[Insert organisation name/logo]

# QUALITY IMPROVEMENT ACTION PLAN

|  |  |
| --- | --- |
| **Plan period** | **[insert start and completion date]** |
| **Version date** | **[insert date of document version]** |
| **Lead role** | **[insert allocated staff member name and role]** |

## SECTION 1. iNTRODUCTION

### 1.1 Overview

This Quality Improvement Action Plan aligns with the [**insert organisation name]** QI program cycle. The Action Plan will be updated by **[insert allocated role e.g. QI coordinator]** throughout the time period to document newly identified activities and to transfer completed activities to the achievements section of this document.

### 1.2 Quality improvement program membership

**[Insert organisation name]** is a member of **[insert QI program provider name e.g. Australian Council on Health Care Standards (ACHS)]** and is undertaking the **[insert name of standards (i.e. Health and Community Service Standards 6th edition or Evaluation and Quality Improvement Program (EQuIP4)]** Standards.

Membership commenced in **[inset date]** as part of the QI cycle.

### 1.3 [Insert name of standards] standards

The **[insert name of standards (i.e. Health and Community Service Standards (EQuIP5)]** Standards are structured into **[insert number e.g. three]** function areas:

* **[insert function area e.g. Clinical/support/corporate function]**
* **[insert other function area]**
* **[Insert other function area]**

Each function area has a number of standards. Each standard has criteria or evidence questions that must be addressed.

**🖌Note\***

For more information on the ACHS EQuIP5 Program refer to the [NADA Quality Improvement Resource Tool for Non Government Drug and Alcohol Organisations.](http://www.nada.org.au/media/41192/nada_achs_equip5_resourcetool_april2013.pdf) This QI Resource Tool provides explanations for EQuIP5’s Standards, Criterion and Elements; and suggests evidence that may assist in developing your organisation’s quality improvement program and attaining accreditation.

\*Please delete note before finalising this plan.

### 1.4 Structure of this Quality Improvement Action Plan

This Action Plan has been structured into the three domains of:

* Planned improvement activities;
* Policy review schedule
* Completed improvement activities

Each domain incorporates the function/section areas of the **[insert name of standards]** and details the activity to be undertaken, person/s responsible and time frames.

In identifying new quality improvement activities and reviewing existing systems and policies, person/s responsible should refer to the standards guides, relevant best practice/evidence guides, and other resources to inform development of the activity.

## SECTION 2. PLANNED IMPROVEMENT ACTIVITIES

|  |
| --- |
| **[INSERT FUNCTION AREA E.G. CLINICAL FUNCTION]** |
| **Activity** | **Relevant standard number** | **Who** | **When** |
| **[insert activity for example: develop Suicide risk screener]**  | **[Insert standard number, to view the standards, refer to section 5 of this plan]** | **[Insert responsible staff member’s name]** | **[Insert date to be completed by]** |
|  |  |  |  |
|  |  |  |  |
| **[INSERT FUNCTION AREA]** |
| **Activity** | **Relevant standard number** | **Who** | **When** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **[INSERT FUNCTION AREA]** |
| **Activity** | **Relevant standard number** | **Who** | **When** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **[INSERT FUNCTION AREA]** |
| **Activity** | **Relevant standard number** | **Who** | **When** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## SECTION 3. POLICY REVIEW SCHEDULE

|  |
| --- |
| **[INSERT FUNCTION AREA E.G. SUPPORT FUNCTION]** |
| **Activity** | **Version**  | **Relevant standard number** | **Who** | **When** |
| **[insert policy name for example: Human Resources Policy]**  | **[insert policy version]** | **[Insert standard number, to view the standards, refer to section 5 of this plan]** | **[Insert responsible staff member’s name]** | **[Insert date to be completed by]** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **[INSERT FUNCTION AREA]** |
| **Activity** | **Version** | **Relevant standard number** | **Who** | **When** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **[INSERT FUNCTION AREA]** |
| **Activity** | **Version** | **Relevant standard number** | **Who** | **When** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

## SECTION 4. COMPLETED IMPROVEMENT ACTIVITIES

|  |
| --- |
| **[INSERT FUNCTION AREA E.G. CLINICAL FUNCTION]** |
| **Activity** | **Relevant standard number** | **Completed** |
| **[insert activity for example: developed Suicide risk screener]**  | **[Insert standard number, to view the standards, refer to section 5 of this plan]** | **[Insert date]** |
|  |  |  |
|  |  |  |
|  |  |  |
| **[INSERT FUNCTION AREA]** |
| **Activity** | **Relevant standard number** | **Completed** |
|  |  |  |
|  |  |  |
|  |  |  |
| **[INSERT FUNCTION AREA]** |
| **Activity** | **Relevant standard number** | **Completed** |
|  |  |  |
|  |  |  |
|  |  |  |
| **[INSERT FUNCTION AREA]** |
| **Activity** | **Relevant standard number** | **Completed** |
|  |  |  |
|  |  |  |
|  |  |  |

## SECTION 5. [INSERT NAME OF STANDARDS]

|  |  |
| --- | --- |
| **Table detail** | **Insert total number** |
| **Standards (highlighted in green)** | **[Insert total number of standards]** |
| **Sub-standards (white cells)** | **[Insert total number of sub-standards]** |
| **Mandatory criteria (highlighted in orange)** | **[Insert total number of mandatory criteria]** |

|  |
| --- |
| **[INSERT FUNCTION AREA E.G. CLINICAL FUNCTION]** |
| **[Insert standard number and detail, for example;****1.1** **clients are provided with high quality care throughout the care delivery process ]** |
| **[insert sub- standard number e.g. 1.1.1]** | **[Insert sub-standard information e.g. Assessment ensures current and ongoing needs of the client are identified.]** |
| **[insert sub-standard number e.g. 1.1.6]** | **[Insert sub-standard information e.g. Systems for ongoing care of the client are coordinated and effective.]** |
|  |  |
|  |  |
| **[Insert standard number and detail]** |
| **[insert sub-standard number]** | **[Insert sub-standard information].** |
|  |  |
|  |  |
| **[Insert standard number and detail]** |
| **[insert sub-standard number]** | **[Insert sub-standard information].** |
|  |  |
|  |  |
| **[Insert standard number and detail]** |
| **[insert sub-standard number]** | **[Insert sub-standard information].** |
|  |  |
|  |  |

|  |
| --- |
| **[INSERT FUNCTION AREA E.G. SUPPORT FUNCTION]** |
| **[Insert standard number and detail]** |
| **[insert sub-standard number]** | **[Insert sub-standard information].** |
|  |  |
|  |  |
|  |  |
| **[Insert standard number and detail]** |
| **[insert sub-standard number]** | **[Insert sub-standard information].** |
|  |  |
|  |  |
|  |  |
| **[Insert standard number and detail]** |
| **[insert sub-standard number]** | **[Insert sub-standard information].** |
|  |  |
|  |  |
|  |  |
| **[Insert standard number and detail]** |
| **[insert sub-standard number]** | **[Insert sub-standard information].** |
|  |  |
|  |  |
|  |  |