training to actively lead and pursue quality and excellence in service delivery
* understand key risks and ensure controls and strategies are in place to mitigate them
* monitor and evaluate all aspects of services provided through regular and rigorous reviews of benchmarked performance data and information
* ensure robust quality governance structures and systems across the service effectively support and empower staff to provide high-quality services and are designed in collaboration with staff expectations
* delegate responsibility for the implementation, monitoring, evaluation of improvement to their executive
	+ regularly seek information from the executive, staff and clients about the status of quality and safety in all areas of service delivery.

It is crucial that community service organisation boards and departmental divisions develop and maintain robust relationships. The Community Services Quality and Safety Office will develop tools to support this, with particular focus on ensuring the delivery of safe, effective, connected, person-centred community services**.**

## 5.6 The department

The department has a number of key quality governance functions including to:

* set the expectations and accountability requirements for quality and safety
* ensure community services have the relevant data and information to support and oversee quality and safety
* provide leadership, support and direction to community services
* monitor quality governance implementation by regularly reviewing key quality and safety data
	+ monitor the quality governance system to identify concerns early and to take appropriate, timely action to address system failings.

### Definitions of key roles

**The department as service provider**: Provides direct service delivery to clients. The department will apply this framework to its operations (in relation to expectations of executive, operational managers and frontline staff).

The department also has specific functions as system steward, funder, regulator, contractor, capacity builder, as defined below.

**System steward**: Oversees and manages system policies, institutions, infrastructure, policy and planning.

**Regulator**: Regulates human service providers and enforces specific regulatory schemes that are designed to protect vulnerable people.

**Funder and purchaser of services**: Sets funding models, outcomes, targets and funding program guidelines and leads reform of funding approaches.

**Contractor**: Monitors inputs, outputs and outcomes and identifies assesses and responds to performance issues.

**Capacity builder**: Supports learning, innovation and improvement systems as well as workforce sector development, research partnerships and networks. It shares knowledge, information and data, builds capacity to measure outcomes and use data, and supports practitioner and client engagement.

The purposeful interconnection of these functions, each of which contributes to quality and safety, will be articulated in a community services system quality and safety architecture and operating model (*under development*).

# 6. Quality governance domains

Quality governance exists within the system of a community service organisation’s broader governance, oversight, strategy and assurance arrangements. This ensures both a future and accountability focus, and that the appropriate corporate governance arrangements such as financial, risk and business mechanisms are in place and are aligned to support the delivery of safe, effective, connected, person-centred community services for everybody, every time.

The framework identifies the systems of focus that are required to develop and maintain a high-performing organisation.

The systems are organised into five domains of quality governance that are underpinned by continuous monitoring, evaluation and improvement:

* leadership and culture
* client and family partnerships
* workforce
* best practice
	+ risk management.

Quality governance requires a focus on all domains. These domains are interconnected and interdependent. Quality governance is achieved through a whole-of-organisation approach and is supported by systems and processes that are proportionate to the risk, size and complexity of the organisation. Continuous monitoring, evaluation and improvement underpin quality governance.

**Figure 2: Quality governance domains**

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## 6.1 Leadership and culture

Visible, accountable and purposeful leadership at all levels of the service system is required to cultivate an inclusive and ‘just’ culture and facilitate the delivery of high-quality services.

Leaders set the tone on the way organisations do their business. An engaged workforce requires strong inclusive leadership. Engaged staff and clients who are enabled to actively participate in organisational strategy, planning and delivery are the foundations of quality.

There is strong evidence from analysis of high performing services that leadership styles and processes and organisational cultures affect the outcomes of people receiving services.

The culture of an organisation is shaped, fostered and enhanced by its leaders. A strong organisational culture is required to support staff and leaders to deliver their best in supporting the best outcomes.

Conversely, leaders who aren’t open to learning about problems or listening to feedback from staff or clients set themselves and their organisations up for failure. They also place the safety of their staff and clients at risk.

An organisation’s culture must be one of fairness, respectfulness and transparency. It should be based on natural justice and should value learning from when things go wrong. It should foster accountability for decisions and actions.

Culture is not static; it requires effort from the whole organisation. It is supported by systems that promote productive working relationships between all levels and across the organisation.

Systems should be in place that ensure:

* a clear vision for improving the quality of services is communicated throughout the organisation
* organisational alignment in strategic goals and priorities for providing high-quality services and experience for every client in a way that is seamless and integrated
* a supportive, transparent culture that is set and led by the governance body that assists all staff to provide high-quality services and to continuously improve
* clear accountability for planning, monitoring and improving the quality of each service or program
* the CEO, governance body and leaders regularly review their performance and seek external ideas and knowledge on how best to strive for the best service
* the governance body and executive visibly engage with and support clients and staff in their roles
* appropriate governance structures, including committee and reporting structures, are in place to effectively monitor and improve quality performance
* the development and support at all levels of the organisation of leaders who promote and drive high-quality services
* the development of staff skills and systems for achieving high-quality services, managing change and improvement across the organisation
* effective supports are in place for staff who identify quality and safety issues
	+ regular and rigorous evaluation of the effectiveness of systems for developing and supporting positive organisational leadership and culture.

## 6.2 Client and family partnerships

Effective client, family and carer partnerships are crucial for improving clients’ experiences and outcomes, and for designing services that meet people’s needs.

Partnerships require tailored listening and proactive engagement, and support participation.

People are at the heart of community services. People’s experience of and participation in services are basic indicators of quality and safety. Participation and partnership does not happen on its own – it requires action. The foundation of participation is that voices are proactively sought out, listened to and responded to.

Empowering participation in services and decision making helps organisations to deliver services that are better tailored to the person’s needs, preferences and values, and leads to better outcomes.

Client feedback (both positive and negative) is a valuable resource that should be encouraged throughout all aspects and phases of the service. It should be proactively sought in ways that are appropriate to the client’s needs and preferences and be used to drive improvement for individuals and the service system.

Failure to seek and respond to the voice of clients results in a compromised understanding of service quality and safety. Services may be delivered dangerously or excellently, without understanding the experiences of people accessing the service. Organisations may not fully appreciate this.

In seeking out client voices, services should remind themselves of the inherent power imbalance present in many provider–client relationships, and how this might affect how clients express themselves and their concerns. Services must be mindful of the complexities of seeking the voice of children, and accommodate this in their work. Complaints should be responded to compassionately, reflect best practice standards and be used to drive improvement.

Systems should be in place to ensure:

* clients and their unique needs are key organisational priorities
* clients are actively invited and supported to provide feedback on their experiences
* clients are provided with the relevant skills and knowledge to participate fully in their service provision to the extent they wish
* clients are provided with the opportunity, information and training to fully participate in organisational processes for planning, monitoring and improving services
* clear, open and respectful communication exists between clients and staff at all levels of the service
* services respond to the diverse needs of clients and the community
* services learn from and act on client feedback on service delivery to make improvements
* client participation processes are monitored for their effectiveness
* complaints are responded to compassionately, competently and in a timely fashion, with feedback provided to all parties about the action resulting from their input
* issues arising from complaints are analysed, reported and used to improve services
* clients’ rights and responsibilities are respected and promoted
	+ clients are made aware of oversight bodies available to assist and advocate for them.

‘Look for problems but also look for solutions – and ask us because we might have the answers.’

– Client

## 6.3 Workforce

Staff must have the appropriate skills and knowledge to effectively fulfil their roles and responsibilities. Systems must support a skilled, competent and proactive workforce.

A skilled, competent and proactive workforce is the backbone of community services. It requires a comprehensive approach to recruiting, allocating, developing, engaging and retaining staff.

An informed workforce approach will enable services to have the right people in the right place with the right skills to deliver the right service.

Ensuring that an organisation seeks and responds to the experience of its staff enables the organisation to clearly understand its workforce’s strengths and weaknesses.

Providing a workplace that is physically and psychologically safe for all is non-negotiable. Organisational planning must include a focus on building a culture that tackles discrimination, bullying and promotes staff engagement.

All staff require access to information and training on effective approaches to continuous service improvement and how they can contribute to delivering high-quality services. Human resource systems support staff to develop and consolidate their skills, work within their roles and responsibilities and, where appropriate, manage performance.

Systems should be in place to ensure:

* planning, allocation and management of the workforce provides the appropriate personnel and skills to deliver high-quality services and to meet changing client needs
* the community services workforce has the appropriate qualifications and experience to provide high-quality services and ongoing professional development to maintain and improve skills
* a safe and fair workplace based on a ‘just’ culture and mutual respect is provided, with systems in place to address issues with culture such as workplace bullying, unconscious bias and discrimination
* staff feedback is sought and used in a visible way to improve services
* promotion and support of teamwork is the basis of providing high-quality services
* clear communication of role expectations, responsibilities and standards of performance is provided to all staff, and employees are supported and held accountable for meeting these expectations
* mentoring and supervision is used to support, monitor and develop staff
* training and tools are provided so staff can monitor and improve their own practice and organisational processes more broadly
* innovation in workforce practice supports the development and maintenance of workforce excellence
* there is a just process for addressing individual performance that prioritises client safety
* a defined system for managing complaints or concerns about a staff member is in place and is regularly reviewed for its effectiveness
	+ the systems for developing and supporting the workforce are regularly and rigorously evaluated to ensure their effectiveness.

## 6.4 Best practice

Staff must be effectively supported to continuously improve the safety and appropriateness of the support they provide through evidence-informed best practice.

Best practice requires systems that support staff to provide safe and appropriate services that deliver the best possible outcome, working within the scope of the service’s funding and service agreement.

Research, evidence and guidelines should form the basis of service provision, and staff should be supported to access and integrate this into service delivery.

Systems to support best practice include staff having the required skills and knowledge, support and guidance, and evidence (where available) to deliver high-quality services.

The safety, effectiveness, impact and outcome of services should be regularly monitored, reviewed and improved using relevant measures and reporting processes.

Best practice is continuously evolving. It requires regular review and refinement to reflect and respond to changing client needs, technology and service system arrangements.

Systems should be in place to ensure:

* evidence-informed services are provided within the scope of funding and service agreements
* service standards and protocols are clearly articulated, communicated and adhered to across the organisation
* practitioners regularly review and improve their service
* clearly defined roles, scope of practice and supervision processes support practitioners to work safely and effectively
* active partnerships are developed with clients and include a shared understanding of the plan
* clients experience smooth, connected transitions across settings and services
* staff participate in the design and review of service systems and processes, and support innovation
* data on the safety, effectiveness and person-centeredness of services is collected, analysed and shared for the purposes of both accountability and improvement
	+ staff regularly review their own performance.

## 6.5 Risk management

Services must have a broad-based risk management system that integrates organisational, financial, occupational health and safety and practice risk.

Both safeguarding and minimising risks to clients requires structured approaches to safety that are both reactive and proactive – that both repair and prevent harm. Safe services rely on staff and their awareness of systems that prioritise safety for all. Safe services are supported by mechanisms that identify issues early and respond when things go wrong.

Risk management for clients should be approached systematically and integrated within broader risk management systems that scan for, monitor, review and manage risk. This includes early identification of risks and defined escalation processes with clear pathways, processes, accountabilities and oversight.

Where safety is compromised, leadership and management risk systems must support staff to respond appropriately through escalation, management and corrective action.

It is essential that issues relating to risk are analysed and shared to improve safety and inform future work.

Systems should be in place to ensure:

* a planned, proactive, systematic and ongoing evidence-based approach to creating safety for clients and staff is in place
* the organisational culture supports staff to pursue safe practice and to speak up for safety
* risk considerations and data inform goal and priority setting and the development of business and strategic plans
* risks are proactively identified, monitored and managed through an effective register with clearly understood, integrated risk data
* known client risks are proactively addressed and all services are regularly scanned to identify risks as they emerge
* the identification and reporting of client incidents is consistent with the department’s incident management policy and is tracked over time to monitor and identify safety issues
* client incidents are investigated to identify underlying systems issues and root causes, and this information is used to improve safety
* the service complies and adheres with risk-related legislation and relevant Australian standards
	+ systems and datasets for developing and supporting client risk management are regularly and rigorously evaluated to ensure their effectiveness.

# 7. Measures of success

All community service providers collect and report large amounts of data, but it is not always used to its full potential or synthesised in an intelligent way. Community services should review their data and identify ways that it can be connected to give enhanced insights into issues and trends within their service.

Monitoring processes help assess the effectiveness of approaches, identify areas of risk and support continuous improvement.

Measures should be set to reflect the organisation’s goals for service excellence and encompass safety, effectiveness, person centredness and connectedness dimensions.

These should span the nature and breadth of service delivery, be sought from all the quality governance domains and, where possible, span qualitative and quantitative data sources. A focus should be on improvement targets rather than merely meeting funding or other administrative, regulatory or set performance targets.

Services should consider both lead and lag indicators.

* Data may be held by the department or held locally by service providers.
* Data should align with the department’s community services quality and safety data suite (*under development*).
* Data should be benchmarked and support comparison across time and with peer organisations.
	+ Data should identify risks and strengths.

Table 2 suggests ways to measure success against the quality governance domains.

**Table 2: Quality governance domains – potential measures of success**

| Domain | Potential measures of success |
| --- | --- |
| Leadership and culture | The board and executive have an active plan to achieve a set of strategic goals and priorities for safe, effective, connected and person-centred services that are known and understood throughout the organisationStaff culture surveys have a high participation rateStaff report that a ‘just’ culture exists within their serviceStaff report that the service values their feedbackThe client voice is represented in organisational governance Leaders conduct ‘walk arounds’ seeking client and staff feedback and demonstrate action in response to this feedbackThe organisation’s plan has clear measures of success that are understood by all staffClients are represented on organisational quality committees |
| Client and family partnerships | Positive client and family survey reportsEvidence of improvement in response to complaintsClients are encouraged and supported to participate in local service improvement effortsEvidence of mechanisms are in place for client input into service design, delivery and evaluation |
| Workforce  | Staff orientation and training includes a focus on quality and safetyReduction in incidents of workplace harmStaff engagement, wellbeing and satisfaction is measured and is a priority for the board or committee of managementThe training and development budget is fully expendedResources are clearly allocated for supervision and mentoring |
| Best practice  | Practitioners work within their approved rolesServices actively participate in external evaluation and benchmarking Services collect and publicly share outcome information |
| Risk management  | Quality and safety measures are monitored and benchmarked Data is trended Trended and analysed risk and improvement data are used by senior leadership and the governing body to make decisions about improvementRegular reports about quality and safety progress are reviewed by the executive and the governing bodyRisks and mitigation strategies are reviewed quarterly by the executive and the governing body |

## 7.1 Indicators of poor-quality governance

Common themes can be found in the literature and in service reviews related to quality and safety governance failings. These include:

* a system that is purely focused on compliance with standards and little to no focus on high-quality services
* an isolated, inward-looking organisational culture and leadership that does not support learning and/or cultivates a fear of speaking up
* a disengaged board, CEO and executive who are unwilling to hear bad news
* management and leaders disconnected from oversight systems
* substandard practice leadership, staff engagement and teamwork to support best practice
* weak data reporting (in both form and content); passive monitoring actions
* tolerance of substandard care – problems are well known and entrenched but not actively addressed; acceptance of ‘the way things are’
* absence of client and family voice and participation, and limited support and interest in clients and families
* lack of practice review and poor clarity of accountability for service improvement
* lack of data benchmarking and review
	+ evidence not considered in practice or system improvement.

There are also times of greater risk for quality governance including when there is:

* very rapid organisational growth and systems have not kept up with the size, scale or complexity of the demand or organisational needs
* a transition between oversight systems or a focus on new developments at the expense of existing service delivery
	+ a change in the CEO, significant changes in executive leadership or governing body.

# 8. Support for quality governance

Tailored quality governance questions can be used by governing bodies and leaders to critically examine their own service. Suggested questions include:

* Are we pursuing specific goals for excellent services?
* When was the last time we heard the client perspective?
* When was the last time we heard from staff?
* What does safety look like around here?
* What is my role in quality and safety?
* Do we know what the red flags are?
* How will we fix what we know isn’t working?
* What evidence do we have to show we are delivering the best services?
* Do we know what our quality and safety problem areas are?
* How do we evaluate our services?
* What must we do to improve the effectiveness of our systems?
* What are we aiming to improve and how will we know we are getting there?
* How do we support and speak up for safety in our service?
* Do staff feel supported to create consistently safe, person-centred and effective services?
* Are our staff adequately skilled, engaged and empowered to provide safe, high-quality, person-centred services?
* Do we have a ‘just’ culture and, if not, what are we doing about it?
* What actions are we taking to ensure that inappropriate behaviour is not tolerated?
* How do we support listening to clients and families?
* What actions do we take to empower clients to meaningfully partner in service delivery and design?
* How do we support and promote service improvement in partnership with clients?
* How do we share our quality and safety learnings?
* What is the evidence that we are delivering positive outcomes?
* Do we have a shared understanding of success?

The Community Services Quality and Safety Office will develop further supports to assist providers in implementing quality governance. These may include the following:

#### Training and tools

* Online and in-person training, capacity building and seminars
* A toolkit and associated implementation support for boards
* Leadership development – particularly on quality improvement methodologies
* Data literacy – tools to help use data more effectively such as using the correct measures and reporting and analysing data in a way that is meaningful and purposeful
* A self-audit tool for services to monitor key components of local structure and processes
* Examples of quality governance instruments, documents and tools that are able to be modified to meet organisational needs

#### Implementation support

* Improvement capability – tools and processes that support effective and sustainable improvement efforts
* Guidance on structures and processes that can support quality governance
* Support for implementing evidence-based practice

#### Local area networks

* Supporting networks of community service leaders to focus on collective improvement efforts

#### Client voice

* Tools to better capture and use client voices and to support client participation
* Promotion of the client voice / client voice framework

The quality governance framework and tools will be regularly reviewed and evaluated to ensure they evolve to reflect and respond to need and evidence.

# 9. Monitoring and accountability

Initially, organisations will be supported to adapt to quality governance systems, ensuring that formal quality governance functions and structures are in place and are proportionate to the needs and scope of the organisation. A quality and safety subcommittee of the governance group should be established.

In future, organisational data reporting on a suite of measures will be required to enable analysis, benchmarking and comparison. This will give clarity on systemic strengths and risks; it will help track and share progress across the entire service system.

Public accountability for in-scope organisations will be determined for their quality and safety planning and performance.

An initial focus will be on supporting boards and governing bodies to promote their understanding of accountabilities and responsibilities in relation to quality governance. This focus raises the awareness and supports the intent for all in-scope organisations to report on their performance against quality and safety.

These requirements, following consultation and phasing, will be specified in policy and performance monitoring requirements.

## References

CRANAplus, 2013, *Clinical governance guide for remote and isolated services in Australia*. CRANAplus. Alice Springs.

Duckett S, Cuddihy M, Newnham H, 2016, *Targeting Zero; Report of the Review of Hospital Safety and Quality Assurance in Victoria*, State Government of Victoria, Melbourne.

Ham C, Berwick D, Dixon J, 2016*, Improving quality in the English NHS: a strategy for action*, The Kings Fund, London.

Lander B, 2018, *Oakden a shameful chapter in South Australia’s History*. Independent Commissioner Against Corruption, Adelaide.

Royal commission into institutional responses to child sexual abuses, 2017*, Final report Royal Commission into Institutional Sexual Abuse*, Commonwealth of Australia, ACT.

Safer Care Victoria, 2017, *Delivering high- quality health care - Victorian clinical governance framework*. Victoria. State Government of Victoria, Melbourne.

Victorian Ombudsman, 2017, *Investigation into the management and protection of disability group home residents by the Department of Health and Human Services and Austism Plus*. Melbourne.