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Continuous Improvement

Policy 12

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1 INTRODUCTION

1.1 QUALITY MANAGEMENT - NDIS PRACTICE STANDARD

NDIS Practice Standards and Quality Indicators states that each Participant benefits from a quality management system relevant and proportionate to the size and scale of the provider, which promotes continuous improvement of support delivery.

1.2 POLICY STATEMENT

Beyond Barriers Australia is committed to continually reviewing and enhancing its services, systems, and processes to ensure high-quality, safe, and effective support for Participants. Continuous improvement is embedded in the culture of the organisation and is a shared responsibility across all levels. All staff are expected to actively contribute to identifying opportunities for improvement, implementing enhancements, and monitoring outcomes to ensure that services remain aligned with best practice, regulatory requirements, and Participant needs.

1.3 SCOPE OF POLICY

This policy applies to all Beyond Barriers Australia staff. It covers all activities related to the planning, delivery, monitoring, and evaluation of support and services under the NDIS. The scope includes organisational systems, service delivery processes, governance practices, and compliance management. Continuous improvement activities encompass feedback collection, incident and complaint review, audits, performance evaluations, and any actions designed to enhance Participant outcomes and service quality.

1.4 VALUES DEMONSTRATED BY BEYOND BARRIERS AUSTRALIA

- a) Beyond Barriers Australia strives to provide Participants with the highest quality support by continually improving processes and service delivery.
- b) Beyond Barriers Australia is committed to accountability by using complaints, feedback, and input from stakeholders to drive continuous improvement and strengthen the quality of our services.
- c) Beyond Barriers Australia aims to work together with Participants, families, staff, and stakeholders to identify opportunities for growth and ensure improvements reflect diverse perspectives.

1.5 DEFINITIONS

Continuous Improvement	An ongoing effort to make services, systems, and processes better over time. It means regularly looking at what's working and what isn't, then making changes to improve outcomes.
Governance	The way the organisation is directed, controlled, and held accountable. It includes leadership, decision-making, policies, and systems that guide how the organisation works.
Service Delivery	The way support or care is provided to Participants (clients or service users). It includes staff actions, processes, and methods used to meet Participants' needs.
Feedback Channels	Different ways people can give feedback, such as surveys, complaints, or reports.
Feedback and Complaints Register	A central record where all feedback and complaints are logged and tracked.
Corrective or Preventive Actions	Steps taken to fix issues or prevent them from happening again.
Continuous Improvement Register	A document that records and tracks all improvements made by the organisation.
Audit	A formal review of how well the organisation is meeting required standards and performing.
Quality Management System	A structured way of managing and improving the quality of services, including policies, feedback, and reviews.

2 CONTINUOUS IMPROVEMENT PROCESS

2.1 CONTINUOUS IMPROVEMENT COMMITMENT

Beyond Barriers Australia actively pursues and demonstrates continuous improvement across all aspects of governance and operations, with the goal of consistently enhancing services for Participants. This commitment ensures Beyond Barriers Australia remains responsive, adaptable, and aligned with the evolving needs of Participants and the wider community.

The organisation maintains systems that support the ongoing planning and monitoring of quality initiatives at both the organisational and service delivery levels. These systems foster staff and stakeholder participation, facilitate regular assessment of standards, drive continuous quality improvement, and coordinate evaluations, audits, and reviews.

2.2 FEEDBACK CHANNELS

Beyond Barriers Australia routinely collects information on its services to monitor progress, recognise achievements, and identify areas for improvement. Information is gathered through a range of mechanisms, including [Feedback Surveys](#), reviews by Participants or other stakeholders, analysis of incidents, complaints, hazard reports, observations, and reviews of policies, records, and systems.

Findings from surveys, stakeholder interactions, and staff initiated feedback are reviewed by the Director or their delegate and included in the [Feedback and Complaints Register](#). Appropriate corrective or preventive actions are implemented when adverse trends or areas of concern are identified.

Wherever practical, results and findings are shared with relevant staff, and their input is sought to develop effective solutions for continuous improvement.

2.3 STAFF INITIATED FEEDBACK

Staff are encouraged to provide feedback or propose changes or additions to the quality management system by sending an email to the Director including a description of an issue they have observed and suggestions for ways to resolve it.

Upon receiving the email, the Director or their delegate must:

- a) Clarify the issue by consulting with staff and/or stakeholder;
- b) Identify and assess potential solutions, considering the needs of the organisation, staff, Participants, and stakeholders. Actions may include updating policies or system redesigns;
- c) Record significant improvements in the Continuous Improvement Register;
- d) Nominate the individual responsible for implementing the solution with a timeframe for completion;
- e) Provide the outcome to all involved regarding the actions taken;
- f) Evaluate the effectiveness of the implemented solution.
- g) File a copy of the initial email and document the actions taken in the closed section of the Quality Improvement Folder.

2.4 NDIS REGISTRATION

Beyond Barriers Australia is required to undergo scheduled audits as part of the registration process to become a Registered Provider in accordance with the NDIS Practice Standards determined by the NDIS Commission.

Beyond Barriers Australia must maintain compliance with the Practice Standards at all times to maintain registration, and this provides a structured framework to evaluate organisational performance and outcomes, and to identify opportunities for improvement.

Findings and recommended improvements from the audit process are summarised and incorporated into continuous improvement for Beyond Barriers Australia. All improvements will be documented in the Continuous Improvement Register for monitoring.

2.5 INTERNAL AUDITS

Beyond Barriers Australia conducts internal audits every six months as part of its continuous improvement processes. These audits are undertaken during both management and staff meetings. Management meeting audits focus on operational processes, systems, and organisational compliance, while staff meeting audits involve reviewing Participant files to ensure case notes, forms, documentation, and other compliance requirements are complete, accurate, and up to date.

2.6 IMPROVEMENTS FROM RESEARCH AND LITERATURE

Beyond Barriers Australia will access and share information that enhances the quality and effectiveness of the services provided. This includes reports from government bodies and other organisations on evidence-based practices, informed care models, and emerging trends in casework and service delivery.

Periodically, Beyond Barriers Australia may undertake research projects to document and validate its own best-practice approaches. Findings from these projects are shared internally across the organisation and with relevant stakeholders to support the promotion and implementation of continuous quality improvement initiatives.

3 APPENDIX

RELATED DOCUMENTS

[Feedback Surveys](#)

[Feedback and Complaints Register](#)

VERSION AND UPDATE HISTORY

Version	Date Approved	Nature of Changes	Approved By	Date of Review
V1	22/09/2025	Creation in accordance with practice standards.	Tiffany Kelly	22/09/2026
V2	30.06.2026	Update to internal audit schedule.	Tiffany Kelly	30.06.2027