

Continual Improvement Procedure

This procedure should be read in conjunction with the 'Governance and Leadership Policy'

Critical Reflection & Feedback

1. Critical reflection will be an ongoing practice within each centre to influence ongoing improvement and quality care.
2. Educators will involve reflective practices both personally and in their programming systems to provide the best outcomes for children in care.
3. All stakeholders will be able to provide feedback on the service and may have their feedback form part of the Quality Improvement Register. Some of the various ways include family surveys, child 'toolbox' talks, Educator's reflective journals.
4. Any feedback from the Department of Education's Compliance Monitoring Visits (Spot Checks) and Assessment and Rating Process will be included in the Quality Improvement Register.

Self-Assessment

1. The self-assessment process will be led by the Compliance Manager.
2. Each quarter the Compliance Manager will select 1 or 2 quality areas to assess and organise a time with the Centre Manager to commence the self-assessment.
3. A self-assessment involves 3 steps, which may be completed over a 2-3 week period. The Compliance Manager will:
 1. Visit the service during a morning or afternoon session to make observations of the current practices and routines in relation to the selected quality areas and record these on a self-assessment audit.
 2. Meet with the relevant centre staff (e.g. Centre Manager and Senior Supervisor) to discuss the observations and relevant documentation. The self-assessment document will be completed at the meeting outlining the centre's strengths and areas of improvements. Giving opportunity to add their contributions.
 3. Transfer the areas of improvement onto the current Quality Improvement Register and return it to the Centre Manager.

Quality Improvement Register

1. A Quality Improvement Register will be kept for each centre.
2. In collaboration with other staff, the Centre Manager will determine the action to be taken for each item on the Quality Improvement Register.

3. The Centre Manager is responsible for communicating the Quality Improvement Register with the team and ensure that the centre is working together in progressing the implementation of any identified improvement areas.
4. The Compliance Manager will periodically review the Quality Improvement Register and follow up with the Centre Manager in regard to outstanding actions to ensure that the register and documentation is kept up to date and all actions are ultimately addressed within a reasonable timeframe.

PROCEDURE VERSION AND REVISION INFORMATION



Authorised by

GENERAL MANAGER

Current version

1

Last review

September 2022